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Form 990-PF

Department of the Treasury
Internal Revenue Service

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.
Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2017

Open to Public Inspection

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

Name of foundation
THE RAVITZ FAMILY FOUNDATION
C/O STEVE RAVITZ

Number and street (or P O box number if mail is not delivered to street address)
600 N KINGS HIGHWAY

City or town, state or province, country, and ZIP or foreign postal code
CHERRY HILL, NJ 08034

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 966,465

J Accounting method

☒ Cash

☐ Accrual

☐ Other (specify)

(Part I, column (d) must be on cash basis)

A Employer identification number
52-1999567

B Telephone number (see instructions)
(856) 667-9410

C If exemption application is pending, check here

D 1. Foreign organizations, check here

D 2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I

Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	203,777		
	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	18,076	18,071	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	69,437		
	b Gross sales price for all assets on line 6a	692,415		
	7 Capital gain net income (from Part IV, line 2)		69,437	
	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) (attach schedule)				
11 Other income (attach schedule)	15,957	0		
12 Total. Add lines 1 through 11	307,247	87,508		
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 (attach schedule)			
	b Accounting fees (attach schedule)	6,800	0	6,800
	c Other professional fees (attach schedule)			
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	1,080	330	0
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
	23 Other expenses (attach schedule)	77,863	12,529	62,334
	24 Total operating and administrative expenses. Add lines 13 through 23	85,743	12,859	69,134
	25 Contributions, gifts, grants paid	216,859		216,859
26 Total expenses and disbursements. Add lines 24 and 25	302,602	12,859	285,993	
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	4,645		
	b Net investment income (if negative, enter -0-)		74,649	
c Adjusted net income(if negative, enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2017)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash—non-interest-bearing					
	2 Savings and temporary cash investments	51,806	22,621	22,621		
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5 Grants receivable	16,585				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	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 ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12 Investments—mortgage loans					
	13 Investments—other (attach schedule)	884,977	868,711	943,844		
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15 Other assets (describe ▶ _____)						
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	953,368	891,332	966,465			
Liabilities	17 Accounts payable and accrued expenses	34,583				
	18 Grants payable	65,484				
	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable (attach schedule)					
	22 Other liabilities (describe ▶ _____)					
	23 Total liabilities (add lines 17 through 22)	100,067	0			
	Net Assets or Fund Balances	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		50,200	50,200			
28 Paid-in or capital surplus, or land, bldg , and equipment fund		0	0			
29 Retained earnings, accumulated income, endowment, or other funds		803,101	841,132			
30 Total net assets or fund balances (see instructions)		853,301	891,332			
31 Total liabilities and net assets/fund balances (see instructions) .	953,368	891,332				

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	853,301
2 Enter amount from Part I, line 27a	2	4,645
3 Other increases not included in line 2 (itemize) ▶ _____	3	33,386
4 Add lines 1, 2, and 3	4	891,332
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	891,332

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED SECURITIES	P		
b CAPITAL GAINS DIVIDENDS	P		
c			
d			
e			

(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 680,767		622,978	57,789
b 11,648			11,648
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			57,789
b			11,648
c			
d			
e			

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	69,437
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) (see instructions) If (loss), enter -0- in Part I, line 8		3	

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

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

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

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

☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	395,122	934,084	0 423005
2015	351,042	1,090,608	0 321877
2014	298,047	1,136,559	0 262236
2013	253,631	1,077,820	0 235319
2012	229,122	34,391	6 662266

2 Total of line 1, column (d)	2	7 904703
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	1 580941
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	971,260
5 Multiply line 4 by line 3	5	1,535,505
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	746
7 Add lines 5 and 6	7	1,536,251
8 Enter qualifying distributions from Part XII, line 4	8	285,993

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

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

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	1,493
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	1,493
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	1,493
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	755
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	1,955
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0
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	462
11	Enter the amount of line 10 to be Credited to 2018 estimated tax <input type="checkbox"/> 462 Refunded <input type="checkbox"/>	11	0

