

Form **990-PF**Department of the Treasury  
Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2018

**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.  
Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information

OMB No 1545-0052

**2017**

Open to Public Inspection

For calendar year 2017 or tax year beginning , and ending

Name of foundation

A Employer identification number

**NAMASTE FOUNDATION, INC.****26-2541411**

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

Room/suite

B Telephone number

**187 BAYBERRY LANE****908 769-9501**

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

**WATCHUNG, NJ 07069**C If exemption application is pending, check here ☐ **6**

G Check all that apply:

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name changeD 1 Foreign organizations, check here ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundationE If private foundation status was terminated under section 507(b)(1)(A), check here ☐

I Fair market value of all assets at end of year

J Accounting method: ☒ Cash ☐ AccrualF If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

(from Part II, col. (c), line 16)

☐ Other (specify)**\$ 754,138.** (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).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

1 Contributions, gifts, grants, etc., received

**69,374.****N/A**2 Check ☐ if the foundation is not required to attach Sch. B

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

**11,638.****11,638.****STATEMENT 1**

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

**187,080.**b Gross sales price for all assets on line 6a **605,962.**

7 Capital gain net income (from Part IV, line 2)

**187,080.**

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns and allowances

b Less Cost of goods sold

c Gross profit or (loss)

11 Other income

12 Total Add lines 1 through 11

**268,092.****198,718.**

SCANNED FEB 08 2018

Operating and Administrative Expenses

13 Compensation of officers, directors, trustees, etc

**0.****0.****0.**

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees

b Accounting fees **STMT 2****3,800.****0.****3,800.**c Other professional fees **STMT 3****4,546.****4,546.****0.**

17 Interest

18 Taxes **STMT 4****7,911.****721.****0.**

19 Depreciation and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses **STMT 5****13,356.****24.****13,332.**

24 Total operating and administrative expenses. Add lines 13 through 23

**29,613.****5,291.****17,132.**

25 Contributions, gifts, grants paid

**195,877.****195,877.**

26 Total expenses and disbursements. Add lines 24 and 25

**225,490.****5,291.****213,009.**

27 Subtract line 26 from line 12.

a Excess of revenue over expenses and disbursements

**42,602.**

b Net investment income (if negative, enter -0-)

**193,427.**

c Adjusted net income (if negative, enter -0-)

**N/A**932  
17

Part II Balance Sheets		Beginning of year (a) Book Value	End of year	
			(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	249,301.	315,765.	315,765.
	3 Accounts receivable ▶ 698.			
	Less: allowance for doubtful accounts ▶	1,298.	698.	698.
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 6	382,064.	358,802.	437,675.
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment basis ▶			
Liabilities	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other			
	14 Land, buildings, and equipment: basis ▶			
	Less accumulated depreciation ▶			
	15 Other assets (describe ▶)			
	16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	632,663.	675,265.	754,138.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
Net Assets or Fund Balances	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>			
	and complete lines 24 through 26, and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>			
	and complete lines 27 through 31			
	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	632,663.	675,265.	
	30 Total net assets or fund balances	632,663.	675,265.	
	31 Total liabilities and net assets/fund balances	632,663.	675,265.	

## 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	632,663.
2 Enter amount from Part I, line 27a	2	42,602.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	675,265.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	675,265.

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

(a) List and describe the kind(s) of property sold (for example, 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.)
1a SEE ATTACHED MORGAN STANLEY JANUARY STMT	P		
b SEE ATTACHED MORGAN STANLEY JANUARY STMT	P		
c 50 SHS BRIGHTHOUSE FINL INC	P	01/13/17	08/08/17
d SEE ATTACHED MORGAN STANLEY SEPTEMBER STMT	P		
e SEE ATTACHED MORGAN STANLEY SEPTEMBER STMT	P		

  

(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))
a 305,099.		144,104.	160,995.
b 117,896.		100,263.	17,633.
c 2,981.		3,098.	<117.>
d 46,253.		35,592.	10,661.
e 133,733.		135,825.	<2,092.>

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			160,995.
b			17,633.
c			<117.>
d			10,661.
e			<2,092.>

  

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	187,080.
3 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). If (loss), enter -0- in Part I, line 8		3	N/A

**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 doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the 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	162,269.	230,576.	.703755
2015	138,661.	51,907.	2.671335
2014	131,164.	44,434.	2.951884
2013	209,700.	24,969.	8.398414
2012	113,036.	82,268.	1.373997

  

2 Total of line 1, column (d)	2	16.099385
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	3.219877
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	813,401.
5 Multiply line 4 by line 3	5	2,619,051.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,934.
7 Add lines 5 and 6	7	2,620,985.
8 Enter qualifying distributions from Part XII, line 4 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.	8	213,009.

