# Department of the Treasury

# **Return of Private Foundation**

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

OMB No 1545-0052

2017

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

=	THE THE VI	Go to www.irs.gov/Form990PF t	or instruction	s and 1	the lates	st informat	ion.	en to Public Inspection
		ndar year 2017 or tax year beginning		, 201	7, and <b>6</b>			, 20
		oundation				A Employ	er identification nun	nber 4.
<u>L</u> ]	GHTE	BRIDGE FOUNDATION, INC.				30-0002119		
~Ni	ımber a	nd street (or P O. box number if mail is not delivered to street address)		Room	/suite	B Telephone number (see instructions)		
		RAND STREET		2ND	FLOOR	(732	)980-1900	
Cr	ty or tov	vn, state or province, country, and ZIP or foreign postal code				C If exemp	tion application is pe	nding, check here ► 🗌
		NJ 08830		_				
G	Chec	k all that apply: 🔲 Initial return 🔲 Initial retur	n of a former	public	charity	D 1. Foreig	n organizations, che	ck here
		Final return Amended				2 Foreic	ın organizations meel	ting the 85% test
		Address change Name cha				check	here and attach com	iputation > \ \
H		k type of organization:   Section 501(c)(3) exempt p					foundation status was 507(b)(1)(A), check he	
Щ		on 4947(a)(1) nonexempt charitable trust 🔲 Other ta				30000011	oor (o)(1)(r), check he	
ı		narket value of all assets at J Accounting method	d: 🗵 Cash	□ Ad	ccrual	F If the fou	indation is in a 60-mo	onth termination
		of year (from Part II, col. (c), Other (specify)					ction 507(b)(1)(B), ch	
		6) ► \$ 90, 263. (Part I, column (d) must b	e on cash basi	s.)				
Р	art I		(a) Revenue	and	(h) Nint		(-) A double do	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses p			investment come	(c) Adjusted net income	for charitable purposes
	r	the amounts in column (a) (see instructions).)	50000					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	89,0		<u> \$4</u>	1495	· · · · · · · · · · · · · · · · · · ·	
	2	Check ▶ ☐ If the foundation is <b>not</b> required to attach Sch. B				ŝile.		VINEA!
	3	Interest on savings and temporary cash investments		-				<b>878</b> ( <b>3</b> 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	4	Dividends and interest from securities						
က္	5a	Gross rents	* **					
20	b	Net rental income or (loss)	1246	<b>8.9</b> :				
JiRevenûe20ใช	6a	Net gain or (loss) from sale of assets not on line 10			4 / K	i ini	1 1	
E	_ b	Gross sales price for all assets on line 6a			1.36	<u> </u>	, l	
<u>.</u> .	7	Capital gain net income (from Part IV, line 2)		4.91			_ المنزل الما	. <u> </u>
:5	8	Net short-term capital gain			1 4 5			
	9	Income modifications		<b>\$</b> 44		الكمور	NED 181	/: 4 <b>% % 3</b> 7 7
SCANNED	10a	Gross sales less returns and allowances		<b>%</b> 11	استر	<b>SEUS</b>	10/	
Z	b	Less. Cost of goods sold	K & & .	er R A	1		1 5018	
Ź	C	Gross profit or (loss) (attach schedule)			10/	· WAY!	1	
$\mathcal{O}$	11	Other income (attach schedule)	ļ		15	<b>T</b>		
	12	Total. Add lines 1 through 11	89,0	32.	<u>\ū</u>	1/201	ENIL	
enses	13	Compensation of officers, directors, trustees, etc.			$- \lambda$	OG		
ÜŠ	14	Other employee salaries and wages						
þe	15	Pension plans, employee benefits						
Ж	16a b	Legal fees (attach schedule)						
Operating and Administrative Exp	C	Accounting fees (attach schedule) Other professional fees (attach schedule)	12.0	00			-	
aţį	17	Interest	13,0	<u> </u>			<u> </u>	
str	18	Taxes (attach schedule) (see instructions)					<u> </u>	<del></del>
ΞĚ	19	Depreciation (attach schedule) and depletion						1 4 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ε	20	Occupancy	<u> </u>					
Αc	21	Travel, conferences, and meetings				·	<del></del>	<del></del>
ы	22							<del>                                     </del>
<u>a</u>	23	Printing and publications		02		<del></del>		
ù.	24	Total operating and administrative expenses.	5,5	94.				<del> </del>
rat		Add lines 13 through 23	10 5	ا ۵				
be	25	Contributions, gifts, grants paid	18,5				, a mailte a se se	
ō	26	Total expenses and disbursements. Add lines 24 and 25	45,0			17 S. 1. 2.		<del></del>
	27	Subtract line 26 from line 12.	63,6		, ,	CH TANK T	1907 s a. 11. 1844 to . 2. 1	2 2 2 3 3 4 10 A 10 1 2 I
	a	Excess of revenue over expenses and disbursements			i d			
	b	Net investment income (if negative, enter -0-)	25,3	94.	hi.	7 w W.		18 44 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1
		Adjusted net income (if negative, enter -0-)			- Sp. 10	些事為.	1 -AL ( 2007/), DA ()	1 (34.7) (3.4.7)
		, aster not moorne in negative, enter -0-)	7 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	2082	2 /4/			