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 participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for 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	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
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	2		No
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		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
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? If "Yes," attach the statement required by General Instruction T	5		No
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	Yes	
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	Yes	
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 .	8b	Yes	
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 taxable year beginning in 2017 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address RAVITZFAMILYFOUNDATION.ORG	13	Yes	
14	The books are in care of STEVE RAVITZ Telephone no (856) 667-9410			

Located at **600 KINGS HIGHWAY NORTH CHERRY HILL NJ** ZIP+4 **08034**

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

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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶	1b		No
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? <input type="checkbox"/>	1c		No
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 ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (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). <input type="checkbox"/>	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
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). <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

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

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

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

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

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

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

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

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

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

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 THE RAVITZ FAMILY FOUNDATION HOLDS TWO EVENTS A SUMMER GOLF TOURNAMENT AND A WINTER DINNER EVENT TO GENERATE REVENUE TO PROVIDE FOR THE HEALTH AND WELFARE OF INDIVIDUALS IN THE LOCAL COMMUNITIES	62,334
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	895,592
b	Average of monthly cash balances.	1b	90,459
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	986,051
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	986,051
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	14,791
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	971,260
6	Minimum investment return. Enter 5% of line 5.	6	48,563

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.)

1	Minimum investment return from Part X, line 6.	1	48,563
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	1,493
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,493
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	47,070
4	Recoveries of amounts treated as qualifying distributions.	4	1,939
5	Add lines 3 and 4.	5	49,009
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	49,009

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	285,993
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	285,993
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	285,993

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				49,009
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012. 227,676				
b From 2013. 200,745				
c From 2014. 243,256				
d From 2015. 297,785				
e From 2016. 349,140				
f Total of lines 3a through e.	1,318,602			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 285,993				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				49,009
e Remaining amount distributed out of corpus	236,984			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,555,586			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c 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		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 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			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	227,676			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	1,327,910			
10 Analysis of line 9				
a Excess from 2013. 200,745				
b Excess from 2014. 243,256				
c Excess from 2015. 297,785				
d Excess from 2016. 349,140				
e Excess from 2017. 236,984				

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. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e 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					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input checked="" type="checkbox"/> 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. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d	
a The name, address, and telephone number or email address of the person to whom applications should be addressed	
b The form in which applications should be submitted and information and materials they should include	
c Any submission deadlines	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors	

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	216,859
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments.						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities.			14	18,076		
5 Net rental income or (loss) from real estate						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.						
8 Gain or (loss) from sales of assets other than inventory			18	69,437		
9 Net income or (loss) from special events						-27,616
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e). . .		0		87,513		-27,616
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13			59,897

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

[illegible]

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d 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.			

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

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

b If "Yes," complete the following schedule

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

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	2018-10-18 Date	***** Title

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

Paid Preparer Use Only	Print/Type preparer's name MICHELLE MALIMBAN	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P01372721
	Firm's name ▶ RSM US LLP				Firm's EIN ▶ 42-0714325
	Firm's address ▶ 518 TOWNSHIP LINE ROAD SUITE 300 BLUE BELL, PA 19422				Phone no (215) 641-8600

