

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation THE MARION & NORMAN TANZMAN CHARITABLE FOUNDATION		A Employer identification number 22-3506061	
Number and street (or P.O. box number if mail is not delivered to street address) 10 WOODBRIDGE CENTER DRIVE NO 405		Room/suite	B Telephone number (see instructions) (732) 750-5757
City or town, state or province, country, and ZIP or foreign postal code WOODBIDGE, NJ 07095		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 19,787,107		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> If the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . . .	616,769	616,769		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	14,742			
	b Gross sales price for all assets on line 6a _____ 5,234,932				
	7 Capital gain net income (from Part IV, line 2) . . . .		14,742		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	94,142	6,218		
	12 Total. Add lines 1 through 11 . . . . .	725,653	637,729		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	1,277	0		0
	b Accounting fees (attach schedule) . . . . .	7,750	0		0
	c Other professional fees (attach schedule) . . . . .	121,977	27,928		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . .	3,095	2,418		0
	19 Depreciation (attach schedule) and depletion . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	93	0		0
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	134,192	30,346		0
	25 Contributions, gifts, grants paid . . . . .	2,557,966			2,557,966
	26 Total expenses and disbursements. Add lines 24 and 25	2,692,158	30,346		2,557,966
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-1,966,505			
	b Net investment income (if negative, enter -0-)		607,383		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing . . . . .	112,144	35,231	35,231		
	2	Savings and temporary cash investments . . . . .	951,925	583,893	583,893		
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5	Grants receivable . . . . .					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .					
	7	Other notes and loans receivable (attach schedule) ▶ _____ 85,708 Less allowance for doubtful accounts ▶ _____ 0	110,768	85,708	85,708		
	8	Inventories for sale or use . . . . .					
	9	Prepaid expenses and deferred charges . . . . .					
	10a	Investments—U S and state government obligations (attach schedule)	471,844	104,515	95,161		
	b	Investments—corporate stock (attach schedule) . . . . .	7,573,423	5,304,568	9,625,978		
	c	Investments—corporate bonds (attach schedule) . . . . .	520,178	572,421	588,748		
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans . . . . .					
	13	Investments—other (attach schedule) . . . . .	7,265,019	8,340,340	8,707,368		
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15	Other assets (describe ▶ _____)	57,398	65,020	65,020			
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	17,062,699	15,091,696	19,787,107			
Liabilities	17	Accounts payable and accrued expenses . . . . .					
	18	Grants payable . . . . .					
	19	Deferred revenue . . . . .					
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule) . . . . .					
	22	Other liabilities (describe ▶ _____)					
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0			
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>						
	24	Unrestricted . . . . .					
	25	Temporarily restricted . . . . .					
	26	Permanently restricted . . . . .					
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>						
	27	Capital stock, trust principal, or current funds . . . . .	0	0			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0			
	29	Retained earnings, accumulated income, endowment, or other funds	17,062,699	15,091,696			
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	17,062,699	15,091,696			
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	17,062,699	15,091,696				

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	17,062,699
2	Enter amount from Part I, line 27a . . . . .	2	-1,966,505
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	15,096,194
5	Decreases not included in line 2 (itemize) ▶ _____	5	4,498
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	15,091,696

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	<b>2</b>	14,742
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	1,884,873	19,846,740	0 094971
2015	2,939,972	20,732,897	0 141802
2014	1,706,226	22,041,425	0 077410
2013	1,127,236	21,851,751	0 051586
2012	1,112,344	21,366,946	0 052059
<b>2</b> Total of line 1, column (d)			<b>2</b> 0 417828
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0 083566
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			<b>4</b> 18,866,357
<b>5</b> Multiply line 4 by line 3			<b>5</b> 1,576,586
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 6,074
<b>7</b> Add lines 5 and 6			<b>7</b> 1,582,660
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 2,557,966