For Paperwork Reduction Act Notice, see instructions.

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Form **990-PF** (2017)



P:	ant li	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		of year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash—non-interest-bearing	64,869.	90,263.	90,263.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	<del>-</del>		
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less. allowance for doubtful accounts ▶			
Š	8	Inventories for sale or use	- · · · · · · · · · · · · · · · · · · ·	<del></del>	
Assets	9	Prepaid expenses and deferred charges			
ΑS	10a	Investments—U.S. and state government obligations (attach schedule)			
•	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			inia
	' '	Less. accumulated depreciation (attach schedule) ▶	·		Linia Will Walking
	12	Investments mortgage leans			
	13	Investments—other (attach schedule)			
	14	land buildings and animment basis	<b>8</b> 1		3 322 12 22 24
	14	Land, buildings, and equipment, basis ►		N. KoMadM (Akhikara ).	ilaanii . il
	45	Less accumulated depreciation (attach schedule)			
	15 16	Other assets (describe > )  Total assets (to be completed by all filers—see the			
	10	instructions. Also, see page 1, item I)			
	47		64,869.	90,263.	90,263.
	17	Accounts payable and accrued expenses			-
S	18	Grants payable			
ı≝	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			-
Liabilities	21	Mortgages and other notes payable (attach schedule)			<u> </u>
	22	Other liabilities (describe ▶ )	·		
	23	Total liabilities (add lines 17 through 22)			
Ses		Foundations that follow SFAS 117, check here ▶ ⊠ and complete lines 24 through 26, and lines 30 and 31.			\$ °\$
Ĕ	24	Unrestricted	64,869.	90,263.	
a	25	Temporarily restricted			
8	26	Permanently restricted	=		
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.			
7	27				
S	27				ii iii ika
šet	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
15	29	Retained earnings, accumulated income, endowment, or other funds	61.060		
it/	30	Total net assets or fund balances (see instructions)	64,869.	90,263.	
Ň	31	Total liabilities and net assets/fund balances (see			
		instructions)	64,869.	90,263.	
	rt III	Analysis of Changes in Net Assets or Fund Balances	(-) lin - 00 (-	<u> </u>	
1		I net assets or fund balances at beginning of year—Part II, colui		- I	6: 655
_		of-year figure reported on prior year's return)		<b>⊢</b> . <u>-</u> -	64,869.
2		r amount from Part I, line 27a		<del></del>	25,394.
3					
4		lines 1, 2, and 3		4	90,263.
5	Decr	reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—I		5	
6	Iota	I net assets or fund balances at end of year (line 4 minus line 5)—I	art II, column (b), li	ne 30 <b>6</b>	90,263.