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
STEVEN J RAVITZ	TRUSTEE/CHAIRMAN 0 25	0	0	0
600 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034				
RONALD H RAVITZ	TRUSTEE/VICE CHAIRMAN 0 25	0	0	0
600 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034				
JASON RAVITZ	TRUSTEE/SECRETARY 0 25	0	0	0
600 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034				
SHAWN RAVITZ	TRUSTEE/TREASURER 0 25	0	0	0
600 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034				
BRETT RAVITZ	TRUSTEE 0 25	0	0	0
600 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034				
ROBERT SCHWARTZ ESQ	TRUSTEE 0 25	0	0	0
600 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034				
NICHOLAS FIFIS	TRUSTEE 0 25	0	0	0
600 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034				
JENNY RYAN	TRUSTEE (THRU 10/30/17) 0 25	0	0	0
600 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034				
SCOTT RAVITZ	TRUSTEE (EFF 10/30/17) 0 25	0	0	0
600 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ADAM TALIAFERRO FOUNDATION INC PO BOX 8232 TURNERSVILLE, NJ 08012		PC	GENERAL CHARITABLE PURPOSES	427
ADATH EMANU-EL205 ELBO LANE MT LAUREL, NJ 08054		PC	GENERAL CHARITABLE PURPOSES	1,500
ALEX'S LEMONADE STAND FOUNDATION 111 PRESIDENTIAL BLVD SUITE 203 BALA CYNWYD, PA 19004		PC	GENERAL CHARITABLE PURPOSES	120
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALICIA ROSE VICTORIOUS FOUND 2465 VOORHEES TOWN CENTER VOORHEES, NJ 08043		PC	GENERAL CHARITABLE PURPOSES	222
ANIMAL WELFARE ASSOCIATION INC 509 CENTENNIAL BLVD VOORHEES, NJ 08043		PC	GENERAL CHARITABLE PURPOSES	1,003
ARC OF BURLINGTON COUNTY INC 115 E BROAD STREET BURLINGTON, NJ 08016		PC	GENERAL CHARITABLE PURPOSES	1,500
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ATHLETES WITH DISABILITIES NORTHEAST CHAPTER PO BOX 612 MOORESTOWN, NJ 08057		PC	GENERAL CHARITABLE PURPOSES	6,000
B'NAI B'RITH YOUTH ORGANIZATION 800 8TH STREET NW WASHINGTON, DC 20001		PC	GENERAL CHARITABLE PURPOSES	500
BANCROFT800 N KINGS HWY SUITE 308 CHERRY HILL, NJ 08034		PC	GENERAL CHARITABLE PURPOSES	20,506
Total ▶ 3a				216,859


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BARKANN FAMILY HEALING HEARTS FOUNDATION PO BOX 18 NEWTOWN SQUARE, PA 19073		PC	GENERAL CHARITABLE PURPOSES	1,000
BEYOND CELIACPO BOX 544 AMBLER, PA 19002		PC	GENERAL CHARITABLE PURPOSES	5,000
BOYS & GIRLS CLUB OF CAMDEN COUNTY INC 1709 PARK BLVD CAMDEN, NJ 08103		PC	GENERAL CHARITABLE PURPOSES	4,232
Total ► 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOYS SCOUTS OF AMERICAPO BOX 246 RANCOCAS, NJ 08073		PC	GENERAL CHARITABLE PURPOSES	471
BRET HARTE SCHOOL 1909 QUEEN ANNE RD CHERRY HILL, NJ 08003		PC	GENERAL CHARITABLE PURPOSES	293
BRISTOL BLAZERS ICE HOCKEY 10990 DECATUR RD PHILADELPHIA, PA 19154		PC	GENERAL CHARITABLE PURPOSES	500
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
BRYAN D ROSS FOUNDATION 701 ROUTE 50 MAYS LANDING, NJ 08330		PC	GENERAL CHARITABLE PURPOSES	5,000
BUILD JAKE'S PLACE 5311 MAGNOLIA AVE PENNSAUKEN, NJ 08109		PC	GENERAL CHARITABLE PURPOSES	2,500
CAMDEN CLOCK CHASERS 909 BIEDEMAN AVE CAMDEN, NJ 08104		PC	GENERAL CHARITABLE PURPOSES	600
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAMDEN SCHOOLS FOUNDATION PO BOX 60 HADDONFIELD, NJ 08033		PC	GENERAL CHARITABLE PURPOSES	500
CANUSO FOUNDATION 30 WASHINGTON AVE SUITE B4 HADDONFIELD, NJ 08033		PC	GENERAL CHARITABLE PURPOSES	1,000
CARL INSERRA LEUKEMIA FUND AT ABRAMSON CANCER CENTER 41 WATCHUNG PLAZA SUITE 183 MONTCLAIR, NJ 07042		PC	GENERAL CHARITABLE PURPOSES	1,000
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CATHEDRAL SOUP KITCHEN INC 1514 FEDERAL STREET CAMDEN, NJ 08105		PC	GENERAL CHARITABLE PURPOSES	46
CATHOLIC CHARITIES - PROVIDENCE HOUSE DOMESTIC VIOLENCE SERVICES 595 RANCOCAS RD WILLINGBORO, NJ 08060		PC	GENERAL CHARITABLE PURPOSES	140
CHABAD LUBAVITCH1925 KRESSON RD CHERRY HILL, NJ 08003		PC	GENERAL CHARITABLE PURPOSES	500
Total ▶ 3a				216,859


