Return of Private Foundation

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

OMB No. 1545-0052

* Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For c	<u>alen</u>	<u>dar year 2017 or tax year be</u>	ginning		2017	7, and 6	<u>endin</u>	9_		, 20
Name	of fou	undation							r identification numb	er
•		INDATION							13-7113206	
Numb	oer and	street (or P O. box number if mall is r	not delivered to street address)	F	Room	/sulte	B Te	lephon	e number (see instruct	lons)
1279	TRAF	ALGAR STREET							201 - 836-561	6
City o	r town	n, state or province, country, and ZIP o	r foreign postal code				C If	exempt	ion application is pend	ling, check here ▶
TEAN	IECK	NEW JERSEY 07666						·		-
G C	heck	all that apply: Initial retu	ım 🔲 İnitial return	of a former pu	ublic	charity	D 1.	Foreigi	n organizations, check	here ▶
		☐ Final retu	m 🔲 Amended r	return			,	Foteig	n organizatıons meetin	 n the 95% test
		☐ Address	change 🔲 Name char	nge		. 1		check	here and attach comp	utation · · ▶[
н с	heck	type of organization: 🗹 Se	ection 501(c)(3) exempt p	rıvate foundat	ion	OW			foundation status was 07(b)(1)(A), check here	_
<u> </u>	ectio	n 4947(a)(1) nonexempt charit	able trust Other tax	able private f	ound	latión	56	Cuon 3	Or(D)(T)(A), Chack here	
		arket value of all assets at	J Accounting method	: 🗌 Cash 🛭	2 A	ccrual	F If 1	he fou	ndation is in a 60-mon	th termination
		year (from Part II, col. (c),	Other (specify)						ction 507(b)(1)(B), chec	
) ▶ \$ 10,810	(Part I, column (d) must be	on cash basis.)					
Par	t I	Analysis of Revenue and Ex		(a) Revenue a	nd	GLA NI-A	Incontr		fol Adlivatori was	(d) Disbursements
		amounts in columns (b), (c), and (d)		expenses pe books		(b) Net ir	investi icome	Then	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see insti								(cash basis only)
,	1	Contributions, gifts, grants, etc.,		20	,000					
	2	Check ► ☐ if the foundation is n	•							
UI.	3	Interest on savings and temp	•		8			8		
1]	4	Dividends and interest from s								
İ	5a	Gross rents						-		
	þ	Net rental income or (loss)								
의	6a	Net gain or (loss) from sale o								
ا <u>و</u>	b	Gross sales price for all assets on								
Revenue	7	Capital gain net income (fron							<u> </u>	
Œ	8	Net short-term capital gain .								
ŀ	9								<u> </u>	
1	10a	Gross sales less returns and allo						Ð	ECEIVED	
	b	•	· ·					<u> </u>	COLIVED	
	C	Gross profit or (loss) (attach	= -				- ~	1	00 1 0 2010	XI
	11	Other income (attach schedu	•				ြို့	1	APR 1 9 2018	
\rightarrow	12	Total. Add lines 1 through 11		20	,008		ď	8		
တ္က 📗	13	Compensation of officers, di							GDEN, UT	
2	14	Other employee salaries and							ODLIV, OI	<u> </u>
	15 16-	Pension plans, employee ber								
Ш	16a	Legal fees (attach schedule). Accounting fees (attach schedule).	RECEIVED							-
	b	Other professional fees (attach								+
Operating and Administrative	С 17		AR 27 2018							-
tt.	17 18	Interest								
. ا ⊇َ	19		e) and depletion					-		
ڔٳڲؚ	19 20	Depreciation (attach schedul Occupancy	GDEN, UT				*			
Ă١,	20 21	Travel, conferences, and med								
힏	22									-
<u>a</u>	23	Other expenses (attach sche								
و اق	24	Total operating and adm								
<u>_</u> [<u>a</u>					i					
8	25	Contributions, gifts, grants p		25	,000					25,00
o ;	26	Total expenses and disbursem	J.		,000				 -	25,00
	<u>27</u>	Subtract line 26 from line 12:		23	,555					20,00
1	a	Excess of revenue over expen		(4	992)					
		Net investment income (if n		\7,	.,2,			8	**** · · · · · · · · · · · · · · · · ·	
	c									
		work Reduction Act Notice, see			at Na	11289X	,			orm 990-PF (2017

Do	7111	Attached schedules and amounts in the description column	Beginning of year	End o	year