		(s) of property sold (for example, real et , or common stock, 200 shs MLC Co		(b) How a P—Pure D—Dor	hase	c) Date acquired (mo , day, yr )	(d) Date sold (mo , day. yr.)
<u>1a</u>							
_b							
C							
d							<u> </u>
<u>e</u>							<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		Cost or other basis us expense of sale			ain or (loss) s (f) minus (g))
a b							
c							
d				· · ·			
е							
	Complete only for assets show	ing gain in column (h) and owned	by the foun	dation on 12/31/	69	(I) Gains (C	ol (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		c) Excess of col (i) over col (j), if any		col (k), but r	ot less than -0-) <b>or</b> (from col. (h))
a							
b							
c							
d							
е							
2	Capital gain net income or (			ın Part I, line 7 ın Part I, line 7	}   2		
}	Net short-term capital gain	or (loss) as defined in sections	s 1222(5) a	ınd (6):			
		line 8, column (c). See instru			- ın )		
	_				}		
	Part I, line 8				. ] [3		
or c	V Qualification Under	r Section 4940(e) for Redu ate foundations subject to the	uced Tax	on Net Inves	tment In	come	
or c sec as t	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the se	r Section 4940(e) for Reducte foundations subject to the this part blank. ection 4942 tax on the distribu	section 49	on Net Investigation on Net Investigation of any year	tment In	come nt income.)	☐ Yes ☐ N
ec as t	Qualification Under ptional use by domestic priva- ion 4940(d)(2) applies, leave the foundation liable for the se s," the foundation doesn't quality	r Section 4940(e) for Redu ate foundations subject to the this part blank. ection 4942 tax on the distribution alify under section 4940(e). Do	uced Tax section 49 utable amo	on Net Invest 040(a) tax on ne ount of any year olete this part.	tment In t investme	come nt income.) e period?	
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or cosec sec sec sec sec sec sec sec sec sec	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't qualitate the appropriate amou (a)  Base period years endar year (or tax year beginning in)  2016  2015  2014  2013  2012  Total of line 1, column (d)  Average distribution ratio for the number of years the foundation use the set of t	ate foundations subject to the this part blank. ection 4942 tax on the distribution 4940(e). Do not in each column for each year adjusted qualifying distribution 4940(e). Adjusted qualifying distribution 4940(e). The first part of the 5-year base period—divided the foundation of the first part of th	uced Tax section 49  utable amore not complete, see the  0.  0.  0.  0.  0.  vide the to	on Net Investigation of the second of the se	in the basefore making the ble-use asset to the ble	come nt income.)  e period?  ng any entries  (col (t)	(d) Istribution ratio (i) divided by col (c))  0.00000  0.00000  0.00000  0.00000  0.00000  0.00000
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Part,		instructions)					
1a		N/A					
٠.							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check						
_	here ► □ and enter 1% of Part I, line 27b						
C	Part I, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)						
3	Add lines 1 and 2	0.					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)						
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	0.					
6	Credits/Payments:	,					
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a	,					
b	Exempt foreign organizations—tax withheld at source	£ ,					
c	Tax paid with application for extension of time to file (Form 8868) . 6c 6d 6d						
d 7	Backup withholding erroneously withheld						
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	0.					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10	0.					
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11						
Part	VII-A Statements Regarding Activities	·					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes No					
	participate or intervene in any political campaign?	1a ×					
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the						
	instructions for the definition	1b ×					
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities.						
C	Did the foundation file Form 1120-POL for this year?	1c ×					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.						
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2 ×					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 ×					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	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:						
	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?	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. ▶						
ı.	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
b	(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," complete Part XIV	9   1 × 4					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
10	names and addresses	10 ×					

Par	VIFA Statements Regarding Activities (continued)			
44	At any time during the year and the foundation durethy or indirectly, even a controlled entity within the		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	 	×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ► N/A			
14	The books are in care of ► GAETANO FALZARANO  Telephone no. ► (732)		1900	) 
15	Located at ► 116 GRAND STREET ISELIN NJ ZIP+4 ► 08830 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			<b>•</b> 🗂
	and enter the amount of tax-exempt interest received or accrued during the year		•	- (
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	L	×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	T   ,* *.		
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	_l		<u>                                     </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	: 55	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	13	, ,	· * 2 4
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		. ;	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	lá	i,	
	disqualified person?		, 2	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Yes   No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		- 85	<b>F</b> . 3
	the benefit or use of a disqualified person)?		ı .	l, i
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		2.5	
	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.)		:40	
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	Nat.	
_	Organizations relying on a current notice regarding disaster assistance, check here			
С	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)):		ĺ	
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?			
ь	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
	(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.)	2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	Mi.		
20	► 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		[.# j.	
3a	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			N.
~	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	2 - 34,	~	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			li
	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.)	\â	ننگثا	
4-	foundation had excess business holdings in 2017.)	3b		
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a	2.3	×
~	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	Eller a-	×

