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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0052 2017

			nue Service	▶ Go to	www.irs.gov/Form990PF to	or instructions	and the I	latest i	nformati	on.	Open	to Public Inspection
	For	calen	dar year 20	017 or tax year be	ginning	,	2017, a	nd en	ding			, 20
	Na	me of fo	undation				•	A	Employe	r identificati	on numbe	er
	TI	MOTH	Y 6:17 F	OUNDATION					22-3	622751_		
_	Nu	mber an	d street (or P C), box number if mail is	not delivered to street address)		Room/suite	e B	Telephon	e number (se	e instruct	ions)
	10	1 SY	LVANIA A	VENUE					(732)	245-42	86	
	Crt	y or tow	n, state or prov	ince, country, and ZIP	or foreign postal code			C	If exempt	tion application	on is pend	ing, check here ▶ 🗌
	ΑV	ON B	Y THE SE	A NJ 07717								
	G	Check	all that app	oly: Initial ret	urn 🔲 Initial return	of a former p	ublic cha	arity o	1. Foreigi	n organizatioi	ns, check	here ▶ 📋
_			• • •	☐ Final retu		return			2 Foreign	n omanizatio	ne maetini	g the 85% test,
				Address	change	nge						tation · · ▶ 🗌
3	H	Check	type of org	anization: 🗵 S	ection 501(c)(3) exempt p	rivate founda	tion ()	7] E				terminated under
		Section	n 4947(a)(1) nonexempt chari	table trust 🔲 Other tax	able private t	oundatio	on	Section 3	01 (D)(1)(A), CI	iccx nere	
	F	Fair m	narket value	of all assets at	J Accounting method	: 🛛 Cash [Accru	ual _F	If the four	ndation is in a	a 60-mont	h termination
		end of	f year (fron	n Part II, col. (c),	☐ Other (specify)			'	under se	ction 507(b)(1)(B), chec	k here ▶ 🗌
		line 16	5)▶\$	712,534.	(Part I, column (d) must be	on cash basis	.)					
	Pa	art I	Analysis o	of Revenue and E	xpenses (The total of	(a) Revenue a	nd a	NAI-4		(a) Antonia		(d) Disbursements
				1,7,1,7,	may not necessanly equal	expenses po books		nco) INET IN	restment me	(c) Adjust		for chantable purposes
			the amounts	ın column (a) (see ınst	ructions).)	00013						(cash basis only)
		1			received (attach schedule)	3,5	00.					
		2	Check ► 2	lacktriangle if the foundation is r	not required to attach Sch. B							
		3			orary cash investments							1
		4	Dividends	and interest from	securities	3	96.		396.		396.	1
		5a	Gross rent	ts								
		b		income or (loss)								
	9	6a	Net gain o	r (loss) from sale o	f assets not on line 10							
55	Revenue	b		price for all assets on								
20	§	7	Capital gai	in net income (fron	n Part IV, line 2)							
6 2019	Œ	8	Net short-	term capital gain .								1
8		9	Income mo	odifications	. 							
$\mathbf{\alpha}$		10a	Gross sales	less returns and allo	wances							1
FEB		b	Less: Cost	t of goods sold								
		С	•		schedule)							
SCANNED		11	Other inco	me (attach schedu	ule) See . Stmt	39,9	89.		,758.			1
Z		12			<u>1</u>	43,8	85.	48	,154.		396.	
Ş	Ø.	13	Compensa	ation of officers, di	rectors, trustees, etc.							
3	Expenses	14	•	•	wages							
D)	9	15	•		nefits		— ↓ ┏			N 7=5		
	×	16a	-	(attach schedule)			$-\!$	<u>, K</u>	EUE	IVED		
		Ь		g fees (attach scho			— ∤ lœ	, 			<u> </u>	
	⋛	С		essional fees (atta				} N	<u>0V 1 </u>	2018	RS OS	
	ta	17				ļ		<u> </u>			粉	
	ij	18			structions) See Stmt	6	48.			1 17=	-1박	
	Ē	19	•	•	e) and depletion		ـ	<u> </u>	GDE	y, UI		
	ğ	20		-								
	b	21			etings							
	a	22										
	Operating and Administrative	23		•	dule) See Stmt	23,3	72.					23,372.
	a‡i	24			ninistrative expenses.							
	ē			•		24,0						23,372.
	g	25			aid	68,6					<u> </u>	68,680.
	_	26			ents. Add lines 24 and 25	92,7	00.					92,052.
		27		ne 26 from line 12		<u> </u>						
		a		-	nses and disbursements	-48,8	15.					<u> </u>
		Ь		•	negative, enter -0-) .			4.8	,154.			
		_			ative, enter -0-)	l					396.	000 55
	For	Paper	work Reduct	tion Act Notice, see	instructions.						Fo	ım 990-PF (2017)