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	6,074
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	6,074
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	6,074
<b>6</b>	Credits/Payments		
<b>a</b>	2017 estimated tax payments and 2016 overpayment credited to 2017	<b>6a</b>	4,913
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	6,913
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	<b>8</b>	11
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	828
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2018 estimated tax</b> <b>▶</b> 828 <b>Refunded</b> <b>▶</b>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>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</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <b>▶</b> \$ 0 <b>(2)</b> On foundation managers <b>▶</b> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>▶</b> \$ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	Yes
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	Yes
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> 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? . . . . .	<b>6</b>	No
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> NJ		
<b>b</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? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> 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 taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>▶</b> N/A	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>▶</b> BARBARA SOUSA TRUSTEE Telephone no <b>▶</b> (732) 750-5757			

Located at **▶** AS LISTED WOODBRIDGE NJZIP+4 **▶** 07095

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <b>▶</b> <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>▶</b> <b>15</b>			
<b>16</b>	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <b>▶</b> <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	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? <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	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))			
<b>a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶</b> 20____, 20____, 20____, 20____			
<b>b</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). <input type="checkbox"/>	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶</b> 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>b</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). <input type="checkbox"/>	<b>3b</b>		<b>No</b>
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</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?	<b>4b</b>		<b>No</b>

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

<b>5a</b> During the year did the foundation pay or incur any amount to <b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>5b</b>		
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If "Yes" to 6b, file Form 8870</i>	<b>6b</b>		<b>No</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7b</b>		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

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

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

**Total** number of other employees paid over \$50,000. . . . . **0****3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

**Total** number of others receiving over \$50,000 for professional services. . . . . **0****Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	

**Total.** Add lines 1 through 3. . . . . **0**

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	18,605,437
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	548,225
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	19,153,662
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	19,153,662
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	287,305
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	18,866,357
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	943,318

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	943,318
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	6,074
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	19,133
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	25,207
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	918,111
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	918,111
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	918,111

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	2,557,966
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	2,557,966
<b>5</b>	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).	<b>5</b>	6,074
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	2,551,892

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



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				918,111
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .	68,174			
<b>b</b> From 2013. . . . .	53,176			
<b>c</b> From 2014. . . . .	635,703			
<b>d</b> From 2015. . . . .	1,924,183			
<b>e</b> From 2016. . . . .	903,590			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	3,584,826			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 2,557,966				
<b>a</b> Applied to 2016, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2017 distributable amount. . . . .				918,111
<b>e</b> Remaining amount distributed out of corpus	1,639,855			
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	5,224,681			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .	68,174			
<b>9</b> <b>Excess distributions carryover to 2018.</b> Subtract lines 7 and 8 from line 6a . . . . .	5,156,507			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .	53,176			
<b>b</b> Excess from 2014. . . . .	635,703			
<b>c</b> Excess from 2015. . . . .	1,924,183			
<b>d</b> Excess from 2016. . . . .	903,590			
<b>e</b> Excess from 2017. . . . .	1,639,855			

## Part XIV

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

## Part XV

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				2,557,966
<b>b</b> <i>Approved for future payment</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3b</b>				3,400,000

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b>	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
<b>2</b>	Membership dues and assessments. . . .					
<b>3</b>	Interest on savings and temporary cash investments . . . . .					
<b>4</b>	Dividends and interest from securities. . . .			14	616,769	
<b>5</b>	Net rental income or (loss) from real estate					
a	Debt-financed property. . . . .					
b	Not debt-financed property. . . . .					
<b>6</b>	Net rental income or (loss) from personal property					
<b>7</b>	Other investment income. . . . .			14	6,218	
<b>8</b>	Gain or (loss) from sales of assets other than inventory . . . . .			18	14,742	
<b>9</b>	Net income or (loss) from special events					
<b>10</b>	Gross profit or (loss) from sales of inventory					
<b>11</b>	Other revenue					
a	PASS THROUGH LOSS FROM DISPLAY MATRIX CORPORATION _____	900099	-505			
b	WETLANDS MITIGATION PROCEEDS _____	900099	88,429			
c	_____					
d	_____					
e	_____					
<b>12</b>	Subtotal Add columns (b), (d), and (e). .		87,924		637,729	0
<b>13</b>	Total. Add line 12, columns (b), (d), and (e). . . . . (See worksheet in line 13 instructions to verify calculations )			<b>13</b>		725,653