Page	¢
raye	•

Pari	Statements Regarding Activities	s for W	/hich Form	4720 l	May Be R	equire	<b>d</b> (conti	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt t	o influe	nce legislatio	n (sect	ion 4945(e)	)? .	☐ Yes	⊠ No			
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,								1		;
	directly or indirectly, any voter registration drive?										•
	(3) Provide a grant to an individual for travel, stu	dy, or d	other similar i	ourpose	es?		Yes	⊠ No			,
	(4) Provide a grant to an organization other than a charitable, etc., organization described in										
							Yes	⊠ No			
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to a				-			□			Ì
	If any answer is "Yes" to 5a(1)–(5), did any of the						☐Yes	× No	4		1
b	Regulations section 53.4945 or in a current notice							nbea in			<u>i</u>
	_	_	•						5b		
_	Organizations relying on a current notice regards If the answer is "Yes" to question 5a(4), does t	-						▶∐			
C	because it maintained expenditure responsibility									l`.	- 2 3
	-		-				Yes Yes	∐ No	ı		. 4
6-	If "Yes," attach the statement required by Regulation Did the foundation, during the year, receive any					miume					
6a	on a personal benefit contract?		-	_		ernums	Yes	⊠ No			(3)
L	Did the foundation, during the year, pay premiur					honofil			6b		·
b	If "Yes" to 6b, file Form 8870.	ns, aire	city or maire	Juy, On	a personal	Denem	Contract		OD	JI	×
70	At any time during the tax year, was the foundation	a party i	to a probibitor	l tay ch	oltor transac	etion?	Yes	⊠ No			***************************************
7a b	If "Yes," did the foundation receive any proceed								7b	. 238	
	t VIII Information About Officers, Direct									ees.	
ų eii	and Contractors	, .	1401000, 1	Juli-		.go.o,		u.u	p.o.	000,	
1	List all officers, directors, trustees, and found	lation r	nanagers ar	d their	compens	ation. S	ee instr	uctions			
		(b) Title	e, and average	(c) Cor	mpensation	(d) (	Contribution	is to	(e) Expe	ense acc	count.
	(a) Name and address		rs per week ed to position		not paid, ter -0-)		yee benefit erred comp			allowan	
GAE	TANO FALZARANO		IDENT				<u> </u>			,	
	GRAND STREET ISELIN NJ 08830		5.00		0.	i		0.			0.
	I SCHWEIKERT	V.PR	ES	-			<del>-</del>		_		
	GRAND STREET ISELIN NJ 08830		5.00		0.			0.			0.
	IA GEIGER	TREAS	SURER								
	GRAND STREET ISELIN NJ 08830		5.00		0.			0.			0.
	RYL MULLIGAN	SECR	ETARY								
	GRAND STREET ISELIN NJ 08830		5.00		0.			0.			0.
2	Compensation of five highest-paid employed	es (oth	er than tho	se inclu	uded on li	ne 1—	see insti	uction	s). If n	one,	enter
	"NONE."									_	
•	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v	veek	(c) Compe	nsation	(d) Contrib employee plans and	benefit deferred	(e) Expe	ense acc allowan	
							compen	sauon			
NONE	3										
									_		
Total	number of other employees paid over \$50,000 .							. ▶	0		
otal	number of other employees pald over \$50,000 .	<u>· · ·                                  </u>	<u> </u>	<u> </u>	• • •	• •	<u> </u>		0 Form <b>99</b>	n_DE	(2017)
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orm 990-PF (20	,	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	npioyees,
.3 Five h	ighest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE		
		<u> </u>
tal number	r of others receiving over \$50,000 for professional services	0
art IX-A	Summary of Direct Charitable Activities	
art IA-A	Summary of Direct Charitable Activities	
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
	and only only only only only only only only	
·		
art IX-B	Summary of Program-Related Investments (see instructions)	<u> </u>
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
l		
· ———		
All other prog	ram-related investments. See instructions	
3		
tal. Add lin	es 1 through 3	<del> </del>
		Form <b>990-PF</b> (2017)
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Part		gn foundatior	ıs,
	see instructions.)		
• 1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	<u> </u>
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	} }	
	ınstructions)	4	<u> </u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Part	and certain foreign organizations, check here ▶ □ and do not complete this part.)	oundations	
1	Minimum investment return from Part X, line 6	1	0.
2a	Tax on investment income for 2017 from Part VI, line 5   2a   0.		_
b	Income tax for 2017. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
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,	<b>i</b> [	
	line 1	7	0.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	<b>7</b> 2	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	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	
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.		
			O DE

