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## Form 990-PF

#### **Return of Private Foundation**

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

OMB No. 1545-0052

Open to Public Inspection

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

For calendar year 2016 or tax year beginning and ending A Employer identification number Name of foundation SUMMERS FAMILY FOUNDATION, INC Number and street (or PO box number if mail is not delivered to street address) Room/suite 33-1063519 **81 BUTTERNUT LANE** B. Telephone number (see instructions) City or town, state or province, country, and ZIP or foreign postal code **BASKING RIDGE** 07920 609-203-4583 Foreign province/state/county Foreign postal code Foreign country name C If exemption application is pending, check here G Check all that apply Initial return D 1. Foreign organizations, check here 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 Check type of organization. Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust X Other taxable private foundation J Accounting method Fair market value of all assets at ☐ Cash ☒ Accrual F If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 652,871 (Part I, column (d) must be on cash basis Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment for chantable amounts in columns (b), (c), and (d) may not necessarily expenses per income purposes books equal the amounts in column (a) (see instructions)) (cash basis only) 16,200 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► if the foundation is **not** required to attach Sch. B. 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 8.756 8.756 5a Gross rents b Net rental income or (loss) Revenue 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less. Cost of goods sold Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) Total. Add lines 1 through 11 24,956 8,756 0 12 Compensation of officers, directors, trustees, etc. 13 Expenses Other employee salaries and wages 14 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) Inistrative C Other professional fees (attach schedule) 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion Operating and Admi 20 Occupancy 21 Travel, conferences, and meetings . 22 Printing and publications . . 23 Other expenses (attach schedule) 610 24 Total operating and administrative expenses. Add lines 13 through 23 610 25 Contributions, gifts, grants paid 82.475 82.475 26 Total expenses and disbursements. Add lines 24 and 25 83,085 0 0 82,475 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements -58,129 а 8,756 Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2016)

Da	rt II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	Er	nd of	f year
Га		Dalance Sneets	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash-non-interest	-bearing				
	2	Savings and tempo	rary cash investments				. <del></del>
	3	Accounts receivable	e <b>&gt;</b>	e	, e		
		Less allowance for	doubtful accounts	1			
	4	Pledges receivable					
			doubtful accounts				
	5	Grants receivable					
	6	Receivables due fro	om officers, directors, trustees, and other				· · · · · · · · · · · · · · · · · · ·
		disqualified persons	s (attach schedule) (see instructions)				1
	7		receivable (attach schedule)	2 G 10 2 2 1	r - nie	^ 446	1 m
		Less allowance for dou					
S	8	Inventories for sale			•		
ssets	9		and deferred charges .				-
Asi	10a		I state government obligations (attach schedule)				
•	b		orate stock (attach schedule) .		· <del>-</del>		
	C		orate bonds (attach schedule)				
		•	Idings, and equipment basis	w F	F 42 F F		211 m 21 g = m
	11		t f . tt b b d . d . N	<del> </del>		_	<u></u>
	40	Investments—mort				_	
	12		• •	711,000	652,8	971	652,871
	13	Investments—other		7 11,000	032,0	0/ 1	032,671
	14	Land, buildings, and ed					
		•	preciation (attach schedule)			_	
	15	Other assets (desc					
	16	•	completed by all filers—see the	744 000	050	074	050 074
		instructions Also, s		711,000	652,8	8/1	652,871
	17		and accrued expenses				* = . ,
Ś	18	Grants payable					
Liabilities	19	Deferred revenue					
를	20		directors, trustees, and other disqualified persons				
<u>.e</u>	21	• •	er notes payable (attach schedule)			_	
_	22	Other liabilities (de					1
	23	Total liabilities (ad	dd lines 17 through 22)	0	<del></del>	0	
Se			follow SFAS 117, check here s 24 through 26 and lines 30 and 31.				
2	24	Unrestricted	- 1 anotg. 10 and more of and on	711,000	652.8	871	
alances	25	Temporarily restrict	 ted	711,000		<u> </u>	
	26	Permanently restrict					
Б	20	•			:		
Net Assets or Fund B		and complete line					
5	27	•	principal, or current funds	1			
S	28		urplus, or land, bldg., and equipment fund				
set	29		accumulated income, endowment, or other funds				
Š	30			711,000	652,	271	1
, t	1		r fund balances (see instructions)	711,000	032,	01 1	
ž	31		d net assets/fund balances (see	711 000	652	Q71	1
Б		instructions)	hanges in Net Access or Fund Ralances	711,000	652,	0/ 1	<u></u>
	Total		hanges in Net Assets or Fund Balances		with T		Γ
1			palances at beginning of year—Part II, column (a	, inte ou (must agree	AAIGH	1	711 000
_			ed on prior year's return) .		· }		711,000
2		r amount from Part I		Inventore mades de	·	2	-58,129
3			ded in line 2 (itemize) ► Unrealized Fidelity	Investment market de	epreciation	3	050.074
4		lines 1, 2, and 3 .				4_	652,871
5			n line 2 (Itemize) Unrealized Fidelity Inves			5	650 074
_6	iotal	net assets of fund b	palances at end of year (line 4 minus line 5)—Pa	rcii, columni (b), iine 3	ıv İ	6	652,871