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

1a Exempt operating foundations described in section 4940(d)(2), check here <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 Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	3,869.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	3,869.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5	3,869.
6 Credits/Payments.			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	3,960.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	3,000.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	6,960.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	47.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	3,044.	
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax <input type="checkbox"/> 3,044. Refunded <input type="checkbox"/>	11	0.	

**Part VII-A Statements Regarding Activities**

	Yes	No
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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. 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.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> NJ		
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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	X	

N/A

STMT 7

Form 990-PF (2017)

**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		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	X	
14 The books are in care of ► <u>GAYLE BERNHAUT</u> Telephone no. ► <u>908-769-9501</u> Located at ► <u>187 BAYBERRY LANE, WATCHUNG, NJ</u> ZIP+4 ► <u>07069</u>		
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 <u>N/A</u>		
16 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 the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

**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? <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 checked="" type="checkbox"/> Yes <input 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? (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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any 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 Organizations relying on a current notice regarding disaster assistance, check here ► <input type="checkbox"/>	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1c	X
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)): a 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 Are there any years listed in 2a for which the foundation is not 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 all years listed, answer "No" and attach statement - see instructions.) <u>N/A</u> c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____, _____, _____	2b	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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.) <u>N/A</u>	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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	X

Form 990-PF (2017)

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

5a During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any 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

Organizations relying on a current notice regarding disaster assistance, check here

N/A

5b

c 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?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

X

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DAVID BERNHAUT 187 BAYBERRY LANE WATCHUNG, NJ 07060	TREASURER 0.50	0.	0.	0.
GAYLE BERNHAUT 187 BAYBERRY LANE WATCHUNG, NJ 07060	TRUSTEE 0.50	0.	0.	0.
ERIC WITMONDT 560 ILLINGWORTH AVENUE ENGLEWOOD, NJ 07631	PRESIDENT 0.50	0.	0.	0.
JACQUELINE WITMONDT 560 ILLINGWORTH AVENUE ENGLEWOOD, NJ 07631	VICE PRESIDENT 0.50	0.	0.	0.

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

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

Total number of other employees paid over \$50,000

0

Form 990-PF (2017)

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. 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
1 N/A	
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3

0.

Form 990-PF (2017)

**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>	546,340.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	279,448.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	825,788.
<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>	825,788.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	12,387.
<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>	813,401.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	40,670.

**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>	40,670.
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5	<b>2a</b>	3,869.
<b>b</b>	Income tax for 2017. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	3,869.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	36,801.
<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>	36,801.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	36,801.

**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>	213,009.
<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>	213,009.
<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	<b>5</b>	0.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	213,009.

**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.

Form 990-PF (2017)



**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				36,801.
<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:		0.		
<b>3</b> Excess distributions carryover, if any, to 2017:				
<b>a</b> From 2012	110,471.			
<b>b</b> From 2013	208,956.			
<b>c</b> From 2014	130,386.			
<b>d</b> From 2015	136,769.			
<b>e</b> From 2016	154,688.			
<b>f</b> Total of lines 3a through e	741,270.			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4: ► \$ 213,009.				
<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				36,801.
<b>e</b> Remaining amount distributed out of corpus	176,208.			
<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> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	917,478.			
<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 instr			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	110,471.			
<b>9</b> Excess distributions carryover to 2018 Subtract lines 7 and 8 from line 6a	807,007.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2013	208,956.			
<b>b</b> Excess from 2014	130,386.			
<b>c</b> Excess from 2015	136,769.			
<b>d</b> Excess from 2016	154,688.			
<b>e</b> Excess from 2017	176,208.			



**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)				
a Paid during the year				
ALL STARS PROJECT INC 33 WASHINGTON STREET NEWARK, NJ 07102	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	650.
AMERICAN CANCER SOCIETY 250 WILLIAMS STREET NW ATLANTA, GA 30303	N/A	PC	HEALTH ORGANIZATION DEDICATED TO ELIMINATING CANCER AS A MAJOR HEALTH PROBLEM.	100.
AMERICAN IMMOBILIARE INC 200 CHAMBERS ST APT 6D NEW YORK, NY 10007	N/A	PC	PROVIDING MENTORSHIP AND INTERNSHIP PROGRAMS AND SPONSOR SCHOLARSHIPS IN COMMERCIAL REAL ESTATE	350.
AMERICAN LEGION POST 107 PO BOX 906 HOBOKEN, NJ 07030	N/A	PC	ADVOCATING PATRIOTISM AND HONOR, PROMOTING STRONG NATIONAL SECURITY, AND CONTINUED DEVOTION TO	280.
B+ FOUNDATION 101 ROCKLAND CIRCLE WILMINGTON, DE 19803	N/A	PC	MEDICAL RESEARCH AND TREATMENT	100.
Total SEE CONTINUATION SHEET(S) ▶ 3a				195,877.
b Approved for future payment				
WEILL CORNELL MEDICAL COLLEGE 100 BROADWAY NEW YORK, NY 10005	N/A	PC		15,000.
Total ▶ 3b				15,000.