Fal		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(b) Book Value	(c) Fair Market Value	
可	1	Cash - non-interest-bearing	15,802	10,810	10,810
- 1	2	Savings and temporary cash investments [
	3	Accounts receivable ▶			
ļ		Less: allowance for doubtful accounts ▶			
- 1	4	Pledges receivable ▶			
I I		Less: allowance for doubtful accounts ▶			····
- 1	5	Grants receivable			
- 1	6	Receivables due from officers, directors, trustees, and other			
j		disqualified persons (attach schedule) (see instructions)			
- 1	7	Other notes and loans receivable (attach schedule) ▶			
		Less¹ allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			·
SS	9	Prepaid expenses and deferred charges			
₹	10a	Investments – U.S. and state government obligations (attach schedule)			
Į	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)		·	
- [11	Investments-land, buildings, and equipment basis ▶			
-		Less: accumulated depreciation (attach schedule) ▶			
ļ	12	Investments – mortgage loans			
- 1	13	Investments—other (attach schedule)			
1	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶		· · · · · · · · · · · · · · · · · · ·	
- 1	15	Other assets (describe ►			
- 1	16	Total assets (to be completed by all filers—see the			
_		instructions. Also, see page 1, item I)	15,802	10,810	10,810
- 1	17	Accounts payable and accrued expenses			
S	18	Grants payable		······································	
Liabilities	19	Deferred revenue			
這	20	Loans from officers, directors, trustees, and other disqualified persons			
밀	21	Mortgages and other notes payable (attach schedule)			
_ [22	Other liabilities (describe ►)			
	23	Other liabilities (describe) Total liabilities (add lines 17 through 22)			
alances		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26, and lines 30 and 31.			
5	24	Unrestricted			
ᇣ	25	Temporarily restricted			
m	26	Permanently restricted			
립		Foundations that do not follow SFAS 117, check here ▶ □			
or Fund		and complete lines 27 through 31.			
6	27	Capital stock, trust principal, or current funds			
ಕ್ಟ	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	15,802	10,810	
۲	30	Total net assets or fund balances (see instructions)	15,802	10,810	
Net Assets	31	Total liabilities and net assets/fund balances (see			
		instructions)	15,802	10,810	
Pai	rtIII	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year-Part II, colui		, i	
		of-year figure reported on prior year's return)			15,802
2		r amount from Part I, line 27a			(4,992)
3	Othe	er increases not included in line 2 (itemize) ▶		3	
4	Add	lines 1, 2, and 3		4	10,810
5				(-	-
	Decr	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—F		e 30 6	

Part	V. Capital Gains and	Losses for Tax on Investn	nent Income			
```		d(s) of property sold (for example, real e e; 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						
c						
d						
<u>e</u>				<u></u>		<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		un or (loss) (f) minus (g))
a						
b				<del> </del>		<del></del>
c		<u> </u>				
<u>d</u>						
<u>e</u>		<del></del>				
	Complete only for assets show	ving gain in column (h) and owned	by the foundation	on 12/31/69.	(I) Gains (Co	ol (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) . (j), rf any		ot less than -0-) <b>or</b> (from col. (h))
a						
b						
C					L	
<u>d</u>						
<u>e</u>			<u></u>		<u> </u>	
2	Capital gain net income or	inat canital loss) (	also enter in Pa , enter -0- ın Pa		2	
3	If gain, also enter in Part I	or (loss) as defined in sections , line 8, column (c). See instru				
	Part I, line 8	<u> </u>		<u> </u>	3	
Part	V Qualification Unde	er Section 4940(e) for Redu	uced Tax on N	let investmen	t Income	
Was t		this part blank. section 4942 tax on the distribu Jalify under section 4940(e). Do			base period?	☐ Yes ☐ No