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REV 10/16/18 PRO

Page 2

Ò	rt II	Raiance Sheets Attached schedules and amounts in the description column	Beginning of year			t year
		Balance Sheets should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Valu	е	(c) Fair Market Value
	1	Cash—non-interest-bearing	42,752.	52,9	10.	52,910.
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶	i 1			
		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)		_		
		Less: allowance for doubtful accounts ▶				
ģ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ş	10a	Investments—U.S. and state government obligations (attach schedule)				
•	b	Investments—corporate stock (attach schedule)	718,597.	659,62	24	659,624.
	C	Investments—corporate bonds (attach schedule)	710,337.	033,0	<u> </u>	033,021.
	11	Investments—land, buildings, and equipment: basis ►				
	""	Less: accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
		Investments—other (attach schedule)				· · · · · · · · · · · · · · · · · · ·
	13			· · · · · · · · · · · · · · · · · · ·		i
	14	Land, buildings, and equipment: basis ▶				
	45	Less: accumulated depreciation (attach schedule) ▶		-		
	15	Other assets (describe Total assets (to be completed by all filers—see the				
	16					=10 =51
		instructions. Also, see page 1, item I)	761,349.	712,5	34.	712,534.
	17	Accounts payable and accrued expenses				
õ	18	Grants payable				ļ
Ħ	19	Deferred revenue				
豆	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)				
und Balances		Foundations that follow SFAS 117, check here				
Š	24	Unrestricted				
ā	25	Temporarily restricted				i
ã	26	Permanently restricted				
밀	20	Foundations that do not follow SFAS 117, check here ▶ 🏻				
ß		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
Net Assets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
Se	29	Retained earnings, accumulated income, endowment, or other funds	761,349.	712,5	3.4	
AS	30	Total net assets or fund balances (see instructions)	761,349.	712,5		
¥	31	Total liabilities and net assets/fund balances (see	701,343.	112,5.	77.	
ž	٥.	instructions)	761,349.	712,5	34.	
Рa	rt III	Analysis of Changes in Net Assets or Fund Balances	102/313.	,12,70		 '
1	Tota	Il net assets or fund balances at beginning of year—Part II, colu	mn (a), line 30 (must	agree with		
•		of-year figure reported on prior year's return)			1	761,349.
9		er amount from Part I, line 27a			2	-48,815.
_					3	,019.
3		lines 1, 2, and 3			4	712,534.
_	D			ſ	5	, 12, 331.
e G	Tota	reases not included in line 2 (itemize) If net assets or fund balances at end of year (line 4 minus line 5)—	Part II. column (h) lin	e 30	6	712,534.
	· I Uta	a net accord or rand balances at one of year time + minds line of "	21 11, 001011111 (b), IIII		<u> </u>	,12,334.

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Part	V Capital Gains and	Losses for Tax on Investme	ent Income			
	(a) List and describe the kind	(s) of property sold (for example, real est 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	· · · · · · · · · · · · · · · · · · ·					
<u>c</u>						
<u>d</u>						
<u>е</u>				L		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		Gain or (loss) us (f) minus (g))
a						
<u>b</u>						
_ <u> </u>					· 	
<u>d</u>						
<u>e</u>	Complete only for assets show	ring gain in column (h) and owned by	v the foundation	on 12/31/69.		0-1 (1)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (i), if any	col (k), but	Col. (h) gain minus not less than -0-) or s (from col. (h))
а						
_ b						
с						
<u>d</u>						
е	<u></u>	<u>_</u>				
2	Capital gain net income or (lso enter in Par enter -0- in Par		2	
3		or (loss) as defined in sections 1				
	-	line 8, column (c). See instruct		enter -0- in	3	
Part		r Section 4940(e) for Reduc		et investment i		
	s," the foundation doesn't qu	ection 4942 tax on the distributa alify under section 4940(e). Do r	not complete th	nis part.		☐ Yes ☑ No
1		nt in each column for each year	; see the instru	ctions before mal	king any entrie	
Cate	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) nonchantable-use ass		(d) Distribution ratio (b) divided by col. (c))
	2016	46,01	5.	743,02	0.	0.061930
	2015	50,65		786,28		0.064427
	2014	124,63		852,71		0.146161
	2013	70,51		692,32		0.101858
	2012	118,92	3.	726,01	.8.	0.163802
2 3	Total of line 1, column (d)					0.538178
3		Indation has been in existence if				0.107636
4	Enter the net value of nonch	naritable-use assets for 2017 fro	m Part X, line	5	. 4	697,897.
5	Multiply line 4 by line 3 .				. 5	75,119.
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	482.
7	Add lines 5 and 6				. 7	75,601.
8		s from Part XII, line 4				92,052.
		er than line 7, check the box in I	Part VI, line 1b	, and complete th	at part using a	1% tax rate. See the
	Part VI instructions.				· · · ·	
RAA			REV 10/18/18 PRO			Form 990-PF (2017)