Part	Undistributed income (see instruction	115)		<del></del>	Γ
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7				0.
2	Undistributed income, if any, as of the end of 2017:				
а	Enter amount for 2016 only			0.	
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2017:				ļ
а	From 2012 0 .				
ь Ь	From 2013 0.				
-	From 2014 0.				
ن ۔	From 2015 0.				ĺ
a				•	
е			,		,
f	Total of lines 3a through e	<u> </u>	,,, ,		3
4	Qualifying distributions for 2017 from Part XII,				
	line 4: ▶ \$			_ <u></u>	
а	Applied to 2016, but not more than line 2a .	<u> </u>			
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)	_			
d	Applied to 2017 distributable amount	·#f W	714 S S S S S S S S S S S S S S S S S S S		
e	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2017				
Ü	(If an amount appears in column (d), the same	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	W. Alik	<b>*</b>	
	amount must be shown in column (a).)				la je
6	Enter the net total of each column as				
U	indicated below:			Fi. Hy Si	
		0.			
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	J.	183-7 A NO. 3		77 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	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		<u> </u>		
d	Subtract line 6c from line 6b. Taxable				
	amount—see instructions		0.		
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions			0.	
f	Undistributed income for 2017. Subtract lines				3
-	4d and 5 from line 1. This amount must be				
	distributed in 2018				0.
7	Amounts treated as distributions out of corpus		1954 ( 57)		
•	to satisfy requirements imposed by section			ii. "Y5#"	
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
0	Excess distributions carryover from 2012 not		1 2 3 2	3 1 M-2 1 MY	
8	applied on line 5 or line 7 (see instructions).	0.			
_	Excess distributions carryover to 2018.	0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
9	Subtract lines 7 and 8 from line 6a	0.			
40	Analysis of line 9:				
10	Excess from 2013				
a	EXOCOUNTED TO THE TENT OF T	ka iindi			
b	EXOCOUNTED IT I I I				
C	2x0000 iroin 2010 i i i i i i i i i i i i i i i i i i				
d	Excess from 2016				
e	Excess from 2017 0.	<u> </u>		. <u> %#%##################################</u>	Form <b>990-PF</b> (2017
					Form 990-PF (2017)

4.6
Page <b>10</b>
N/A
57 40 40 ( ) (5)
or 49,42(j)(5)
(e) Total
_
e in assets at
the foundation
e portion of the

Part XIV Private Operating Foundations (see instructions 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 date of the ruling . . . . . . . Check box to indicate whether the foundation is a private operating foundation described in section b Enter the lesser of the adjusted net 2a Tax year Pnor 3 years income from Part I or the minimum (a) 2017 (b) 2016 (c) 2015 (d) 2014 investment return from Part X for each year listed . . . 85% of line 2a Qualifying distributions from Part XII. line 4 for each year listed . . Amounts included in line 2c not used directly for active conduct of exempt activities Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 3 Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test-enter: (1) Value of all assets . . . . (2) Value of assets qualifying under section 4942(j)(3)(B)(i) "Endowment" alternative test-enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . "Support" alternative test-enter: (1) Total support other than gross investment income<sup>2</sup> (interest, dividends, rents, payments on (section securities ⊿lóans 512(a)(5)), or royalties) general public (2) Support from or more organizations as provided in section 4942(j)(3)(B)(iii) . . . (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more Part XV any time during the year-see instructions.) Information Regarding Foundation Managers: List any managers of the foundation who have contributed more than 2% of the total contributions received by before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here > X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions. The name, address, and telephone number or email address of the person to whom applications should be addressed. The form in which applications should be submitted and information and materials they should include: Any submission deadlines: Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2017)