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHARLES MATEJKA MEMORIAL FUND - JEWISH FAMILY SERVICE 540 PASSAIC AVE WEST CALDWELL, NJ 07006		PC	GENERAL CHARITABLE PURPOSES	500
CHECKING FOR CHARITY 5906 COVENTRY WAY MT LAUREL, NJ 97035		PC	GENERAL CHARITABLE PURPOSES	1,000
CHERRY HILL AFRICAN AMERICAN CIVIC ASSOCIATION PO BOX 3027 CHERRY HILL, NJ 08034		PC	GENERAL CHARITABLE PURPOSES	3,200
Total 				216,859
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHERRY HILL EDUCATION FOUNDATION INC 45 RANOLDO TERRACE CHERRY HILL, NJ 08034		PC	GENERAL CHARITABLE PURPOSES	1,500
COMMUNITY FOUNDATION OF SOUTH JERSEY PO BOX 446 HADDONFIELD, NJ 08033		PC	GENERAL CHARITABLE PURPOSES	246
CONGREGATION SONS OF ISRAEL 720 COOPER LANDING RD CHERRY HILL, NJ 08002		PC	GENERAL CHARITABLE PURPOSES	1,800
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COOPERS FERRY PARTNERSHIP INC ONE PORT CENTER 2 RIVERSIDE DR STE 501 CAMDEN, NJ 08103		PC	GENERAL CHARITABLE PURPOSES	4,250
COZIES FOR CHEMOPO BOX 763 MT LAUREL, NJ 08054		PC	GENERAL CHARITABLE PURPOSES	467
EVESHAM EDUCATION FOUNDATION 25 S MAPLE AVE MARLTON, NJ 08053		PC	GENERAL CHARITABLE PURPOSES	5,000
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EVESHAM PROFESSIONAL FIREFIGHTERS FOUNDATION INC 795 RT 70 EAST SUITE 217 MARLTON, NJ 08053		PC	GENERAL CHARITABLE PURPOSES	500
FELLOWSHIP ALLIANCE CHAPEL 503 HASTINGS RD CHERRY HILL, NJ 08034		PC	GENERAL CHARITABLE PURPOSES	1,500
FELLOWSHIP HOUSE OF SOUTH CAMDEN INC 1722 S BROADWAY CAMDEN, NJ 08104		PC	GENERAL CHARITABLE PURPOSES	500
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FIRST CHURCH OF GOD 753 CHESTNUT STREET CAMDEN, NJ 08103		PC	GENERAL CHARITABLE PURPOSES	500
FOOD ALLERGY RESEARCH & EDUCATION INC 7928 JONES BRANCH DRIVE STE 1100 MCLEAN, VA 22102		PC	GENERAL CHARITABLE PURPOSES	1,000
HISPANIC FAMILY CENTER SOUTHERN NJ INC 35 S 29TH ST 47 CAMDEN, NJ 08105		PC	GENERAL CHARITABLE PURPOSES	1,266
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HYDROCEPHALUS ASSOCIATION 45 KIRKWOOD RD GIBBSBORO, NJ 08026		PC	GENERAL CHARITABLE PURPOSES	1,000
IMPACT CHARITY SERVICES INC PO BOX 1692 MT LAUREL, NJ 08054		PC	GENERAL CHARITABLE PURPOSES	1,000
INDIAN CULTURAL CENTER INC 820 ROUTE 73 SOUTH MARLTON, NJ 08053		PC	GENERAL CHARITABLE PURPOSES	500
Total 				216,859
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
INTERFAITH HOMELESS OUTREACH COUNCIL 1989 ROUTE 70 EAST CHERRY HILL, NJ 08003		PC	GENERAL CHARITABLE PURPOSES	250
JEFFERSON FOUNDATION 925 CHESTNUT ST SUITE 100 PHILADELPHIA, PA 19107		PC	GENERAL CHARITABLE PURPOSES	5,000
JEWISH FAMILY & CHILDREN SERVICES 1301 SPRINGDALE RD CHERRY HILL, NJ 08003		PC	GENERAL CHARITABLE PURPOSES	250
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEWISH FEDERATION OF SOUTHERN NEW JERSEY 1301 SPRINGDALE RD CHERRY HILL, NJ 08003		PC	GENERAL CHARITABLE PURPOSES	15,200
JUVENILE DIABLETES RESEARCH FOUNDATION 1415 ROUTE 70 EAST SUITE 311 CHERRY HILL, NJ 08034		PC	GENERAL CHARITABLE PURPOSES	2,500
KAIGHN AVE BAPTIST CHURCH 9TH ST KAIGHN AVE CAMDEN, NJ 08103		PC	GENERAL CHARITABLE PURPOSES	1,000
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
KATZ JEWISH COMMUNITY CENTER 1301 SPRINGDALE RD CHERRY HILL, NJ 08003		PC	GENERAL CHARITABLE PURPOSES	7,048
KELLMAN BROWN ACADEMY 1007 LAUREL OAK RD VOORHEES, NJ 08043		PC	GENERAL CHARITABLE PURPOSES	500
KNIGHTS OF COLUMBUS3 LORD PLACE MARLTON, NJ 08053		PC	GENERAL CHARITABLE PURPOSES	200
Total ▶ 3a				216,859