1		unt in each column for each ye		<u>i </u>	aking any entries	
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution		(c) f nonchantable-use a	Di Di	(d) stribution ratio divided by col (c))
	2016				<del></del>	
	2015					
	2014					
	2013					
	2012					
2	Total of line 1, column (d)				. 2	
3		for the 5-year base period—div	vide the total on	line 2 by 5.0, o	r by	
	the number of years the for	undation has been in existence	of less than 5 ye	ears	3	<del></del>
4	Enter the net value of nonc	charitable-use assets for 2017 f	rom Part X, line	5	. 4	
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investmen	t income (1% of Part I, line 27t	o)		. 6	
7	Add lines 5 and 6				. 7	<del></del>
8		ns from Part XII, line 4 ter than line 7, check the box i				10/ tay -ata - 0 15
	Part VI instructions.	ter thair line /, check the box i	n ran vi, line it	o, and complete	mat part using a	170 tax rate. See the

Part \		nstru	ction	1S)				
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							
_	here ▶ □ and enter 1% of Part I, line 27b							
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-)							
3	Add lines 1 and 2							
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)							
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0							
6	Credits/Payments:							
а	2017 estimated tax payments and 2016 overpayment credited to 2017   6a			1				
b	Exempt foreign organizations—tax withheld at source 6b		1	}				
C	Tax paid with application for extension of time to file (Form 8868) . 6c			1				
ď	Backup withholding erroneously withheld 6d							
7	Total credits and payments. Add lines 6a through 6d							
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed							
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 2018 estimated tax ▶ Refunded ▶ 11							
Part	VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No				
	participate or intervene in any political campaign?	1a		~				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition							
		16						
	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		1				
d	a man and the above the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state o							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$			}				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		•				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of							
4-		3	ļ—	V				
4a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b						
-	·	5						
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	3						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	) 1	ľ					
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	1						
	conflict with the state law remain in the governing instrument?	6		~				
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	~					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	٧					
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 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9		~				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	$\vdash$		_				
	names and addresses	10	<b>/</b>					
		لتنب						

Part	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		~
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		~
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   N/A	13	V	
14	The books are as of EOINDATION Telephone as E 20	1 836	5616	
••	Located at N 1279 TRAFAL CAR STREET TEANECK N I	0766		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year		,	▶ 🗆
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		~
	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.		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?	}   		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes			
	(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.)			
Ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here ▶ □	ļ		
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 2017?	1c		v
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  20 , 20 , 20 , 20 , 20			
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 2017 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 2017.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		~
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 2017?	4b		v

P	90	A	1
_	24	•	

Part	VII-B Statements Regarding Activities	s for W	hich Form	4720	May Be R	equire	d (contii	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
:	<ul><li>(1) Carry on propaganda, or otherwise attempt t</li><li>(2) Influence the outcome of any specific public</li></ul>						Yes	✓ No			
	directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, stu	idy, or o	other similar	ourpose	s?		==	☑ No			
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions		ritable, etc.,				☐ Yes	<b></b> No			
	(5) Provide for any purpose other than religious							<u>- 140</u>			
	purposes, or for the prevention of cruelty to						Yes	✓ No			
þ	If any answer is "Yes" to 5a(1)-(5), did any of th								1		
	Regulations section 53.4945 or in a current notice	-	•						5b		
_	Organizations relying on a current notice regard if the answer is "Yes" to question 5a(4), does to										
·	because it maintained expenditure responsibility	for the	grant?					□ No			
<b>6</b>	If "Yes," attach the statement required by Regul										
6а	Did the foundation, during the year, receive any on a personal benefit contract?		-	_		emiums	Yes	₽ No			
ь	Did the foundation, during the year, pay premiur					benefit		_	6b		•
	If "Yes" to 6b, file Form 8870.	•	,	<b>, ,</b>	<b>-</b>						
	At any time during the tax year, was the foundation						Yes				
	If "Yes," did the foundation receive any proceed VIII Information About Officers, Direct								7b		
rai	and Contractors		rusices, r	ouriua	uon wan	ayers,	гидину і	raiu Li	iibio	<del>00</del> 3,	
1	List all officers, directors, trustees, and found	fation r	nanagers ar	nd their	compens	ation. S	See instr	uctions			
	(a) Name and address	(b) Title	e, and average	(c) Co	mpensation of paid,	(d)	Contribution	is to	(e) Expe	nse ac	count,
	(a) Namic and address		ed to position		ter -0-)	and def	erred comp	ensation	other	allowan	ces
					-0-	ł		-0-			-0-
	<del></del>	<del> </del>		<u> </u>	<del></del>	<u> </u>					
						)					
<del>_</del>	Compensation of five highest-paid employe	es (oth	er than tho	se incl	uded on li	ne 1 –	see instr	uctions	s) If n	one.	enter
-	"NONE."	(						4040	<i>.,.</i>	<b></b> ,	
	(a) Name and address of each employee paid more than \$50,0	00	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contrib employee plans and compen	benefit deferred		nse accallowan	
											_
						_			-		
				<del></del>	<del> </del>						
<del></del>	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s		L		L		L				
otal	number of other employees paid over \$50,000 .	<u> </u>	· · · · ·	<del></del>	<u> </u>	<u> </u>	<del></del>	• ▶		N/A	

	3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "N	ONE."
Fotal number of others receiving over \$50,000 for professional services   N/A		(c) Compensation
Otal number of others receiving over \$50,000 for professional services ► N/A  Part IX-A Summary of Direct Charitable Activities  Let the foundation's four largest direct chantable activities duming the tax year. Include relevant statistical information such as the number of organizations and other beneficiances served, conferences convened, research papers produced, etc.  1  2  3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation duming the tax year on lines 1 and 2  Amount  1  All other program-related investments. See instructions.  3  All other program-related investments. See instructions.		
otal number of others receiving over \$50,000 for professional services N/A  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of expenses organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  1 2 Amount  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Part IX-B 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 beneficianes served, conferences convened, research papers produced, etc.  2  3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions.  3  All other program-related investments See instructions.		
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Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions.  3  All other program-related investments See instructions.  3  All other program-related investments See instructions.		
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organizations and other beneficianes served, conferences convened, research papers produced, etc.  2  3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  1  All other program-related investments See instructions.  3  All other program-related investments See instructions.	Part IX-A Summary of Direct Charitable Activities	
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See instructions.  3		r of Expenses
3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  2  All other program-related investments See instructions.  3	1	
3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  2  All other program-related investments See instructions.  3	***************************************	
All other program-related investments See instructions.  All other program-related investments See instructions.		
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions.	2	
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  2  All other program-related investments See instructions.  3	***************************************	
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  2  All other program-related investments See instructions.  3	3	
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions.		
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions.	***************************************	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions.	4	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions.		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions.		
All other program-related investments See instructions.		
All other program-related investments See instructions.		Amount
All other program-related investments See instructions.  3	1	
All other program-related investments See instructions.  3		
All other program-related investments See instructions.  3	2	
3		
3		
	All other program-related investments. See instructions.	