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

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

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash. . . . .	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .	<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2018-05-25	*****
	Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr )? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	ROBERT A FODERA				P00001474
	Firm's name <b>BAKER TILLY VIRCHOW KRAUSE LLP</b>				Firm's EIN <b>39-0859910</b>
Firm's address <b>99 WOOD AVENUE SOUTH STE 801 ISELIN, NJ 088302734</b>					Phone no (732) 388-5210

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
RAYMOND JAMES - SHORT TERM SEE ATTACHED	P	2017-01-01	2017-12-31
RAYMOND JAMES - LONG TERM SEE ATTACHED	P	2000-01-01	2017-12-31
CHARLES SCHWAB - LONG TERM - SEE ATTACHED	P	2000-01-01	2017-12-31
8000 SHARES ISHARES 7-10 YR TREASURY	P	2016-02-04	2017-01-24
2825 SHARES ISHARES EDGE MSCI MIN	P	2016-06-03	2017-01-24
2357 SHARES ISHARES 7-10 YR TREASURY	P	2015-12-08	2017-01-24
5000 SHARES SPDR BLOOMBERG BARCLAY	P	2011-09-19	2017-01-24
2197 SHARES SPDR SERIES TR S&P BIOTECH	P	2015-07-22	2017-01-24
1465 SHARES ISHARES U S PREFERRED	P	2011-09-16	2017-02-06
7323 SHARES EDGE MSCI MIN	P	2016-05-11	2017-02-06

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
242,321		229,111	13,210
1,555,640		1,490,974	64,666
724,954		717,819	7,135
839,369		876,223	-36,854
177,659		191,100	-13,441
247,299		250,385	-3,086
282,913		287,771	-4,858
135,900		195,738	-59,838
55,999		54,211	1,788
336,009		325,563	10,446

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			13,210
			64,666
			7,135
			-36,854
			-13,441
			-3,086
			-4,858
			-59,838
			1,788
			10,446

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
765 SHARES ISHARES IBOXX \$ INVEST	P	2016-04-08	2017-02-06
3871 SHARES ISHARES EDGE MSCI US	P	2015-11-30	2017-02-06
9206 SHARES POWERSHARES GLOBAL	P	2015-06-15	2017-02-06
CAPITAL GAINS DIVIDENDS	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	Depreciation allowed <b>(f)</b> (or allowable)	Cost or other basis <b>(g)</b> plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
89,660		91,225	-1,565
271,768		255,999	15,769
265,467		254,071	11,396
9,974			9,974

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col (i) <b>(k)</b> over col (j), if any	
			-1,565
			15,769
			11,396
			9,974

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JEFFRIES SHEIN 10 WOODBRIDGE CENTER DR SUITE 405 WOODBRIDGE, NJ 07095	TRUSTEE 0 00	0	0	0
BARBARA SOUSA 10 WOODBRIDGE CENTER DR SUITE 405 WOODBRIDGE, NJ 07095	TRUSTEE 0 00	0	0	0
JENNIFER TURNER 10 WOODBRIDGE CENTER DR SUITE 405 WOODBRIDGE, NJ 07095	TRUSTEE 0 00	0	0	0
JANICE BARSHAD 10 WOODBRIDGE CENTER DR SUITE 405 WOODBRIDGE, NJ 07095	TRUSTEE 0 00	0	0	0
SANDERS KLEINFELD 10 WOODBRIDGE CENTER DR SUITE 405 WOODBRIDGE, NJ 07095	TRUSTEE 0 00	0	0	0
ROY H TANZMAN 4 TALIA ROAD KENDALL PARK, NJ 08824	TRUSTEE 0 00	0	0	0
DRU KLEINFELD 10 WOODBRIDGE CENTER DR SUITE 405 WOODBRIDGE, NJ 07095	TRUSTEE 0 00	0	0	0