REV 10/16/18 PRO

Form 990-PF (2017) Page **4**

Part '		instr	ıctio	ns)
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)			لــــا
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	4	82.	
_	here ► 🔀 and enter 1% of Part I, line 27b			
С	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.	
3	Add lines 1 and 2		82.	
4	Subtritle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	4	82.	
6	Credits/Payments:			1
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		0.	
8	Enter any penalty for underpayment of estimated tax. Check here [] if Form 2220 is attached [8]			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9	4	82.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0.	
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11			
Part		·	V	Na
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	4-	Yes	No
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1a		<u>×</u>
b	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	10		<u> </u>
	published or distributed by the foundation in connection with the activities.	1		l
С	Did the foundation file Form 1120-POL for this year?	1c		$\overline{\mathbf{x}}$
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			I
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
e	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?	2		×
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	-	_^_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		×
•	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	İ		I
	By language in the governing instrument, or			1
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6		×
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. ▶			- 1
	NJ			ŀ
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	×	
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,"			
40	complete Part XIV	9	×	
10	names and addresses	10		
		1.10	×	

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	1		J
40	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	11	├	×
12				l
	person had advisory privileges? If "Yes," attach statement. See instructions	12	ļ	×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	<u> </u>	<u> </u>
	Website address ► N/A			
14	The books are in care of ► MARIE DOLAN Telephone no. ► (732)	245-	4286	5
	Located at ▶ 647 SANTA MARIA DRIVE FERNANDINA BEACH FL ZIP+4 ▶ 3203	1		
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 ▶ 15			
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, secunties, or other financial account in a foreign country?	16	<u></u>	×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	of		
	the foreign country ▶	İ		
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? Yes 🗵 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No		ļ	1 1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No	1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		l	
	the benefit or use of a disqualified person)?			
	(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.)	1	l	
	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	i	1	
b	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions			├ ──
		1b	<u> </u>	Ь.
	Organizations relying on a current notice regarding disaster assistance, check here			
С	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		×
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?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20]		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	i	}	
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		1	
	all 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.		<u> </u>	1
·	► 20 , 20 , 20 , 20 .	1		[
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			l i
•	at any time during the year?			ll
	, , ,			
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.)			لبدا
	3 , ,	3b	ļ	×
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	1	×