Part	XV Supplementary Information (cont	inued)			
3	Grants and Contributions Paid During t			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		
а	Paid during the year				
			·		
			ĺ		
	Total				3a
ь	Approved for future payment				
					Ì
			]		
			1		
			1		
	Total				3b

Ente	gross amounts unless otherwise indicated.	Unrelated bu	Isiness income	Excluded by secti	on 512, 513, or 514	(e)
•		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1	Program service revenue:			<b></b>		
	b	ļ			<u> </u>	
	c		<u> </u>	<del>                                     </del>		
	d	<u> </u>		<del> </del>		<del></del>
	e					
	f	<u> </u>		<del> </del>		
	g Fees and contracts from government agencies			<del>                                     </del>		
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:	1 3	Q 7 40	> /		i. M
	a Debt-financed property				<del></del>	
	<b>b</b> Not debt-financed property					,
6	Net rental income or (loss) from personal property			ļ		
7	Other investment income	<u> </u>		<u> </u>		
8	Gain or (loss) from sales of assets other than inventory			ļ		
9	Net income or (loss) from special events				<u> </u>	
10	Gross profit or (loss) from sales of inventory			ļ		
11	Other revenue: a INCOME FROM RAINBOW ACADEMY ENTITIES	624410		<del> </del>		
	<b>b</b>	<u> </u>	 	<del> </del>		<del> </del>
	C			<del> </del>		<del> </del>
	d	<u> </u>				
10	e Subtotal. Add columns (b), (d), and (e)	23 8 8 8 8				
					13	<u> </u>
13	Total Add line 12 columns (b) (d) and (e)					
						<del></del>
See	worksheet in line 13 instructions to verify calculation	າຣ.)				
See Par	worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A	is.) Accomplishm	ent of Exemp	t Purposes		mportantly to th
See Par Line	worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A	is.) Accomplishm	ent of Exemp	t Purposes		mportantly to th
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•		Organizati	ons									
` 1	in se		directly or indirect other than section								Yes	No
а	Trans	sfers from the re	porting foundatio	n to a nonc	haritable exe	mnt organizati	on of:				<u> </u>	
u										1a(1)		×
	•	ther assets .		• • •						1a(2)		1 x
	` '			• • •						14(2)		<del>  ^-</del> -
þ		r transactions:								1		
			a noncharitable	_		. <b></b> .				1b(1)	_	×
			ets from a noncha							1b(2)	_	<u> </u>
	-		, equipment, or o							1b(3)	_	×
	• •		rrangements							1b(4)	_	×
	• •	oans or loan gua								1b(5)		×
	(6) P	erformance of se	ervices or membe	ership or fu	ndraising solid	citations				1b(6)		×
С	Shar	ng of facilities, e	equipment, mailing	g lists, othe	er assets, or p	aid employees				1c		×
d	If the	answer to any	of the above is "	Yes," com	plete the follo	wing schedule	e. Column (b)	should al	ways show	w the	fair n	narket
	value	of the goods, o	ther assets, or se	ervices give	en by the repo	orting foundation	on. If the found	dation rec	eived less	than	fair n	narket
			on or sharing arra									
(a) Line	no	(b) Amount involved	(c) Name of no	oncharitable e	xempt organization	on <b>(d)</b> De	scription of transfe	ers, transact	ions, and sha	iring arr	angem	ents
		· · · · · · · · · · · · · · · · · · ·					<del> </del>	·····	<del></del>			
	-+				<del></del>							
<del></del>	-+		·		<del></del>			<del></del>				
	-+						<del></del>					
	-+-		<del> </del>		<del></del>		<del></del>					
			<u> </u>									
								<u>.</u>				
•						-						
						-						
	-						<del></del>					
	$\dashv$											
	desc	ribed in section tes," complete the	ectly or indirectly 501(c) (other than e following sched	section 50	11(c)(3)) or in s	ection 527?	nore tax-exem		[		s 🗵	No
		(a) Name of organ	IZALIUTI		(b) Type of org	anization		(c) Descript	ion of relatio	nsnip		
							<del></del>	··				
			<u></u>			<del></del>	<del></del>					
		<del></del>										
	Unde	r penalties of perjury, I	declare that I have example (at the	mined this retui	n, including accon	panying schedules	and statements, and	d to the best	of my knowled	ige and	belief, i	t is true,
Sign	corre	ct, and complete Deci	aration of preparer (other	er than taxpaye	r) is based on all in	romation of which p	reparer has any kno	wieage	May the I	RS disci	uss this	return
Here		Muh 7	71_		5/15/18	PRESIDE	NT		with the p	reparer	shown I	below?
		ature of officer or tru	stee		Date	Title			See instru	ctions	¥Yes	∐No
		Print/Type preparer	<del>`</del>	Prepare	er's signature		Date			PTIN		
Paid		'' ' '		1	<b>A</b>		`\		eck     i1		2245	- ^
Prepa	irer		Robinson, C		/	·	05/11/2		-employed			,9
Use C	nly	Firm's name ▶	McCormac &		As				▶ 03-03			
		Firm's address ▶	94 Green St	treet, S	<u>Suite 102</u>			Phone no	(732)6			
BAA			Woodbridge			NJ 070	95		F	orm <b>99</b>	O-PF	<b>=</b> (2017)