Part	V Capital Gains an	d Losses for Tax on Investr	ment Income			
		he kind(s) of property sold (e.g., real estate ouse, 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						
b						-
<u> </u>						
<u>d</u>			· · · · · ·			1
е	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		in or (loss) (f) minus (g)
а						
b	· · · ·					
С						
d	1.5.5					
е						
	Complete only for assets s	howing gain in column (h) and owner	d by the foundation	n on 12/31/69		ol (h) gain minus
	(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (ı) I (j), ıf any		ot less than -0-) <b>or</b> (from col (h))
а			<u> </u>			
<u>b</u>	·-·					
<u> </u>						
d_					<del></del>	
ее		l frain	, also enter in Pa	rt Line 7	1	
2	Capital gain net income o	r (net canital inss) 1 °	s), enter -0- in Pa	<b>&gt;</b>	2	(
3		n or (loss) as defined in sections I, line 8, column (c) (see instruction	1222(5) and (6)			
	Part I, line 8			}	3	(
Part		der Section 4940(e) for Red	uced Tax on N	let Investment	Income	
Was t		ve this part blank section 4942 tax on the distributa qualify under section 4940(e) Do			e period?	Yes X No
1		ount in each column for each yea	r, see the instruc	tions before makii	ng any entries	
Cal	(a) Base penod years endar year (or tax year beginning ii	(b) Adjusted qualifying distribution	ns Net value	(c) of nonchantable-use a		(d) stribution ratio divided by col (c))
	2015		41,040	70	0,335	0 05860
	2014		52,714		0,497	0 09946
	2013		71,839		1,335	0 10700
	2012		92,473		4,894	0 12249
	2011		35,051	59	2,970	0.14343
2	Total of line 1, column (d)				2	0 53100
3	•	for the 5-year base period—divid dation has been in existence if lead		e ∠ by 5, or by the 	3	0 10620
4	Enter the net value of nor	ncharitable-use assets for 2016 fr	om Part X, line 5		4	643,07
5	Multiply line 4 by line 3				5	68,29
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)			6	8
7	Add lines 5 and 6		-		7	68,38
8	Enter qualifying distribution				8	82,47
	If line 8 is equal to or great VL instructions	ater than line 7, check the box in	Part VI, line 1b, a	and complete that	part using a 1% to	ax rate See the

