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Form 990-EZ

Department of the Treasury  
Internal Revenue Service2949213813209 9  
2949233512620 8

OMB No. 1545-1150

2017

Open to Public  
InspectionShort Form  
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

► Go to [www.irs.gov/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

B Check if applicable

Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

C Name of organization

Christina M. Rush Foundation Inc  
c/o Joseph D Rush III

Number and street (or P O box, if mail is not delivered to street address)

117 N. Sumner Avenue

D Employer identification number

22-3861119

City or town, state or province, country, and ZIP or foreign postal code

Margate City NJ 08402

Room/suite

03

E Telephone number

609-487-3595

F Group Exemption

Number

G Accounting Method:  Cash  Accrual Other (specify) ► \_\_\_\_\_H Check ►  if the organization is notWebsite: ► [www.christinarush.org](http://www.christinarush.org)

required to attach Schedule B

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

J Tax-exempt status (check only one) —  501(c)(3)  501(c)(4) (insert no.)  4947(a)(1) or  527K Form of organization.  Corporation  Trust  Association  Other

Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ

► \$

11,657

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

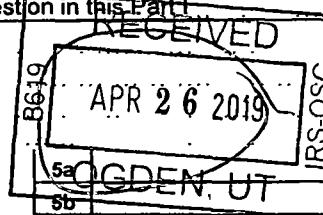
Check if the organization used Schedule O to respond to any question in this Part I

X

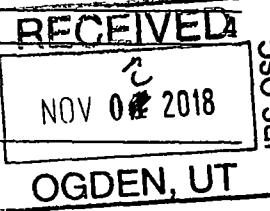
1 Contributions, gifts, grants, and similar amounts received  
 2 Program service revenue including government fees and contracts  
 3 Membership dues and assessments  
 4 Investment income  
 5a Gross amount from sale of assets other than inventory  
 b Less: cost or other basis and sales expenses  
 c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)  
 6 Gaming and fundraising events  
 a Gross income from gaming (attach Schedule G if greater than \$15,000)  
 b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)  
 c Less: direct expenses from gaming and fundraising events  
 d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)  
 7a Gross sales of inventory, less returns and allowances  
 b Less: cost of goods sold  
 c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  
 8 Other revenue (describe in Schedule O)  
 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8

10 Grants and similar amounts paid (list in Schedule O)  
 11 Benefits paid to or for members  
 12 Salaries, other compensation, and employee benefits  
 13 Professional fees and other payments to independent contractors  
 14 Occupancy, rent, utilities, and maintenance  
 15 Printing, publications, postage, and shipping  
 16 Other expenses (describe in Schedule O)  
 17 Total expenses. Add lines 10 through 16

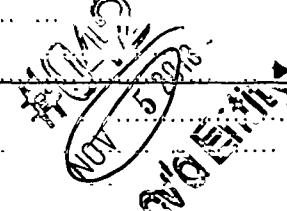
18 Excess or (deficit) for the year (Subtract line 17 from line 9)  
 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)  
 20 Other changes in net assets or fund balances (explain in Schedule O)  
 21 Net assets or fund balances at end of year. Combine lines 18 through 20



RECEIVED  
APR 26 2019  
5a OGDEN, UT  
5b IRS-OSC



RECEIVED  
NOV 01 2018  
5b OGDEN, UT  
5c IRS-OSC



RECEIVED  
NOV 05 2018  
5c IRS-OSC

1 11,653

2

3

4

5

6

7

8

9 11,657

10

11

12

13

14 495

15 584

16 18,425

17 19,510

18 -7,853

19 17,599

20

21 9,746

SCANNED AUG 07 2019

Revenue

0423256121 NOV 27 2018

Expenses

Net Assets

For Paperwork Reduction Act Notice, see the separate Instructions.

Form 990-EZ (2017)



**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O 33

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) 34

35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? 35a

b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 35b

c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 35c

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 36

37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a

b Did the organization file Form 1120-POL for this year? 37b

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 38a

b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b

39 Section 501(c)(7) organizations. Enter:

a Initiation fees and capital contributions included on line 9 39a

b Gross receipts, included on line 9, for public use of club facilities 39b

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:

section 4911 ► ; section 4912 ► ; section 4955 ► 40b

b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40c

c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 40d

d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization 40e

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40f

41 List the states with which a copy of this return is filed ► **None**

42a The organization's books are in care of ► **JOSEPH D. RUSH, III**  
117 N. Sumner Ave.

Telephone no. ► **609-487-3595**

Located at ► **Margate**

**NJ ZIP + 4 ► 08402**

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ► 42b

See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).

c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country: ► 42c

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44a

b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44b

c Did the organization receive any payments for indoor tanning services during the year? 44c

d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 44d

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a

b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) 45b



**SCHEDULE A**  
**(Form 990 or 990-EZ)**
Department of the Treasury  
Internal Revenue Service
**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

**2017**Open to Public  
Inspection

► Attach to Form 990 or Form 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.
**Name of the organization** **Christina M. Rush Foundation Inc** **Employer identification number**  
**c/o Joseph D Rush III** **22-3861119**
**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). *CG*

2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)

3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:

5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)

6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

9  An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

11  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a  Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.

b  Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.

c  Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.

d  Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(I) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	(IV) Is the organization listed in your governing document?		(V) Amount of monetary support (see instructions)	(VI) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	31,900	3,261	1,809	8,085	11,653	56,708
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	95	12	9			116
3 Gross receipts from activities that are not an unrelated trade or business under section 513	9,885	13,895	10,900	8,920		43,600
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	41,880	17,168	12,718	17,005	11,653	100,424
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						100,424

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6	41,880	17,168	12,718	17,005	11,653	100,424
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources				7	4	11
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b				7	4	11
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	41,880	17,168	12,718	17,012	11,657	100,435
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	99.99 %
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	99.99 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

SCHEDULE O  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

2017

Open to Public  
Inspection

Name of the organization

Christina M. Rush Foundation Inc  
c/o Joseph D Rush IIIEmployer identification number  
**22-3861119**

## Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
<b>Expenses</b>	
Advertising and Promotion	\$ 1,654
Checks	\$ 1,459
Web Hosting	\$ 125
PO Box Rental	\$ 187
Schlorships	\$ 15,000
<b>Total</b>	<b>\$ 18,425</b>

## Form 990-EZ, Part III - Primary Exempt Purpose

The Christina Rush Foundation, Inc. has been established to  
annually provide financial aid to local women from Atlantic  
and Cape May counties in NJ suffering from cancer.