	3	}

Form **990-PF** (2017)

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn fo	undations,
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	
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	
0	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	
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1 1	
	instructions)	4	· · · · · · · · · · · · · · · · · · ·
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	
Part 1	and certain foreign organizations, check here ▶ ☐ and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	
<b>2</b> a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)	1	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	-0-
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		<del></del>
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
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:	<del>-</del>	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<u> </u>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	لت	ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years.	y wile	and the louridation
	N. C.		5 990-DE /2017

art	XIII Undistributed Income (see instruction	ons)			
1,	Distributable amount for 2017 from Part XI, line 7	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
_					
2	Undistributed income, if any, as of the end of 2017:	1	,		
а	Enter amount for 2016 only		<del></del>		
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				
b	From 2013				
C	From 2014				
d	E 2015				
e	From 2016		;		,
_					
f	Total of lines 3a through e				
4	Qualifying distributions for 2017 from Part XII,				
	line 4: ▶ \$				
а	Applied to 2016, but not more than line 2a .				
þ				. —	
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2017 distributable amount	<del></del>			
e	Remaining amount distributed out of corpus	<del></del>	<del></del>	<b></b>	<del> </del>
5	Excess distributions carryover applied to 2017	<del></del>			<del> </del>
5	(If an amount appears in column (d), the same		<del></del>	<del></del>	
	amount must be shown in column (a).)				
_	• • • • • • • • • • • • • • • • • • • •				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		L-1		
Ь	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
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			}	ļ
đ	Subtract line 6c from line 6b. Taxable				
_	amount — see instructions	,		İ	
_	Undistributed income for 2016. Subtract line	<del> </del>		<del> </del>	<del> </del>
е	· · · · · · · · · · · · · · · · · · ·				
	4a from line 2a. Taxable amount—see			1	
_	instructions				
f	Undistributed income for 2017. Subtract lines	· ·			
	4d and 5 from line 1. This amount must be				
	distributed in 2018				
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				j
	required —see instructions)		1	1	j
8	Excess distributions carryover from 2012 not				
-	applied on line 5 or line 7 (see instructions) .				ļ
9	Excess distributions carryover to 2018.	<del></del>	<del></del>	<b></b>	<del> </del>
J	Subtract lines 7 and 8 from line 6a				Ì
		<del> </del>			<del> </del>
10	Analysis of line 9:				1
а	Excess from 2013			1	
Ь	Excess from 2014			}	1
C	Excess from 2015				
d	Excess from 2016	}			
8	Excess from 2017	}		Í	]

0	1	ſ
Page		v

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A. question 9	))	
					f	<del></del>
;	foundation, and the ruling is effective fo					
b	Check box to indicate whether the four	ndation is a private	operating founda	tion described in se	ection	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	<u> </u>	Pnor 3 years	<del></del>	
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
	each year listed	<del></del>	<u>_</u>	<del>                                     </del>		/
ь	85% of line 2a	<del></del>		<del> </del>		
	Qualifying distributions from Part XII,	<del></del>		<del> </del>		/
	line 4 for each year listed				/	1
d	Amounts included in line 2c not used directly			<del>                                     </del>		<del> </del>
	for active conduct of exempt activities				<i>/.</i> *	1
е	Qualifying distributions made directly				7	
_	for active conduct of exempt activities.			}		
	Subtract line 2d from line 2c			/	ſ	1
3	Complete 3a, b, or c for the			/		<del> </del>
	alternative test relied upon:				ļ	
а	"Assets" alternative test enter:		ļ		ļ	ļ
	(1) Value of all assets			/	[	ĺ
	(2) Value of assets qualifying under			/		<del> </del>
	section 4942(j)(3)(B)(i)		/	1	}	Ì
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed				)	]
С	"Support" alternative test-enter.					
	(1) Total support other than gross			Ì	1	)
	investment income (interest,	1			<b>}</b>	}
	dividends, rents, payments on securities loans (section		/			
	512(a)(5)), or royalties)	/		1		İ
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					i
	section 4942(j)(3)(B)(iii)				<u>L</u>	
	(3) Largest amount of support from					
	an exempt organization				L	<u> </u>
	(4) Gross investment income					
Part				he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		ıs.)	<del></del>		
1	Information Regarding Foundation					
а	List any managers of the foundation					
	before the close of any tax year (but o	only if they have co	ontributed more th	nan \$5,000). (See s	section 507(d)(2).)	