Part \	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   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		88	<del></del>
	here ► X and enter 1% of Part I, line 27b		` -	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
_	Part I, line 12, col. (b)  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  2		0	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Add lines 1 and 2  3		88	
3	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		- 00	
4 5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		88	
6	Credits/Payments			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 <b>6a 6a</b>			
b	Exempt foreign organizations—tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)  600			
đ	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d		600	
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		512	
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ► 512 Refunded ► 11		0	
	/II-A Statements Regarding Activities	<del></del>	Yes	Na
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	162	No X
<b>b</b>	participate or intervene in any political campaign?  Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	Ia		
b	Instructions for the definition)?	1 <sub>b</sub>		Х
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	ນ້າຍ ເສົາ	- د	, , ,
	on foundation managers > \$			,
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? .	2		X
	If "Yes," attach a detailed description of the activities	}		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?	4a 4b	N/A	^-
b	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	19/7	х
5	If "Yes," attach the statement required by General Instruction T.	-		<del>  ^-</del>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NJ		[	ł
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			ļ
	(or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)		<b> </b>	
	or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If			] ,,
40	"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		x
			Щ.	

,	ı				
orm 99	90-PF (2016) SUMMERS FAMILY FOUNDATION, INC.	33-1063	519	Pa	age 5
Part	VII-A Statements Regarding Activities (continued)				
1	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		i	Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	·	11		<u>_x</u>
2	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		l	ŀ	
	person had advisory privileges? If "Yes," attach statement (see instructions)		12		<u> </u>
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	L	13	X	
	Website address ▶ summersfamilyfoundation				- <b></b>
14		09-203-4	583		<b></b>
		7920			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year.	: 1			▶ ∟
		<u> </u>		Yes	No
16	At any time during calendar year 2016, 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?		16	163	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If	-	10		
	"Yes," enter the name of the foreign country	ł		Į	
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
· u	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Ĭ	Yes	No
1a	During the year did the foundation (either directly or indirectly):	<u> </u>			
14	The state of the s	X No		"	5
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	<u> </u>	1	`	
		X No	- 1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	X No			
	- · · ·	X No	ł	j	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		l		
	the benefit or use of a disqualified person)?	X No .		بر ت	د مان د سه در
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	-	٠٠	- }	
	foundation agreed to make a grant to or to employ the official for a period after				
		X No		Ì	
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in	L			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	[	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here	▶□		_	212
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		-, 	- د ع	; · · · · ·
	were not corrected before the first day of the tax year beginning in 2016?	L	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			j	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and	. I			
	6e, Part XIII) for tax year(s) beginning before 2016?	즈 No			ĺ
	If "Yes," list the years 20 , 20 , 20 , 20		٠.		ъ `,
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	_	l		•
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	°  -	26	N/A	ļ
_	all years listed, answer "No" and attach statement—see instructions)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	· }	2b	IN/A	-
C					
За	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	ļ			
Ja		X No			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or				
U	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				İ
	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)	٦	3b	N/A	<u> </u>

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?

Form **990-PF** (2016)