Page	ŧ

Part	VII-B Statements Regarding Activities	s for M	/hich Form	4720	May Be R	equire	e d (contii	าued) _			
5a	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt t			n (sect	tion 4945(e))? .	☐ Yes	⊠ No			$\neg \neg$
	(2) Influence the outcome of any specific public										1
	directly or indirectly, any voter registration dr						☐ Yes	⊠ No			- 1
	(3) Provide a grant to an individual for travel, stu	idv. or o	other similar i	ourpose	es?		Yes	⊠ No		İ	- 1
	(4) Provide a grant to an organization other than						_	_	i l		1
	section 4945(d)(4)(A)? See instructions			-			☐ Yes	X No			i
	(5) Provide for any purpose other than religious	. charit	able, scientifi	c. Irtera	arv. or edu	cational		_			
	purposes, or for the prevention of cruelty to							X No			l
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ibed in			i
_	Regulations section 53.4945 or in a current notice								5b		
	Organizations relying on a current notice regardi	_	-					▶□	 -		
С	If the answer is "Yes" to question 5a(4), does to										Ì
•	because it maintained expenditure responsibility						Yes	□No			1
	If "Yes," attach the statement required by Regul		_								ŀ
6a	Did the foundation, during the year, receive any					emiums					ŀ
-							☐Yes	X No		.	ŀ
b	Did the foundation, during the year, pay premiur					benefit	_		6b	i	×
	If "Yes" to 6b, file Form 8870.	iio, dii o	only or manor	Juy, Ou	a porcorra	00.10.11		• •	1.55		-^- -
72	At any time during the tax year, was the foundation	a narty	to a prohibited	tax sh	elter transac	tion?	☐Yes	⊠ No		1	
	If "Yes," did the foundation receive any proceed							_	7b		
	VIII Information About Officers, Direct									ees.	
	and Contractors	,	, .			,				,	
1	List all officers, directors, trustees, and found	lation r	nanagers an	d their	compens	ation. S	see instru	ictions			
		(b) Titte	e, and average	(c) Co	mpensation	(a)	Contribution	s to	(e) Expe	nse acr	YOURT
	(a) Name and address		rs per week ed to position		not paid, iter -0-)		yee benefit erred compe			illowan	
THO	MAS E. DOLAN JR		IDENT								
	PARK AVENUE HOBOKEN NJ 07030		5.00		0.			0.			0.
	LY MCMULLEN	VICE	-PRES								
	A SHACKLEFORD NASHVILLE TN 37215		5.00		0.			٥.١			0.
	ISON DOLAN	TREA	SURER					1			
	RIVER STREET HOBOKEN NJ 07030		5.00		0.	į		0.			0.
								1			
2	Compensation of five highest-paid employed	es (oth	er than thos	se incl	uded on li	ne 1—:	see instr	uctions). If no	one, e	enter
	"NONE."	•									
			(b) Title, and a		[-1	(d) Contribu				
	(a) Name and address of each employee paid more than \$50,00	00	hours per v	veek	(c) Compe	nsation	employee plans and o		(e) Expe other a	nse acc Illowan	
			devoted to po	osmon			compens				
NONE											
								ĺ			
			[
				···							
								ļ			
Total	number of other employees paid over \$50,000 .				• • • •			. ▶	0		
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art \	D-PF (2017) VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En	Page Iplovees.
G. 1 .	and Contractors (continued)	.р.о, ссо,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONI	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ONE		
		i
tal r	number of others receiving over \$50,000 for professional services	0
art	X-A Summary of Direct Charitable Activities	
	he foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of izations and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 _	SINCE INCEPTION, THE FOUNDATION HAS DIRECTLY FINANCIALLY SUPPORTED	
<u>C</u>	THER PUBLIC AND CIVIC 501 (C)(3) CHARITIES	
		68,680
	THE FOUNDATION HAS DIRECTLY FINANCIALLY SUPPORTED AND SPONSORED A WORK MISSION TRIP TO	
	HE DOMINICAN REPUBLIC. DURING THE TRIP YOUTH ARE SUPERVISED DURING THE CONSTRUCTION OF	20 272
ა 3	CHOOL AND CHURCH STRUCTURAL IMPROVEMENTS FOR LOCAL FAMILIES.	20,373
-		
4		
	X-B Summary of Program-Related Investments (see instructions)	
	nbe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 _	***************************************	
2 -		

All other program-related investments. See instructions.

Form 990-PF (2017)

	80-PF (2017) X Minimum Investment Return (All domestic foundations must complete this part. Foreign	ian four	Page 8
Part	see instructions.)	igii loui	idanons,
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	659,624.
b	Average of monthly cash balances	1b	48,901.
C	Fair market value of all other assets (see instructions)	1c	
ď	Total (add lines 1a, b, and c)	1d	708,525.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	<u> </u> }	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	708,525.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	10,628.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	697,897.
6	Minimum investment return. Enter 5% of line 5	6	34,895.
Part		oundati	ons
	and certain foreign organizations, check here ▶ 🔀 and do not complete this part.)	·	
1	Minimum investment return from Part X, line 6	1	
2 a	Tax on investment income for 2017 from Part VI, line 5	↓	
b	Income fax for 2017. (This does not include the tax from Part VI.) 2b	I	
C	Add lines 2a and 2b	-2c-	
3	Distributable amount before adjustments. Subtract line 2c from line	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	
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1	
ı a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	92,052.
b	Program-related investments—total from Part IX-B	1b	32,032.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
-	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	92,052.
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	482.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	91,570.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g wheth	er the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		
			om 990-PF (2017)