## Part XVII

## Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

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

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (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
N/A		

**Sign  
Here**

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.

Signature of officer or trustee

Date \_\_\_\_\_

► **TRUSTEE**

Title

May the IRS discuss this return with the preparer shown below? See instr

<input checked="checked" type="checkbox"/>	Yes	<input type="checkbox"/>	No
--	-----	--------------------------	----

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

Preparer's signature

Date
------

Check ☐ self-employed

PTIN
------

CHRISTINE N KOENIG

Christine H. Koenig

11.12.18

P01022180

Firm's name ► **DEMING MALONE LIVESAY & OSTROFF PSC**

Firm's EIN ► 61-1064249

Firm's address ► 9300 SHELBYVILLE RD STE 1100  
LOUISVILLE, KY 40222-5187

Phone no (502) 426-9660

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2017**

Name of the organization

NAMASTE FOUNDATION, INC.

Employer identification number

26-2541411

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- ☐ 501(c)( ) (enter number) organization
- ☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- ☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
- ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
- ☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

NAMASTE FOUNDATION, INC.

26-2541411

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WOODMONT PROPERTIES, LLC 1 MAIN STREET, 2ND FLOOR CHATHAM, NJ 07928	\$ 8,487.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	DONALD WITMONDT SPECIAL TRUST 19 CANOE BROOK ROAD LIVINGSTON, NJ 07039	\$ 53,783.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

**NAMASTE FOUNDATION, INC.****26-2541411****Part II Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	



Name of organization	Employer identification number
<b>NAMASTE FOUNDATION, INC.</b>	<b>26-2541411</b>

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
BAYONNE ECONOMIC OPPORTUNITY 555 KENNEDY BLVD BAYONNE, NJ 07002	N/A	PC	ACHIEVEMENT OF SELF-SUFFICIENCY FOR THE PEOPLE IN HUDSON COUNTY	500.
BEE INFORMED PARTNERSHIP INC 4112 PLANT SCIENCES COLLEGE PARK, MD 020742	N/A	PC	INCREASE COLONY SURVIVORSHIP BY PROVIDING RELEVANT, TIMELY COLONY DATA FOR BEEKEEPERS TO MAKE	400.
BERGEN VOLUNTEER CENTER 64 PASSAIC STREET HACKENSACK, NJ 07601	N/A	PC	URNS CARING INTO MEANINGFUL ACTION BY ENGAGING VOLUNTEERS TO MEET COMMUNITY NEEDS	600.
CEREBRAL PALSY ASSOCIATION OF MIDDLESEX ROOSEVELT PARK, 10 OAK DRIVE EDISON, NJ 08837	N/A	PC	ENABLE PEOPLE WITH PHYSICAL DISABILITIES AND OTHER SPECIAL NEEDS TO ACHIEVE THEIR HIGHEST POTENTIAL	100.
CEREBRAL PALSY OF NORTH JERSEY 220 SOUTH ORANGE AVENUE LIVINGSTON, NJ 07039	N/A	PC	MEDICAL RESEARCH	1,000.
CHRISTOPHER AND DANA REEVE'S FOUNDATION 636 MORRIS TURNPIKE, STE. 3A SHORT HILLS, NJ 07078	N/A	PC	CURING SPINAL CORD INJURY BY FUNDING INNOVATIVE RESEARCH AND IMPROVING THE QUALITY OF LIFE	100.
CIRCLE OF SISTERHOOD FOUNDATION P.O. BOX 90257 INDIANAPOLIS, IN 46290	N/A	PC	REMOVE EDUCATIONAL BARRIERS FOR GIRLS AND WOMEN FACING POVERTY AND OPPRESSION	100.
CITTA 67 HUDSON STREET NEW YORK, NY 10013	N/A	PC	CONNECT WITH COMMUNITIES IN SOME OF THE POOREST AND MOST REMOTE AREAS OF THE WORLD	2,000.
COLUMBIA UNIVERSITY 7435 MONTICELLO ROAD COLUMBIA, SC 29203	N/A	PC	MEDICAL RESEARCH	15,000.
CONGENITAL HEART DEFECT COALITION 45 CAREY AVENUE, STE. 106 BUTLER, NJ 07405	N/A	PC	IMPROVE THE QUALITY OF LIFE FOR CHILDREN AND ADULTS BORN WITH HEART DISEASE	150.
<b>Total from continuation sheets</b>				<b>194,397.</b>