SUMMERS FAMILY FOUNDATION, INC

Part	VII-B Statements Regarding Activities	for Wi	nich Form 4	1720 N	lay Be Re	quirec	(contin	ued)		
5a	During the year did the foundation pay or incur any									
	(1) Carry on propaganda, or otherwise attempt to it						Yes	X No		
	(2) Influence the outcome of any specific public ele		ee section 49	955), or	to carry on	,				
	directly or indirectly, any voter registration drive					•	∐ Yes	⊠ No	1000	
	(3) Provide a grant to an individual for travel, study						∐ Yes	X No		
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)	charitat	ole, etc , orga	nızatıor 	described	ın	☐ Yes	X No		************************************
	(5) Provide for any purpose other than religious, ch purposes, or for the prevention of cruelty to chil			terary, o	r education	al	Yes	X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the t	ransacti	ons fail to qu	alify und	der the exc	eptions	describe	d in		
	Regulations section 53 4945 or in a current notice								5b N	/A
	Organizations relying on a current notice regarding	disaste	er assistance	check h	nere .			<b>▶</b> 🗓		
С	If the answer is "Yes" to question 5a(4), does the forbecause it maintained expenditure responsibility for			nption fr	om the tax		☐ Yes	X No		
	If "Yes," attach the statement required by Regulation									
6a	Did the foundation, during the year, receive any fur	nds, dire	ectly or indire	ctly, to p	ay premiur	ns	Yes	X No		12 1
	on a personal benefit contract?	disacth	. or indirectly		oroonal bon	ofit oon	_	<u> </u>	6b	X
b	Did the foundation, during the year, pay premiums, If "Yes" to 6b, file Form 8870	airecuy	or manecuy,	on a pe	ersonal ben	ent con	li act /		- OD	
70	At any time during the tax year, was the foundation a pa	urtu to a s	arabibited tax of	chaltar tr	ancaction?		Yes	□No		
7a b	If "Yes," did the foundation receive any proceeds o					e transa			7b	Х
	VIII Information About Officers, Direct	ors. Tr	ustees. Fo	undati	on Manad	iers. H	lighly P	aid En	ployees	
	and Contractors	<b>,</b>				•	•			•
1	List all officers, directors, trustees, foundation	manage	ers and their	compe	nsation (s	ee instr	uctions)			
	(a) Name and address	hou	e, and average rs per week ed to position	(If n	mpensation ot paid, ter -0-)	emplo	Contribution yee benefit erred compe	plans	(e) Expense other allo	
GREC	GORY F SUMMERS	PRES								
6 NO	BLE LANE GREENBROOK, NJ 08812		5 00		0					
	IK J SUMMERS, CPA	TRUS								
81 BL	JTTERNUT LANE BASKING RIDGE, NJ 07920	ļ	7 00	ļ	0					
		<u> </u>								
2	Compensation of five highest-paid employees (	other ti	han those in	cluded	on line 1	see ins	truction	s) If no	ne enter	
-	"NONE."	ouici u	nan trioco m	0.0000	· · · · · · · · · · · · · · · · · · ·			٥,,	,	
	(a) Name and address of each employee paid more than \$50,000		(b) Title, and a hours per v devoted to pe	veek	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expens other allo	
NON										
									İ	
						,				
		<del></del>								
		-								
							L			
Total	number of other employees paid over \$50,000						•	<b>•</b>		

Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)		
3 Five h	ighest-paid independent contractors for professional services (	see instructions). If none, enter "NOI	VE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
· <b></b>			
· · · · · · · · · · · · · · · · · · ·			
Tatal mumbas	of others recovery over \$50,000 for professional convices		
Iotal number	of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	
Part IX-A	Summary of Direct Charitable Activities		· · · · · · · · · · · · · · · · · · ·
	ation's four largest direct chantable activities during the tax year. Include relevant statisticand other beneficiaries served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
1 N/A		· · · · · ·	
12122222			
2	***************************************		
3			
			Ì
<b>+</b>			
4			
		<del></del>	
Part IX-B	Summary of Program-Related Investments (see inst	ructions)	<u> </u>
	wo largest program-related investments (see inst		Amount
	wo largest program-related investments made by the foundation during the tax year on t	inies i and 2	Zanount
1 N/A			[
2			
A9 -25		······································	<del>                                     </del>
	ram-related investments. See instructions		
3			
Total. Add lin	es 1 through 3	<u>.                                    </u>	

Form **990-PF** (2016)

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	n foundation	ons,
	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	652,871
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	652,871
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	652,871
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	9,793
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	643,078
_6	Minimum investment return. Enter 5% of line 5	6	32,154
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	11	32,154
2a	Tax on investment income for 2016 from Part VI, line 5 .   2a   8	8	<u> </u>
b	Income tax for 2016 (This does not include the tax from Part VI) . 2b		
C	Add lines 2a and 2b	2c	88
3	Distributable amount before adjustments Subtract line 2c from line 1	3	32,066
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	32,066
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
_	line 1	7	32,066
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	82,475
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	82,475
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	88
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	82,387
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when	ether the fou	ndation
	qualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2016)