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

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

### 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
MISCELLANEOUS	2,565.			
INSURANCE	1,827.	<del></del>		
PUBLIC RELATIONS	1,200.			
Total	5 592		<u> </u>	

### . Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

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

2017

Employer identification number

LIGH	LIGHTBRIDGE FOUNDATION, INC. 30-0002119						
Organiz	Organization type (check one):						
Filers o	f:	Section:					
Form 990 or 990-EZ		☐ 501(c)( ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		☐ 527 political organization					
Form 99	0-PF						
		4947(a)(1) nonexempt charitable trust treated as a private foundary	tion				
		501(c)(3) taxable private foundation					
	nly a section 501(c)(7	covered by the <b>General Rule</b> or a <b>Special Rule.</b> ), (8), or (10) organization can check boxes for both the General Rule a	nd a Special Rule. See				
Genera	Rule						
$\boxtimes$	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						
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99) that received from any one contributor, during the year, total contributed the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line tions of the greater of (1)				
	contributor, during the	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that he year, total contributions of more than \$1,000 <i>exclusively</i> for religious ial purposes, or for the prevention of cruelty to children or animals. Con	, charitable, scientific,				
	contributor, during t contributions totaled during the year for a General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that he year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose. Don't complete any ones to this organization because it received nonexclusively religious, charitable, etc., purpose.	es, but no such utions that were received f the parts unless the uritable, etc., contributions				

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).

Name of organization

LIGHTBRIDGE FOUNDATION, INC.

Employer identification number

30-0002119

Parti	Contributors (see instructions). Use duplicate co	ples of Part I if additional space is	neeaea.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LIGHTBRIDGE ACADEMY ENTITIES  116 GRAND STREET, 2ND FLOOR  ISELIN NJ 08830	\$ 74,144.	Person  Payroli  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
LIGHTBRIDGE FOUNDATION, INC.

30-0

Employer identification number 30-0002119

Part II	Noncash Property (see instructions). Use duplicate cop	es of Part II if additional space	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		ss	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$\$	

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

BAA

LIGHTBR	RIDGE FOUNDATION, INC.			30-0002119			
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 information once. See instructions.) > \$						
	Use duplicate copies of Part III if addi			, , , , , , , , , , , , , , , , , , , ,			
(a) No. from Part I	(b) Purpose of gift	(c) Use of git	t	(d) Description of how gift is held			
raiti							
		(e) Transfer of	gift				
	Transferee's name, address, an	d ZIP + 4	Relations	hip of transferor to transferee			
(a) No.	(b) Purpose of gift	(c) Use of gir	ft	(d) Description of how gift is held			
from Part I	(b) Purpose of gift	(c) Ose of gi		(u) Description of now gire is ricid			
_		(e) Transfer o	f gift				
_	Transferee's name, address, an	d ZIP + 4	Relations	hip of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Description of how gift is held			
-	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relations	hip of transferor to transferee			
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gi		(d) Description of how gift is held			
-	(e) Transfer of gift						
-	Transferee's name, address, an	d ZIP + 4	Relations	hip of transferor to transferee			

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