Ь	List any managers of the foundation					arge portion of the
	ownership of a partnership or other e	ntity) of which the	toundation has a	10% or greater int	erest.	
						_ <del></del>
2	Information Regarding Contribution					
	Check here ▶ ☑ if the foundation	only makes contr	ributions to prese	elected charitable	organizations and	does not accept
	unsolicited requests for funds. If the f complete items 2a, b, c, and d. See in		gins, grams, etc.,	, to individuals or o	rganizations unde	r other conditions,
			droop of the name		tions about the a	<u> </u>
а	The name, address, and telephone nu	imber or email add	uress or the perso	on to whom applica	LILIONS SHOULD DE A	aaressea:
	The form in which applications should	he submitted and	d information and	materials they sho	uld include	
	me roini in which applications should	, or submitted diff		materials triby SIIC	, II IVIUUE	
	Any submission deadlines		<del></del>	<del></del>	<del></del>	<del></del>
_						
d	Any restrictions or limitations on av	vards, such as b	y geographical a	reas, charitable fi	elds, kinds of ins	titutions, or other
	factors:		- •			

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or status of **Amount** contribution Name and address (home or business) recipient a Paid during the year **YESHIVATH NOAM EDUCATIONAL** 5,000 **OHR TORAH STONE INSTITUTE** EDUCATIONAL 5,000 YESHIVA UNIVERSITY EDUCATIONAL 10,000 **AISH HATORAH FUND** EDUCATIONAL 5,000 25,000 **b** Approved for future payment

Pai	t XVI-A Analysis of	income-Producing Ac	tivities				
nte	r gross amounts unless ot	therwise indicated.	Unrelated bu	siness income	Excluded by secti	on 512, 513, or 514	(e)
:			(a)	(b)	(c)	(4)	Related or exempt
			Business code	Amount	Exclusion code	(d) Amount	function income (See instructions.)
1	Program service revenue	:		727702111		, 27, 22, 11	(OCC IIISII GCGOIIS.)
	а		<u></u>				
	b			<del></del>	† <del></del>		
	c				<del>                                     </del>		
	d			<del></del>	+	<del></del>	<del></del>
			<del></del>		<del> </del>		
	·		ļ	<del></del>	<del> </del> -	·	
	' <del></del>	<del></del>			ļ		
		rom government agencies			<del> </del> _		
2	•				<del></del>		
3	Interest on savings and ter	mporary cash investments			]		
4	Dividends and interest from	om securities			<u> </u>		
5	Net rental income or (loss	s) from real estate:					
	a Debt-financed proper	rty					
		operty		<del></del>	<del> </del>	<del></del>	
6	Net rental income or (loss	•			<del>                                     </del>		<del></del>
7			ļ —		<del> </del>	<del></del>	<del> </del>
_		assets other than inventory	<del></del>	L	+		
8	• •		<u> </u>	<del></del>	<del> </del>	-	<del> </del>
9		n special events	ļ		<del> </del>		<del></del>
	Gross profit or (loss) from		ļ		<u> </u>		<b> </b>
11	Other revenue: a				<del></del> _		
	b					<u> </u>	
	c						
	d						
	е						
12	Subtotal, Add columns (b	o), (d), and (e)					
	-	43.40 143				10	
13	Total. Add line 12, colum	nns (b), (d), and (e)				13	
13	Total. Add line 12, colum		 ıs.)			13	
13 See	<b>Total.</b> Add line 12, colum worksheet in line 13 instri	uctions to verify calculation	ıs.)			13	
13 See Pa	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		aportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation	ıs.) Accomplishm	ent of Exemp	ot Purposes		nportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		nportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		nportantly to the
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13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		nportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		nportantly to the tions.)