art )	Undistributed Income (s	see instructions)				<del></del>
1 I	Distributable amount for 2016 from l	Part XI	(a) Corpus	(b) Years pnor to 2015	(c) 2015	( <b>d)</b> 2016
	line 7		·	-		32,066
	Undistributed income, if any, as of the e	end of 2016				
	Enter amount for 2015 only .	3. 20.10			0	
	Total for prior years 20 , 2	0 ,20	-			
	Excess distributions carryover, if any				-	
	From 2011	55,794				
	From 2012 .	55,172				
	From 2013 .	38,545				
	From 2014	31,455			- 4	
	From 2015	6,462				
	Total of lines 3a through e	- 0, 102	187,428			
	Qualifying distributions for 2016 from	m Part XII	101,120			
	line 4 ▶ \$ 82,475	" are XIII,				
	Applied to 2015, but not more than	line 2a				
	Applied to undistributed income of p	The second secon				
	(Election required—see instructions		-			-
	Treated as distributions out of corpu					
	required—see instructions) .	35 (Election				
	Applied to 2016 distributable amour	,, ·				32,066
	Remaining amount distributed out of		50,409			<u> </u>
	Excess distributions carryover appli		50,100			
	(If an amount appears in column (d)					
	amount must be shown in column (a)		. 1			
	Enter the net total of each column					
	indicated below:	1 4 5				
	Corpus Add lines 3f, 4c, and 4e St	ubtract line 5	237,837			
	Prior years' undistributed income. S		201,001			
	line 4b from line 2b .	, abardot	ı	0		
	Enter the amount of prior years' und	distributed				
	income for which a notice of deficie					
	been issued, or on which the section	- 1				
	tax has been previously assessed					
	Subtract line 6c from line 6b Taxab					
ŭ	amount—see instructions			2		
e	Undistributed income for 2015 Sub	otract line				
•	4a from line 2a Taxable amount—s					
	Instructions				o	
f	Undistributed income for 2016 Sub	otract lines				
•	4d and 5 from line 1. This amount r					
	distributed in 2017					
7	Amounts treated as distributions ou	ut of corpus				
-	to satisfy requirements imposed by	•				
	170(b)(1)(F) or 4942(g)(3) (Election				•	
	required—see instructions).	Í				
8	Excess distributions carryover from	2011 not				
	applied on line 5 or line 7 (see instr	L	55,794		'	
9	Excess distributions carryover to					
•	Subtract lines 7 and 8 from line 6a	,	182,043		ļ	
10	Analysis of line 9					
a	Excess from 2012	55,172			1	
b	Excess from 2013	38,545				
c	Excess from 2014	31,455				
d	Excess from 2015	6,462				
-	Excess from 2016	50.409				

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

Any submission deadlines

factors

Supplementary Information (continued) ' Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor 200 Club of Morris County 501 c 3 225 Education P O Box 1743 Morristown, NJ 07926 Mornstown Soup Kitchen 501c3 Medical Research 500 36 South Street Morristown, NJ 07960 Fordham University 501c3 Education help 40,000 for the poor Rose Hill Campus Bronx, NY 06371 Medical Research 1,000 Somerset County Cancer Center 501c 3 75 Veronica Ave Somerset, NJ 08873 1,000 NJ State Police FAST 501c3 Education 85 US 206 Netcong, NJ 87857 Green Brook PBA 501c3 Education 1.250 Local 395 Green Brook, NJ 08812 Gary Sinese Foundation 501c3 Medical Research 10,000 PO Box 5008 Studio City, CA 91614 **DRI** Foundation 501c3 Education 5,000 119 West 23 Street New York, NJ 10010 Youth Education 10,000 Seton Hall University 501c3 400 South Orange Avenue South Orange, NJ Watchung PBA 501c3 **Educational Services** 1,500 840 Somerset Street Watchung, New Jersey 07069 St Mary's Church 501c3 10,000 Youth Program 125 Mountain Blvd Watchung, NJ 07069 Misc. Other 501c3 Youth Programs 2,000 3a 82,475 Total Approved for future payment **Total** 0 Form 990-PF (2016) SUMMERS FAMILY FOUNDATION, INC. 33-1063519 Page 12 Part XVI-A Analysis of Income-Producing Activities Unrelated business income Excluded by section 512, 513, or 514 Entergross amounts unless otherwise indicated (e) Related or exempt (d) (a) (b) (c) function income Business code Amount Exclusion code Amount (See instructions) 1 Program service revenue b Fees and contracts from government agencies Membership dues and assessments 2 Interest on savings and temporary cash investments . 8,756 523000 Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property **b** Not debt-financed property Net rental income or (loss) from personal property 6 Other investment income . 7 Gain or (loss) from sales of assets other than inventory 522299 Net income or (loss) from special events . Gross profit or (loss) from sales of inventory 10 Other revenue a Fidelity Investsment-Unrealized 12 Subtotal Add columns (b), (d), and (e) 8,756 13 Total. Add line 12, columns (b), (d), and (e) 13 8.756 (See worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions) ▼