REV 10/16/18 PRO

BAA

BAA

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective for	2017, enter the da	ite of the ruling .	🗲	01/01/2001	
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se		or 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year	Γ	Prior 3 years		
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
	investment return from Part X for each year listed	396.	127.	13.	131.	667.
h	85% of line 2a	337.	108.	11.	111.	567.
	Qualifying distributions from Part XII,	357.	100.			
•	line 4 for each year listed	02.052	46 015	E0 650	124,633.	212 250
d	Amounts included in line 2c not used directly	92,052.	46,015.	50,658.	124,033.	313,358.
G	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.				1	
	Subtract line 2d from line 2c	92,052.	46,015.	50,658.	124,633.	313,358.
3	Complete 3a, b, or c for the			-		
	alternative test relied upon:					
а	"Assets" alternative test enter:			j		1
•	(1) Value of all assets	1				}
	(2) Value of assets qualifying under					······································
	section 4942(j)(3)(B)(i)					
ь	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
_	Part X, line 6 for each year listed					
C	"Support" alternative test-enter:]	
	(1) Total support other than gross investment income (interest,					
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
_	(4) Gross investment income					· · · · · · · · · · · · · · · · · · ·
Part				ne foundation ha	ad \$5,000 or mo	re in assets at
	any time during the year-		<u></u>			
1	Information Regarding Foundation					
а	List any managers of the foundation v					y the foundation
	before the close of any tax year (but o	nly if they have co	intributed more tha	an \$5,000). (See se	ection 507(d)(2).)	
						
b	List any managers of the foundation					ge portion of the
	ownership of a partnership or other er	ntity) of which the f	foundation has a 1	0% or greater inte	rest.	
2	Information Regarding Contribution	, Grant, Gift, Loa	n, Scholarship, et	tc., Programs:		
	Check here ▶ ☐ if the foundation	only makes contri	ibutions to presel	ected charitable of	rganizations and o	does not accept
	unsolicited requests for funds. If the fo	oundation makes	gifts, grants, etc., t	to individuals or or	ganizations under o	other conditions,
	complete items 2a, b, c, and d. See in	structions.				
а	The name, address, and telephone nu	mber or email add	iress of the persor	to whom applicat	ions should be add	lressed:
	See Supplementary Informat:	ion Statement	t			
	The form in which applications should			naterials they shou	ıld include:	
_						
С	Any submission deadlines:	·····				
	-					
d	Any restrictions or limitations on aw	ards, such as by	geographical an	eas, charitable fie	ds, kinds of instit	utions, or other
	factors:	-				
RAA			DE3/ +0/46/49 DDO		Fo	m 990-PF (2017)

REV 10/16/18 PRO

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FELLOWSHIP OF CHRISTIAN ATHLETES				
6 DRUMMOND PLACE		İ		
RED BANK NJ 07701	N/A	CHARITY	GENERAL SUPPORT	2,000.
FAMILY RESOURCES ASSOCIATES				
35 HADDON AVE		l	İ	
SHREWSBURY NJ 07702	N/A	CHARITY	GENERAL SUPPORT	5,000.
LT. DENNIS ZILINSKI MEMORIAL FUND				
PO BOX 35		j	i	
HOLMDEL NJ 07733	N/A	CHARITY	GENERAL SUPPORT	41,000.
MISCELLANEOUS		}	}	1
DONATIONS LESS THAN \$300				
VARIOUS NJ	N/A	CHARITY	GENERAL SUPPORT	600.
BREAKING GROUND				
505 EIGTH AVENUE, 5TH FLOOR				
NEW YORK NY 10018	N/A	CHARITY	GENERAL SUPPORT	1,000.
AVON FIRST AID SQUAD		PUBLIC	1	
PO BOX 3		SAFETY &		
AVON BY THE SEA NJ 07717	N/A		GENERAL SUPPORT	500.
AVON FIRE DEPARTMENT		PUBLIC		ļ
PO BOX 202		SAFETY &	1	
AVON BY THE SEA NJ 07717	N/A	WELLFARE	GENERAL SUPPORT	500.
CITY HARVEST		}		
6 EAST 32ND STREET 5TH FLOOR				
NEW YORK NY 10016	N/A	CHARITY	GENERAL SUPPORT	500.
GO FUND ME - EDIE'S RECOVERY FUND				
	N/A	N/A	GENERAL SUPPORT	1,000.
See Statement	1			
				16,580.
				10,500.
Total	<u> </u>		<u> ▶ 3</u>	68,680.
b Approved for future payment		}		30,000.
				-
		1		
				1
		ľ		
	1			1
Total	<u> </u>	L	▶ 3	b
		`		000 DE