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
COVENANT HOUSE 461 EIGHTH AVENUE NEW YORK, NY 10001	N/A	PC	IMPROVE BOTH OUTCOMES AND SERVICE QUALITY THE HOMELESS AND TRAFFICKED YOUTH	250.
CPA-CELEBRATE OUR STARS & STRIPES 211 FRONT STREET PERTH AMBOY, NJ 08861	N/A	PC	REMEMBER, SHARE AND UPHOLD THE VALUES OUR FOREFATHERS DEFENDED WITH PRIDE AND PATRIOTISM	2,500.
CROHN'S AND COLITIS FOUNDATION 733 THIRD AVENUE, STE. 510 NEW YORK, NY 10017	N/A	PC	FIND A CURE FOR CROHN'S DISEASE AND ULCERATIVE COLITIS AND TO IMPROVE THE QUALITY OF LIFE	100.
CURE BREAST CANCER FOUNDATION 1122 CLIFTON AVE CLIFTON, NJ 07013	N/A	PC	MEDICAL RESEARCH	600.
DWIGHT ENGLEWOOD SCHOOL FUND 315 EAST PALISADE AVENUE ENGLEWOOD, NJ 07631	N/A	PC	EDUCATIONAL PROGRAMS	26,333.
ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION 1140 CONNECTICUT AVENUE NW #200 WASHINGTON, DC 20036	N/A	PC	TO END PEDIATRIC HIV/AIDS THROUGH GROUNDBREAKING RESEARCH, ADVOCACY, AND PREVENTION AND	100.
EMPLOYMENT HORIZONS INC 10 RIDGEDALE AVE CEDAR KNOLLS, NJ 07927	N/A	PC	ASSIST PEOPLE WITH BARRIERS TO EMPLOYMENT TO ACHIEVE THEIR INDIVIDUAL VOCATIONAL OBJECTIVES	200.
FAIR SHARE HOUSING CENTER 510 PARK BLVD CHERRY HILL, NJ 08002	N/A	PC	END DISCRIMINATORY OR EXCLUSIONARY HOUSING	4,500.
FAIRFIELD POLICE FOUNDATION PO BOX 11251 FAIRFIELD, NJ 07004	N/A	PC	RAISE MONIES FOR SERVICES OR MATERIALS FOR THE USE OF THE FAIRFIELD POLICE DEPARTMENT	100.
FRIENDS OF THE ASPEN ANIMAL SHELTER PO BOX 985 ASPEN, CO 81612	N/A	PC	PROMOTES AND PROVIDES FOR THE WELFARE, CARE AND HEALTH OF ANIMALS	3,000.
Total from continuation sheets				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
FRIENDS OF THE SMITHSONIAN PO BOX 37012, MRC 712 WASHINGTON, DC 20013	N/A	PC	ARTS, CULTURE, & HUMANITIES	250.
FRIENDSHIP CIRCLE INTERNATIONAL INC. 816 EASTERN PARKWAY BROOKLYN, NY 11213	N/A	PC	HUMANITIES	162.
GENTLE BARNS-MISSOURI 9171 STATE RD Y DITTMER, MO 63023	N/A	PC	RESCUES ANIMALS FROM SEVERE ABUSE AND NEGLECT WHO ARE TOO OLD, SICK, LAME, OR SCARED TO BE ADOPTED	750.
GEORGETOWN UNIVERSITY 3700 O ST NW WASHINGTON, DC 20057	N/A	PC	EDUCATIONAL PROGRAMS	1,000.
GREEN AMERICA 1612 K STREET NW WASHINGTON, DC 20006	N/A	PC	SOCIAL AND ENVIRONMENTAL PROGRAMS	350.
HABITAT FOR HUMANITY 270 PEACHTREE STREET NW, STE 1300 ATLANTA, GA 30303	N/A	PC	HOUSING & SHELTER	1,425.
HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PLACE, SW WASHINGTON, DC 20024	N/A	PC	HISTORICAL PRESERVATION	10,000.
IEP YOUTH SERVICES 75 WEST MATN STREET FREEHOLD, NJ 07728	N/A	PC	PROVIDE PSYCHOLOGICAL EVALUATION SERVICES & RESPITE CARE SERVICES FOR CHILDREN IN FAMILY CRISIS SITUATIONS	500.
ISRAEL SPORTS EXCHANGE PO BOX 307 COLONIA, NJ 07067	N/A	PC	IS A HIGH LEVEL SPORTS TRAINING PROGRAM FOR VARSITY LEVEL AMERICAN TENNIS PLAYERS IN ISRAEL	450.
JEWISH COMMUNITY CENTER ON THE PALISADES 411 E. CLINTON AVENUE TENAFLY, NJ 07670	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	200.
Total from continuation sheets				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