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1			rectly or indirectly en e Code (other than se						bed		Yes	No
			•	cuon son(c)(s) organ	iizalions) (	or in secuc	on ozi, rela	ung to				
_	-	cal organizations			_+	akan af				78/8 · · · ·		3,424/ins
а			orting foundation to a	i nonchantable exem	pt organiz	ation of				40(4)		
		ash .	•				• •	•	•	1a(1)		_ <u>X</u>
		ther assets	•			•				1a(2)	أوسنا	Х
b		r transactions								41-74		
			a noncharitable exem		•			-	•	1b(1)		<u>X</u>
			ts from a noncharitab		on		•		-	1b(2)		_X_
		•	equipment, or other a	assets		-	•			1b(3)	_	<u>X</u>
		eimbursement ar					-	-		1b(4)		_X_
		oans or loan guar						-		1b(5)		_X_
			rvices or membership	=			•		•	1b(6)		_X_
С			quipment, mailing lists					-		1c		_ <u>X</u> _
d			he above is "Yes," com									
	value	of the goods, othe	er assets, or services gi	ven by the reporting for	undation I	f the found	ation receive	ed less tha	n fair mar	ket <sub>.</sub>		
	value	in any transaction	or sharing arrangemen	nt, show in column (d)	the value o	of the goods	s, other asse	ts, or serv	ces recei	ved.		
(a) Line	no	(b) Amount involved	(c) Name of nonch	nantable exempt organization	on	(d) Descri	ption of transfe	ers, transacti	ons, and sh	aring arrai	ngemen	ts
								_				
	-							_				
				<del> </del>								
			<u> </u>					<u></u>				
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	_	· .,	· · · · · · · · · · · · · · · · · · ·	<del></del>	-			•••				
	~ †			<del></del>						•		
				<del></del>								
							·		<del></del>			
2a	ls the	foundation direc	tly or indirectly affiliat	ted with or related to	one or m	ore tax-ex	empt organ	izations		<del></del>		
			01(c) of the Code (oth						. Г	Yes	Πи	o
ь			following schedule.							-		
		(a) Name of organ		(b) Type of on	canization	- I		(c) Descrip	tion of relati	onship		
		(2)		(0) ()	<u> </u>			<del>(-,</del>				
					<del></del>						-	
		<del></del>			<del>-</del>	<del>-  -</del>						
	-							··· <u></u>				
	Unde	r penalties of penury. I dec	lare that I have examined this ret	turn, including accompanying sci	hedules and sta	itements, and to	the best of my kr	owledge and b	elief, it is true		_	
Sign			op of preparer (other than taxpay							RS discuss	4b.a4	
		71 V		11/12/2017	ты	ISTEE			with the	preparer sho	wn belo	w
Here	Sign	nature of officer or trus	stee	Date	Title	SIEE			(see instr	ructions)?	X Yes	No
		Plant Type preparer		Preparer's signature			Date	<del></del>	_	PTIN		==
Paid		. mis type preparers	o name	i Toparoi a aigisature					ck [] if	''''		
Prepa	ırer	<u> </u>					<del> ,</del>		employed	Ь		
Use (		Firm's name						Firm's EIN	<u>-</u>			
		Firm's address						Phone no		00	Λ DE	