Par	τχν	-A Analysis of Income-Producing Ac					
		ss amounts unless otherwise indicated.		siness income	Excluded by section	on 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1	Prog	ram service revenue:	Business code				(OCC INSUBCTIONS.)
	а						
	ь <u> </u>						
	c _						
	ď _						
	е _						
	f _						
	g F	ees and contracts from government agencies					
		nbership dues and assessments			<u> </u>		
3		est on savings and temporary cash investments					· · · · · · · · · · · · · · · · · · ·
4		dends and interest from securities	90009	396.		- 	ļ
5		rental income or (loss) from real estate:					
		Debt-financed property			 		<u> </u>
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income					
8		or (loss) from sales of assets other than inventory			ļ	-	ļ
9		income or (loss) from special events			ļ. ——-		
10		ss profit or (loss) from sales of inventory					
11	_	er revenue: a					
	Ь _						
	c _						<u></u>
	ď						
	_						
	e _	(2) (3)		205			
	Subt	total. Add columns (b), (d), and (e)		396.		49	306
13	Subt	II. Add line 12, columns (b), (d), and (e)		396.		13	396.
13 (See	Subt Tota work	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.)			13	396.
13 (See Par	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.) ccomplishm	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm ncome is repoposes (other than	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm ncome is repoposes (other than	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm ncome is repoposes (other than	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm ncome is repoposes (other than	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm ncome is repoposes (other than	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	```	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	``	
13 (See Par Line	Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm income is repo	ent of Exemp	t Purposes	``	

Part	XVII	Information Organization		nsfers to and Trai	nsactions	and Relation	nships With I	Nonchar	itable	Exe	mpt
1	in s	he organization of	lirectly or indirectly	engage in any of the 501(c)(3) organizat	following w ions) or in	vith any other of section 527	organization de	escribed political	Y	es	No
а	•		porting foundation t	to a noncharitable ex	empt organi	ization of:				-	
	• •								1a(1)	-+	<u> </u>
	• •	Other assets .							1a(2)	-	×
Ь		r transactions:							15/1)		· · · ·
				empt organization				• •	1b(1) 1b(2)	╅	<u>×</u>
				table exempt organiz er assets				• •	1b(3)	十	÷
									1b(4)		×
		oans or loan gua	•						1b(5)	寸	×
		•		hip or fundraising so					1b(6)	T	×
c	Shar	ing of facilities, e	quipment, mailing l	ists, other assets, or	paid employ	yees			1c		×
d	If the	answer to any	of the above is "Ye	s," complete the fol	lowing sche	edule. Column	(b) should alv	vays show	the fa	ir ma	arket
	value	of the goods, o	ther assets, or serv	rices given by the rep	orting foun	dation. If the f	oundation rece	eived less	than fa	ir ma	arket
				gement, show in colu							
(a) Line	e no.	(b) Amount involved	(c) Name of nonc	chantable exempt organiza	tion (d) Description of t	ransfers, transaction	ons, and shai	nng arran	geme	nts
				·····							
	\dashv										
											—
	\dashv										
		·									
									-		
						·					
	-										
-											
	_		·	 							
									-		
	desc	ribed in section 5		ffiliated with, or relatection 501(c)(3)) or in e.				🗀		X 1	40
		(a) Name of organ	zation	(b) Type of or	ganization		(c) Descripti	on of relation	ship		
											
	-										
	Und	er penalties of perjuty, I	declare that I have examin	ned this return, including acco	ompanying sche	dules and statement	ts, and to the best o	f my knowled	ge and be	ief, ıt ı	s true,
Sign Here		ect, and complete. Decl Marie nature of officer or true	Bolas	han taxpayer) is based on all Date	TRUS		ny knowledge.	May the IR with the pro	eparer sho	wn be	elow?
De:-	1	Print/Type preparer	's name	Preparer's signature		Date	Cha	ck f P	ΠN		
Paid Prep	2505	JILL JOHNS	ON	m Eles Mes I	CPA	11/1	2/2018 self-	employed p	00802	485	<u> 5</u>
Use (Jill A. Johr	son, CPA				▶81-34			_
U3E (Jilly	Firm's address ▶	1011 Blair S				Phone no.	(732)77			
BAA		·	Jackson		NJ (08527		Fo	m 990 ·	PF	(2017)