JEWISH MUSEUM 1109 FIFTH AVENUE NEW YORK, NY 10128	N/A	PC	ARTS, CULTURE, & HUMANITIES	500.
JEWISH VOCATIONAL SERVICES 75 FEDERAL STREET, 3RD FLOOR BOSTON, MA 02110	N/A	PC	EMPOWERING INDIVIDUALS FROM DIVERSE COMMUNITIES TO FIND EMPLOYMENT AND BUILD CAREERS	7,500.
LAKELAND CHARITIES INC. 250 OAK RIDGE RD OAK RIDGE, NJ 07438	N/A	PC	DONATE THE PROCEEDS TO OTHER 501 (C) (3) ORGANIZATIONS AND GRANT SCHOLARSHIPS SCHOLARSHIPS TO	450.
LISA B FISHMAN FOUNDATION 11 WEDGEWOOD DR MONTVILLE, NJ 07045	N/A	PC	RAISING MONEY FOR LYMPHOMA AND CANCER RESEARCH	100.
MARYLAND HILLEL 7612 MOWATT LANE COLLEGE PARK, MD 20742	N/A	PC	VALUES LAY LEADERSHIP AND INVOLVEMENT TO HELP ADVANCE JEWISH LIFE ON CAMPUS	371.
MATHENY MEDICAL CENTER 65 HIGHLAND AVENUE PEAPACK, NJ 07977	N/A	PC	PROVIDE EXCEPTIONAL CARE AND AN OPTIMAL QUALITY OF LIFE FOR CHILDREN AND ADULTS WITH SPECIAL NEEDS AND	150.
METUCHEN DOWNTOWN ALLIANCE 402 MAIN ST STE 204 METUCHEN, NJ 08840	N/A	PC	PROMOTION AND REVITALIZATION OF THE DESIGNATED METUCHEN BUSINESS DISTRICT	2,500.
MRCC FOUNDATION C/O BRACH EICHLER LLC 101 EISENHOWER PKWY ROSELAND, NJ 07068	N/A	PC	EDUCATIONAL	400.
MT. PLEASANT ANIMAL SHELTER-HOWL LING PAWRADE 194 ROUTE 10 WEST EAST HANOVER, NJ 07936	N/A	PC	ANIMAL WELFARE ORGANIZATION	100.
NATIONAL MS SOCIETY 733 3RD AVENUE NEW YORK, NY 10017	N/A	PC	DISEASE, DISORDERS & MEDICAL DISCIPLINES	350.
Total from continuation sheets				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
NATIONAL VACCINE INFORMATION CENTER 21525 RIDGETOP CIRCLE STERLING, VA 20166	N/A	PC	HEALTH-GENERAL & REHABILITATIVE	500.
NETWORK FOR GOOD FOR TUFTS UNIVERSITY BALLOU HALL MEDFORD, MA 02155	N/A	PC	INCREASE CHARITABLE GIVING FROM INDIVIDUALS AND DECREASE THE COST OF FUNDRAISING FOR	180.
NETWORK FOR GOOD 1140 CONNECTICUT AVE NW STE 700 WASHINGTON, DC 20036	N/A	PC	INCREASE CHARITABLE GIVING FROM INDIVIDUALS AND DECREASE THE COST OF FUNDRAISING FOR	274.
NEW JERSEY PERFORMING ARTS CENTER CORPORATION ONE CENTER STREET NEWARK, NJ 07102	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	125.
NEW JERSEY SYMPHONY ORCHESTRA 60 PARK PLACE 9TH FLOOR NEWARK, NJ 07102	N/A	PC	ENRICH LIVES THROUGH A PASSION FOR MUSICAL EXCELLENCE AND A COMMITMENT TO NEW JERSEY, ITS PEOPLE AND	125.
OAK RIDGE PRESBYTERIAN CHURCH 321 OAK RIDGE ROAD OAK RIDGE, NJ 07460	N/A	PC	RELIGIOUS PROGRAMS	300.
ONE LOVE FOUNDATION 46 PONDFIELD ROAD BRONXVILLE, NY 10708	N/A	PC	A MULTI-LAYERED EDUCATION, AWARENESS AND MOVEMENT-BUILDING CAMPAIGN THAT SURROUNDS YOUNG PEOPLE	150.
PADDLERS FOR HUMANITY PO BOX 2555 EAST HAMPTON, NY 11937	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	500.
PROJECT ALS 801 RIVERSIDE DRIVE, #6G NEW YORK, NY 10032	N/A	PC	DEVELOPE A NEW PARADIGM FOR ALS RESEARCH BY DEVELOPING A STRATEGIC BUSINESS MODEL FOR FINDING	1,400.
RAINBOW FOUNDATION PO BOX 545 NEW MONMOUTH, NJ 07748	N/A	PC	HELP NEEDY CHILDREN	100.
<b>Total from continuation sheets</b>				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