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
200 CLUB OF MIDDLESEX COUNTY PO BOX 387 WOODBIDGE, NJ 07095	NONE	EXEMPT	CHARITABLE	1,500
AMERICAN CANCER SOCIETY 2600 US HIGHWAY 1 NORTH BRUNSWICK, NJ 08902	NONE	EXEMPT	CHARITABLE	10,000
AMERICAN HEART ASSOCIATION 1 UNION STREET SUITE 301 ROBBINSVILLE, NJ 08691	NONE	EXEMPT	CHARITABLE	1,000
AMERICAN SOCIETY FOR YAD VASHEM 500 FIFTH AVENUE 42ND FLOOR NEW YORK, NY 10110	NONE	EXEMPT	CHARITABLE	100,000
ANTI-DEFAMATION LEAGUE 30A VREELAND AVENUE SUITE 230 FLORHAM PARK, NJ 07932	NONE	EXEMPT	CHARITABLE	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				2,557,966

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ASAP - ADULT SUBSTANCE ABUSE PROGRAM PO BOX 1481 HIGHLAND PARK, NJ 08904	NONE	EXEMPT	CHARITABLE	2,500
BROWN UNIVERSITYBOX 1974 PROVIDENCE, RI 02912	NONE	EXEMPT	CHARITABLE	2,500
CHABAD HOUSEFRIENDS LUBAVITCH- RUTGERS 170 COLLEGE AVENUE NEW BRUNSWICK, NJ 08902	NONE	EXEMPT	CHARITABLE	210,000
CHABAD OF THE SHORE 620 OCEAN AVENUE LONG BRANCH, NJ 07740	NONE	EXEMPT	CHARITABLE	141,000
CHILDREN'S DYSLEXIA CENTERS OF NEW JERSEY 102A LITTLE OXMEAD ROAD BURLINGTON, NJ 08016	NONE	EXEMPT	CHARITABLE	20,000
<b>Total . . . . .</b> ► <b>3a</b>				2,557,966


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHILDREN'S SPECIALIZED HOSPITAL - RWJ 200 SOMERSET STREET NEW BRUNSWICK, NJ 08901	NONE	EXEMPT	CHARITABLE	100,000
CONGREGATION BROTHERS OF ISRAEL 250 PARK AVENUE ELBERON, NJ 07740	NONE	EXEMPT	CHARITABLE	1,000
DEBORAH HOSPITAL FOUNDATION 212 TRENTON ROAD BROWN MILLS, NJ 08015	NONE	EXEMPT	CHARITABLE	50,000
ELIJAH'S PROMISE 211 LIVINGSTON AVENUE NEW BRUNSWICK, NJ 08901	NONE	EXEMPT	CHARITABLE	20,000
FREEHOLD CLERGY ASSOCIATION 41 THROCKMORTON STREET FREEHOLD, NJ 07728	NONE	EXEMPT	CHARITABLE	1,500
<b>Total . . . . .</b> ► <b>3a</b>				2,557,966

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF THE ISRAEL DEFENSE FORCES 60 EAST 42ND STREET NEW YORK, NY 10165	NONE	EXEMPT	CHARITABLE	2,500
HIGHLAND PARK CONSERVATIVE TEMPLE 201 SOUTH THIRD AVENUE HIGHLAND PARK, NJ 08904	NONE	EXEMPT	CHARITABLE	10,500
JCC ASSOCIATION OF NORTH AMERICA 520 EIGHTH AVENUE - 4TH FLOOR NEW YORK, NY 10018	NONE	EXEMPT	CHARITABLE	5,000
JEWISH COMMUNITY CENTER OF MIDDLESEX COUNTY 1775 OAK TREE ROAD EDISON, NJ 08820	NONE	EXEMPT	CHARITABLE	200,000
JEWISH FAMILY & VOCATIONAL SERVICE OF MIDDLESEX COUNTY 32 FORD AVENUE SECOND FLOOR MILLTOWN, NJ 08850	NONE	EXEMPT	CHARITABLE	10,000
<b>Total . . . . .</b> <b>3a</b>				2,557,966