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

Department of the Treasury Internal Revenue Service

Name of the organization

SUMMERS FAMILY FOUNDATION, INC

### **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

2016

Employer identification number 33-1063519

Organiz	ation type (check one)	
Filers of	:	Section:
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization
	{	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 99	0-PF [	501(c)(3) exempt private foundation
	[	4947(a)(1) nonexempt charitable trust treated as a private foundation
	1	X 501(c)(3) taxable private foundation
Check if	vour organization is cove	ered by the General Rule or a Special Rule.
	nly a section 501(c)(7), (8	3), or (10) organization can check boxes for both the General Rule and a Special Rule See
General	Rule	
		Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 perty) from any one contributor. Complete Parts I and II. See instructions for determining a utions.
Special	Rules	
	regulations under section 13, 16a, or 16b, and that	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the ins 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line is received from any one contributor, during the year, total contributions of the greater of (1) amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
	contributor, during the ye	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, urposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III
	contributor, during the ye contributions totaled mor during the year for an ex	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ear, contributions exclusively for religious, charitable, etc., purposes, but no such re than \$1,000. If this box is checked, enter here the total contributions that were received clusively religious, charitable, etc., purpose Don't complete any of the parts unless the this organization because it received nonexclusively religious, charitable, etc., contributions during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Page 2 Employer identification number Name of organization 33-1063519 SUMMERS FAMILY FOUNDATION, INC. Contributors (See instructions) Use duplicate copies of Part I if additional space is needed. Part I (c) (b) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. GREGORY F SUMMERS Person \_\_\_1 6 NOBLE LANE **Payroll** GREEN BROOK NJ 08812 Noncash 16,200 Foreign State or Province (Complete Part II for noncash contributions) (b) (c) (d) (a) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person Payroll Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions.) (b) (c) (d) (a) Total contributions

110.	Name, address, and ZIF + 4	Total contributions	Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroli Noncash (Complete Part II for noncash contributions)
		Schedute	B (Form 990, 990-EZ, or 990-PF) (201

SUMMERS FAMILE FUUNDALIUN, INC.

Part I, Line 18 (990-PF) - Taxes

		<b>3</b>	•		0	
L		Revenue			Disbursements	
		and Expenses	Net Investment	Adjusted	for Charitable	
	Description	per Books	Income	Net Income	Purposes	
Ĺ	1 Tax on investment income	0				
J						

Part I, Line 23 (990-PF) - Other Expenses

	610	0	0	0
	Revenue and			Disbursements
	Expenses	Net Investment	Adjusted Net	for Charitable
Description	per Books	Income	Income	Purposes
1 Office expense	610	0		

SUMMERS FAMILY FOUNDATION, INC.

33-106351

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

										3	<b>&gt;</b>	
	Name	Check "X" if Business	Street		State	State Zip Code	Foreign Country	Title	Avg Hrs Per Week	Avg Hrs Per Week Compensation	Benefits	Expense Account
GREGORY 1	GREGORY F. SUMMERS		6 NOBLE LANE	GREENBROOK	O Z	18812		PRES	900	0		,
FRANK J. SI	FRANK J. SUMMERS, CPA		81 BUTTERNUT LANE	BASKING RIDGE	O Z	07920		TRUSTEE	7 00	0		!

SUMMERS FAMILY FOUNDATION, INC.

Part II, Line 13 (990-PF) - Investments - Other

		000,11	1 /0'700	1/8/709
	Basis of	Book Value	Book Value	FMV
Asset Description	Valuation	Beg of Year	End of Year	End of Year
1 FIDELITY INVESTMENTS	FMV	711,000	652,871	652.87

33-10635