RILEY'S DANCE NJ 691 CENTRAL AVENUE NEW PROVIDENCE, NJ 07974	N/A	PC	IMPROVE THE QUALITY OF LIFE FOR TRANSPLANT RECIPIENTS AND THOSE IN NEED OF ORGAN TRANSPLANTS	250.
ROUNABOUT THEATRE COMPANY 231 W 39TH ST STE 1200 NEW YORK, NY 10018	N/A	PC	PROVIDING A HOME FOR CLASSIC THEATRE WHERE AUDIENCES OF ALL AGES CAN EXPERIENCE HIGH QUALITY THEATRICAL	2,000.
SCLERODERMA RESEARCH FOUNDATION 220 MONTGOMERY STREET SUITE 484 SAN FRANCISCO, CA 94104	N/A	PC	FUND AND FACILITATE THE MOST PROMISING, HIGHEST QUALITY RESEARCH AIMED AT NEW TREATMENTS AND	1,000.
SHARSHERET 1086 TEANECK ROAD, SUITE 2G TEANECK, NJ 07666	N/A	PC	SUPPORTING YOUNG JEWISH WOMEN AND THEIR FAMILIES FACING BREAST CANCER	180.
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104	N/A	PC	HELP WIN JUSTICE ON BEHALF OF THOSE WHO HAVE NO OTHER CHAMPION, EXPOSE AND FIGHT THE HATE THAT	250.
ST. BARNABAS MEDICAL CENTER 94 OLD SHORT HILLS ROAD LIVINGSTON, NJ 07039	N/A	PC	HEALTHCARE	51,000.
STRATTON MOUNTAIN & VALLEY COMMUNITY BENEFIT FOUNDATION PO BOX 523 STRATTON MTN, VT 05155	N/A	PC	ESTABLISH A SERIES OF EVENTS AND PROGRAMS AND STRATTON ARCHIVES FOR THE BENEFIT OF THE PUBLIC	275.
THE BRIDGE 141 SOUTH UNION STREET FREMONT, NE 68025	N/A	PC	PREVENTION AND ELIMINATION OF DOMESTIC VIOLENCE AND SEXUAL ASSAULT	100.
THE CATALOG FOR GIVING 270 MADISON AVENUE, 9TH FLOOR NEW YORK, NY 10016	N/A	PC	TRANSFORMING THE LIVES OF UNDERSERVED NEW YORK CITY CHILDREN	422.
THE COMMUNITY FOOD BANK OF NEW JERSEY 31 EVANS TERMINAL HILLSIDE, NJ 07205	N/A	PC	HUMANITIES	1,425.
<b>Total from continuation sheets</b>				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
TIKVA CHILDREN'S HOME 8 HENDERSON DR WEST CALDWELL, NJ 07006	N/A	PC	TO CARE FOR THE HOMELESS, ABANDONED AND ABUSED JEWISH CHILDREN OF THE ODESSA REGION OF THE UKRAINE	2,500.
TRIPLE NEGATIVE BREAST CANCER FOUNDATION PO BOX 204 NORWOOD, NJ 07648	N/A	PC	MEDICAL RESEARCH	300.
TUNNEL TO TOWERS FOUNDATION 2361 HILAN BLVD STATEN ISLAND, NY 10306	N/A	PC	PUBLIC, SOCIETY BENEFIT-MULTIPURPOSE & OTHER	250.
UJA FEDERATION NYC 130 EAST 59TH STREET NEW YORK, NY 10022	N/A	PC	CARE FOR PEOPLE IN NEED, RESPOND TO CRISES CLOSE TO HOME AND FAR AWAY, AND SHAPE OUR JEWISH	2,500.
UJA OF GREATER METROWEST NJ 901 ROUTE 10 W WHIPPANY, NJ 07981	N/A	PC	PHILANTHROPY, VOLUNTARISM, & GRANTMAKING FOUNDATIONS	2,400.
UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDATION 1 STATE STREET, 24TH FLOOR NEW YORK, NY 10004	N/A	PC	EDUCATIONAL	12,000.
UNIVERSITY OF MICHIGAN 1029 VAUGHN STREET ANN ARBOR, MI 48104	N/A	PC	EDUCATIONAL	20,000.
VETERANS EMPOWERED TO PROTECT AFRICAN WILDLIFE 41 MADISON AVENUE #3100 NEW YORK, NY 10010	N/A	PC	HELP END THE AFRICAN POACHING CRISIS AND CONSERVE ENDANGERED SPECIES	2,250.
WATCHUNG RESCUE SQUAD 10 STIRLING RD WATCHUNG, NJ 07069	N/A	PC	ADMINISTERS EMERGENCY MEDICAL CARE AND TRANSPORTATION TO LOCAL HOSPITALS WITHIN THE BOUNDARIES OF THE	500.
WEILL CORNELL MEDICAL COLLEGE 100 BROADWAY NEW YORK, NY 10005	N/A	PC	MEDICAL CARE	5,000.
Total from continuation sheets				