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JEWISH FEDERATION IN THE HEART OF NEW JERSEY 230 OLD BRIDGE TURNPIKE SOUTH RIVER, NJ 08882	NONE	EXEMPT	CHARITABLE	244,500
JEWISH NATIONAL FUND 42 EAST 69TH STREEET NEW YORK, NY 10021	NONE	EXEMPT	CHARITABLE	10,000
JEWISH SOCIAL SERVICE COMMITTEE 58 HARRISON STREET HIGHLAND PARK, NJ 10128	NONE	EXEMPT	CHARITABLE	10,000
LAZIN ANIMAL FOUNDATION 55 WALLS DRIVE 3RD FLOOR FAIRFIELD, CT 06824	NONE	EXEMPT	CHARITABLE	2,500
LET'S GET READY 50 BROADWAY 25TH FLOOR NEW YORK, NY 10004	NONE	EXEMPT	CHARITABLE	2,500
<b>Total . . . . . ▶</b> <b>3a</b>				2,557,966

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LIFETOWN INC10 MICROLAB ROAD LIVINGSTON, NJ 07039	NONE	EXEMPT	CHARITABLE	18,000
LUNCH BREAK INC 121 DRS JAMES PARKER BLVD RED BANK, NJ 07701	NONE	EXEMPT	CHARITABLE	1,000
MEMORIAL SLOAN KETTERING CANCER CENTER 633 THIRD AVENUE 28TH FLOOR NEW YORK, NY 10017	NONE	EXEMPT	CHARITABLE	10,000
MIDDLESEX TORAH LINKS 4 CORNWALL DR SUITE 100A EAST BRUNSWICK, NJ 08816	NONE	EXEMPT	CHARITABLE	150,000
MONMOUTH UNIVERSITY 400 CEDAR AVENUE WEST LONG BRANCH, NJ 07764	NONE	EXEMPT	CHARITABLE	5,000
<b>Total . . . . .</b> ► <b>3a</b>				2,557,966

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MORGAN STANLEY CHILDREN'S HOSPITAL OF NY PRESBYTERIAN 654 WEST 170TH STREET NEW YORK, NY 10032	NONE	EXEMPT	CHARITABLE	2,500
NEW JERSEY INSTITUTE FOR DISABILITIES 10 OAK DRIVE EDISON, NJ 08837	NONE	EXEMPT	CHARITABLE	195,000
NEW YORK SERVICE FOR THE HANDICAPPED - CAMP OAKHURST 1140 BROADWAY - SUITE 903 NEW YORK, NY 10001	NONE	EXEMPT	CHARITABLE	26,666
PERTH AMBOY HIGH SCHOOL 30300 EAGLE AVENUE PERTH AMBOY, NJ 08861	NONE	EXEMPT	CHARITABLE	5,000
RABBI PESACH RAYMON YESHIVA 2 HARRISON STREET EDISON, NJ 08817	NONE	EXEMPT	CHARITABLE	18,000
<b>Total . . . . .</b> 				2,557,966
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RARITAN BAY HEALTHCARE FOUNDATIONMEDICAL CENTER 530 NEW BRUNSWICK AVE PERTH AMBOY, NJ 08861	NONE	EXEMPT	CHARITABLE	10,000
RETHINK ISRAEL INITIATIVE INC 9 MCKAY DRIVE BRIDGEWATER, NJ 08807	NONE	EXEMPT	CHARITABLE	15,000
RUTGERS - NEW BRUNSWICK COMMUNITY INTERPRETER 125 PATTERSON STREET NEW BRUNSWICK, NJ 08901	NONE	EXEMPT	CHARITABLE	2,000
RUTGERS CANCER INSTITUTE OF NEW JERSEY 120 ALBANY STREET TOWER ONE SUITE 305 NEW BRUNSWICK, NJ 08901	NONE	EXEMPT	CHARITABLE	125,000
RUTGERS HILLEL93 COLLEGE AVENUE NEW BRUNSWICK, NJ 08901	NONE	EXEMPT	CHARITABLE	240,300
<b>Total . . . . .</b> 				2,557,966
<b>3a</b>				