223622751 TIMOTHY 6:17 FOUNDATION

Form 990-PF: Return of Private Foundation
Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc. **Continuation Statement**

Name and Address Information	Form Information	Submission Information	Restrictions
	LETTER FORM, DESCRIBING THE CHARITABLE NEED OF THE APPLICANT	N/A	N/A
732-245-4286		L	

TIMOTHY 6:17 FOUNDATION 223622751

` Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

Recipient name and address (home or business)	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
a Paid during the year				
INTERFAITH NEIGHBORS 801 FOURTH AVE ASBURY PARK, NJ 07712	N/A	PUBLIC	GENERAL SUPPORT	500.
ACADEMY FOR SOFTWARE ENGINEERING 40 IRVING PL NEW YORK, NY 10003	N/A	PUBLIC	GENERAL SUPPORT	2,500.
ST. PETER'S EPISCOPAL CHURCH 801 ATLANIC AVENUE FERNANDINA BEACH, FL 32034	N/A	CHARITY	GENERAL SUPPORT	940.
LIVE UP PROGRAMS NEW YORK, NY	N/A	CHARITY	GENERAL SUPPORT	1,000.
FIRST PRESBYTERIAN CHURCH 9 N. 6TH STREET FERNANDINA BEACH, FL 32034	N/A	CHARITY	GENERAL SUPPORT	1,200.
JESSICA LITTLE 130 MENDI DRIVE MILLEDGEVILLE, GA 31061	N/A	N/A	FINANCIAL SUPPORT	6,000.
AMERICAN CANCER SOCIETY PO BOX 22478 OKLAHOMA CITY, OK 73123	N/A	CHARITY	GENERAL SUPPORT	1,000.
GRACE FELLOWSHIP UMC 2655 S MASON ROAD KATY, TX 77450	N/A	CHARITY	GENERAL SUPPORT	500.
KUMON OF CENTRAL HARLEM 2235 FREDERICK BLVD NEW YORK, NY 10027	N/A	N/A	GENERAL SUPPORT	2,940.
				16,580.

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book Net Investment Income		Adjusted Net Income
SEE STATEMENT ATTACHED	39,989.	47,758.	
Total	39,989.	47,758.	

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
FEDERAL TAX	648.			
Total	648.			

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
BANK SERVICE CHARGE	188.			188.
OFFICE SUPPLIES	261.			261.
PROGRAM EXPENSE	19,523.			19,523.
PROFESSIONAL FEES	3,400.			3,400.
Total	23,372.			23,372.

Miscellaneous Statement

Name TIMOTHY 6:17 FOUNDATION		fication Number
FORM 990-PF	12/31/2017	
PAGE 1, PART I, LINE 11, OTHER INCOME		
FLOW-THROUGH INCOME FROM ROUTINE CAPITAL CORP. AND GLASSLINED TECHNOLOGIES INC.		
FORM K-1:		
LINE 1, ORDINARY BUSINESS LOSS	-7502.	
LINE 4, INTEREST INCOME	16330.	
LINE 5a, ORDINARY DIVIDENDS	2653.	
LINE 7, NET SHORT TERM CAPITAL GAIN	23883.	
LINE 8, NET LONG TERM CAPITAL GAIN	-2011.	
See Miscellaneous Statement	6636.	
Total	39989.	

cpcv0801 SCR 06/04/18

Additional information from your Miscellaneous Statement (FORM 990-PF)

Miscellaneous Statement (FORM 990-PF) Miscellaneous Statement

Continuation Statement

	1
LINE 10. OTHER INCOME	12151.
LINE 12a, CHARITABLE CONTRIBUTIONS	-267.
LINE 12h, INVESTMENT INTEREST EXPENSE	-1538.
LINE 12K, 2% FL PORTFOLIO DEDUCTIONS	-3502.
LINE 12L, OTHER PORTFOLIO DEDUCTIONS	-208.
tal	6636.