### 3 Grants and Contributions Paid During the Year (Continuation)

**Total from continuation sheets**

**Part XV** Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - AMERICAN IMMOBILIARE INC

PROVIDING MENTORSHIP AND INTERNSHIP PROGRAMS AND SPONSOR SCHOLARSHIPS  
IN COMMERCIAL REAL ESTATE RELATED FIELDS

NAME OF RECIPIENT - AMERICAN LEGION POST 107

ADVOCATING PATRIOTISM AND HONOR, PROMOTING STRONG NATIONAL SECURITY,  
AND CONTINUED DEVOTION TO OUR FELLOW SERVICE MEMBERS AND VETERANS

NAME OF RECIPIENT - BEE INFORMED PARTNERSHIP INC

INCREASE COLONY SURVIVORSHIP BY PROVIDING RELEVANT, TIMELY COLONY DATA  
FOR BEEKEEPERS TO MAKE INFORMED MANAGEMENT DECISIONS

NAME OF RECIPIENT - ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION

TO END PEDIATRIC HIV/AIDS THROUGH GROUNDBREAKING RESEARCH, ADVOCACY,  
AND PREVENTION AND TREATMENT PROGRAMS

NAME OF RECIPIENT - GENTLE BARNS-MISSOURI

RESCUES ANIMALS FROM SEVERE ABUSE AND NEGLECT WHO ARE TOO OLD, SICK,  
LAME, OR SCARED TO BE ADOPTED INTO HOMES

NAME OF RECIPIENT - LAKELAND CHARITIES INC.

DONATE THE PROCEEDS TO OTHER 501 (C) (3) ORGANIZATIONS AND GRANT  
SCHOLARSHIPS TO DESERVING INDIVIDUALS

NAME OF RECIPIENT - MATHENY MEDICAL CENTER

PROVIDE EXCEPTIONAL CARE AND AN OPTIMAL QUALITY OF LIFE FOR CHILDREN  
AND ADULTS WITH SPECIAL NEEDS AND MEDICALLY COMPLEX DEVELOPMENTAL  
DISABILITIES

**Part XV** Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - NETWORK FOR GOOD FOR TUFTS UNIVERSITY

INCREASE CHARITABLE GIVING FROM INDIVIDUALS AND DECREASE THE COST OF  
FUNDRAISING FOR NONPROFITS

NAME OF RECIPIENT - NETWORK FOR GOOD

INCREASE CHARITABLE GIVING FROM INDIVIDUALS AND DECREASE THE COST OF  
FUNDRAISING FOR NONPROFITS

NAME OF RECIPIENT - NEW JERSEY SYMPHONY ORCHESTRA

ENRICH LIVES THROUGH A PASSION FOR MUSICAL EXCELLENCE AND A COMMITMENT  
TO NEW JERSEY, ITS PEOPLE AND ITS COMMUNITIES

NAME OF RECIPIENT - ONE LOVE FOUNDATION

A MULTI-LAYERED EDUCATION, AWARENESS AND MOVEMENT-BUILDING CAMPAIGN  
THAT SURROUNDS YOUNG PEOPLE WITH MESSAGES ABOUT HEALTHY AND UNHEALTHY  
RELATIONSHIPS IN THE CLASSROOM, THE COMMUNITY AND ONLINE.