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RUTGERS UNIVERSITY FOUNDATION 57 US HIGHWAY 1 NEW BRUNSWICK, NJ 08901	NONE	EXEMPT	CHARITABLE	1,000
RWJ UNIVERSITY HOSPITAL FOUNDATION 10 PLUM STREET SUITE 910 NEW BRUNSWICK, NJ 08901	NONE	EXEMPT	CHARITABLE	531,500
RWJ VISITING NURSES 972 SHOPPES BLVD NORTH BRUNSWICK TOWNSH, NJ 089022776	NONE	EXEMPT	CHARITABLE	1,000
SCHOOL FOR CHILDREN WITH HIDDEN INTELLIGENCE 812 E COUNTY LINE ROAD LAKEWOOD, NJ 08701	NONE	EXEMPT	CHARITABLE	5,000
ST JAMES ROMAN CATHOLIC CHURCH 148 GREENVILLE STREET WOODBIDGE, NJ 07095	NONE	EXEMPT	CHARITABLE	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				2,557,966

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
ST JOSEPH'S SENIOR RESIDENCE 1 SAINT JOSPEHS TERRACE WOODBIDGE, NJ 07095	NONE	EXEMPT	CHARITABLE	5,000
WESTERN GALILEE HOSPITAL 315 MADISON AVENUE - SUITE 901 NEW YORK, NY 10017	NONE	EXEMPT	CHARITABLE	2,500
YESHIVA AT THE JERSEY SHORE 1515 LOGAN ROAD OCEAN, NJ 07712	NONE	EXEMPT	CHARITABLE	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				2,557,966

**TY 2017 Accounting Fees Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	7,750	0		0

## TY 2017 Investments Corporate Bonds Schedule

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS - RAYMOND JAMES	572,421	588,748

**TY 2017 Investments Corporate Stock Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

Name of Stock	End of Year Book Value	End of Year Fair Market Value
EQUITY SECURITIES - RAYMOND JAMES	5,304,568	9,625,978

**TY 2017 Investments Government Obligations Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

**US Government Securities - End  
of Year Book Value:**

0

**US Government Securities - End  
of Year Fair Market Value:**

0

**State & Local Government  
Securities - End of Year Book  
Value:**

104,515

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

95,161

**TY 2017 Investments - Other Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
EXCHANGE TRADED FUNDS - CHARLES SCHWAB/BEACON	AT COST	4,488,952	4,792,454
MUTUAL FUNDS - RAYMOND JAMES	AT COST	767,795	816,758
EXCHANGE TRADED FUNDS - RAYMOND JAMES	AT COST	669,602	716,316
PREFERRED SECURITIES - RAYMOND JAMES	AT COST	2,413,991	2,381,840

**TY 2017 Legal Fees Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	1,277	0		0



**TY 2017 Other Assets Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
INVESTMENTS IN CLOSELY HELD ENTITIES	50,442	49,937	49,937
DIVIDENDS RECEIVABLE	6,956	15,083	15,083

**TY 2017 Other Decreases Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

Description	Amount
UNREALIZED ADJUSTMENT	4,498

**TY 2017 Other Expenses Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS	93	0		0

**TY 2017 Other Income Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
DEFERRED INCOME PAYMENTS	5,905	5,905	5,905
CLASS ACTION LITIGATION SETTLEMENT	313	313	313
PASS THROUGH LOSS FROM DISPLAY MATRIX CORPORATION	-505		-505
WETLANDS MITIGATION PROCEEDS	88,429		88,429

**TY 2017 Other Professional Fees Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BROKER FEES	27,928	27,928		0
MANAGEMENT FEES	94,049	0		0

**TY 2017 Taxes Schedule**

**Name:** THE MARION & NORMAN TANZMAN  
CHARITABLE FOUNDATION

**EIN:** 22-3506061

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE OF NEW JERSEY	30	0		0
FOREIGN INCOME TAXES	2,418	2,418		0
FEDERAL EXCISE TAX	647	0		0