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
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13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
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13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
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13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the stions.)
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the stions.)
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Pa Lin	Total. Add line 12, colum worksheet in line 13 instri rt XVI-B Relationsh	uctions to verify calculation nip of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the

Part	XVII	Information	n Regarding Trans	sfers to and Transaction	ns and R	elationship	s With N	lonchari	table E	xempt
		Organizatio	ons							
¹ 1				ngage in any of the follow					Ye	s No
			ther than section	501(c)(3) organizations) o	r in section	on 527, rel	ating to	oolitical	}	1
	_	izations?							1	Ì
8	Trans	fers from the rep	porting foundation to	a noncharitable exempt or	ganization	of:			l	1
	(1) C	ash							1a(1)	1
		ther assets .							1a(2)	
b	-	transactions:						}	1	1
			a noncharitable exer					1	1b(1)	
				ble exempt organization .					1b(2)	
				assets					1b(3)	
			-						1b(4)	
		oans or loan gua							1b(5)	<u> </u>
				ip or fundraising solicitation					1b(6)	
C				ts, other assets, or paid en					1c	1
d				," complete the following						
				ces given by the reporting						
<del></del>				ement, show in column (d)						
(a) Line	no (	b) Amount involved	(c) Name of nonch	aritable exempt organization	(d) Desch	ption of transfe	rs, transactio	ns, and shar	ing arrang	ements
					<del> </del>					
					<del> </del>					
	-+		<del></del>	<del></del>	+					
	-+				<del> </del>					
	-+	·	<del></del>	<del></del>	<del> </del>					
					<b>-</b>					
	-+			<del></del>	<del></del>					
		<del> </del>	<del></del>	<del></del>	<b>-</b>	<del></del>				
					<del> </del>					
					<del></del>					
					+					
			<del></del>		<del> </del>				<del></del>	
				<del></del>						
	le the	foundation dire	ectly or indirectly affi	liated with, or related to,	one or mor	e tay-eyemi	nt organiz	ations		
~~	descr	ribed in section 5	501(c) (other than sec	ction 501(c)(3)) or in section	15277 .		prorgamz		Vec I	7 No
b			following schedule.					· · L	, , 63 [	
		(a) Name of organ		(b) Type of organizatio	n		(c) Description	n of relation	ship	
		<del>-                                    </del>					<del>``</del>		<del></del>	
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				d this return, including accompanying				my knowled	ge and belie	ef, it is true,
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any ki					arer has any kno	wledge.	May the IR	S discuss 1	his return
Here							with the pr	eparer shov	vn below?	
	· '	ature of officer or true		Date Tit				See instruc	uons. 🔲 Y	ев∐ио
Paid		Print/Type preparer	's name	Preparer's signature		Date	Char	k   f   P	TIN	
	010°							mployed		
Prep Use		Firm's name	<del> </del>			<del> </del>	Firm's EIN	<u></u>		
USE (	Unity	Firm's address Phone no								
			<del></del>							==

## Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

**JAFIS FOUNDATION** 

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

**Employer Identification number** 

13-7113206

Organization type (check one):						
Filers of	<b>:</b>	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						
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	nly a section 501(c)(7	covered by the <b>General Rule</b> or a <b>Special Rule.</b> ), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
General	Rule					
v		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 r property) from any one contributor. Complete Parts I and II. See instructions for determining a particular.				
Special	Rules					
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line that received from any one contributor, during the year, total contributions of the greater of (1) 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) filling 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. Don't 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		usn'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).

Name of organization

JAFIS FOUNDATION

Employer identification number 13-7113206

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) Name, address, and ZIP + 4 Type of contribution **Total contributions** No. JACK FORGASH Person ___1 Payroll 1279 TRAFALGAR STREET 20,000 Noncash (Complete Part II for **TEANECK N.J 07666** noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.)