NAME OF RECIPIENT - PROJECT ALS

DEVELOPE A NEW PARADIGM FOR ALS RESEARCH BY DEVELOPING A STRATEGIC  
BUSINESS MODEL FOR FINDING TREATMENTSAND A CURE FOR ALS

NAME OF RECIPIENT - ROUNDABOUT THEATRE COMPANY

PROVIDING A HOME FOR CLASSIC THEATRE WHERE AUDIENCES OF ALL AGES CAN  
EXPERIENCE HIGH QUALITY THEATRICAL REVIVALS

NAME OF RECIPIENT - SCLERODERMA RESEARCH FOUNDATION

FUND AND FACILITATE THE MOST PROMISING, HIGHEST QUALITY RESEARCH AIMED

**Part XV** Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

AT NEW TREATMENTS AND, ULTIMATELY, A CURE FOR SCLERODERMA

NAME OF RECIPIENT - SOUTHERN POVERTY LAW CENTER

HELP WIN JUSTICE ON BEHALF OF THOSE WHO HAVE NO OTHER CHAMPION, EXPOSE  
AND FIGHT THE HATE THAT THRIVES IN OUR COUNTRY, AND PROVIDE TOLERANCE  
EDUCATION MATERIALS FREE OF CHARGE TO SCHOOLS ACROSS OUR NATION

NAME OF RECIPIENT - UJA FEDERATION NYC

CARE FOR PEOPLE IN NEED, RESPOND TO CRISES CLOSE TO HOME AND FAR AWAY,  
AND SHAPE OUR JEWISH FUTURE

NAME OF RECIPIENT - WATCHUNG RESCUE SQUAD

ADMINISTERS EMERGENCY MEDICAL CARE AND TRANSPORTATION TO LOCAL  
HOSPITALS WITHIN THE BOUNDARIES OF THE BOROUGH OF WATCHUNG

NAME OF RECIPIENT - YOUNG AUDIENCES OF NJ

HELP THE BROAD NETWORK OF YA AFFILIATES PLAY A DECISIVE ROLE IN ALL  
YOUNG PEOPLE'S EDUCATION AND DEVELOPMENT

---



---

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
-------------	--	-----------	---

---

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY	11,638.	0.	11,638.	11,638.	
TO PART I, LINE 4	11,638.	0.	11,638.	11,638.	

---



---



---



---

FORM 990-PF	ACCOUNTING FEES	STATEMENT	2
-------------	-----------------	-----------	---

---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION FEES	3,800.	0.		3,800.
TO FORM 990-PF, PG 1, LN 16B	3,800.	0.		3,800.

---



---



---



---

FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	3
-------------	-------------------------	-----------	---

---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVISORY FEES	4,546.	4,546.		0.
TO FORM 990-PF, PG 1, LN 16C	4,546.	4,546.		0.

---



---



---



---

FORM 990-PF	TAXES	STATEMENT	4
-------------	-------	-----------	---

---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
2016 EXCISE TAX	3,230.	0.		0.
2017 EXCISE TAX	3,960.	0.		0.
FOREIGN TAXES	721.	721.		0.
TO FORM 990-PF, PG 1, LN 18	7,911.	721.		0.

---



---

FORM 990-PF	OTHER EXPENSES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
HOMELESS DRIVE	12,484.	0.		12,484.
ADMIN EXPENSES	848.	0.		848.
ADR FEES	24.	24.		0.
TO FORM 990-PF, PG 1, LN 23	13,356.	24.		13,332.

FORM 990-PF	CORPORATE STOCK		STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
SEE ATTACHED PORTFOLIO STATEMENT	358,802.	437,675.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	358,802.	437,675.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 7
-------------	---	-------------

NAME OF CONTRIBUTOR	ADDRESS
DAVID BERNHAUT	187 BAYBERRY LANE WATCHUNG, NJ 07060
GAYLE BERNHAUT	187 BAYBERRY LANE WATCHUNG, NJ 07060
ERIC WITMONDT	560 ILLINGWORTH AVENUE ENGLEWOOD, NJ 07631
JACQUELINE WITMONDT	560 ILLINGWORTH AVENUE ENGLEWOOD, NJ 07631

FORM 990-PF

PART XV - LINE 1A  
LIST OF FOUNDATION MANAGERS

STATEMENT 8

NAME OF MANAGER

DAVID BERNHAUT  
GAYLE BERNHAUT  
ERIC WITMONDT  
JACQUELINE WITMONDT