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LARRY GAINES STOP THE VIOLENCE PO BOX 81 CAMDEN, NJ 08101		PC	GENERAL CHARITABLE PURPOSES	1,000
LATIN PENTECOSTAL CHURCH 1301 ATLANTIC AVE CAMDEN, NJ 08104		PC	GENERAL CHARITABLE PURPOSES	404
LAUREN ROSE ALBERT FOUNDATION INC 106 KENWOOD DR CHERRY HILL, NJ 08034		PC	GENERAL CHARITABLE PURPOSES	1,500
Total ► 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
M'KOR SHALOM850 E EVESHAM RD CHERRY HILL, NJ 08003		PC	GENERAL CHARITABLE PURPOSES	2,500
MAKE A WISH FOUNDATION 2 JASPER JOHNS WAY MARLTON, NJ 08053		PC	GENERAL CHARITABLE PURPOSES	476
MARINE CORPS LAW ENFORCEMENT FOUNDATION PO BOX 704 MAPLE SHADE, NJ 08052		PC	GENERAL CHARITABLE PURPOSES	100
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MEDFORD YOUTH ATHLETIC ASSOCIATION PO BOX 367 MEDFORD, NJ 08055		PC	GENERAL CHARITABLE PURPOSES	500
METROPOLITAN MULTICULTURAL CENTER INC - PUERTO RICO RELIEF EFFORT 100 RIDGE AVE LAKEWOOD, NJ 08701		PC	GENERAL CHARITABLE PURPOSES	3,816
MULTIPLE SCLEROSIS ASSOCIATION OF AMERICA 375 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034		PC	GENERAL CHARITABLE PURPOSES	2,000
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NATIONAL BRAIN TUMOR SOCIETY INC 55 CHAPEL ST SUITE 200 NEWTON, MA 02456		PC	GENERAL CHARITABLE PURPOSES	1,500
OCEAN OF LOVE INC1709 NJ-37 TOMS RIVER, NJ 08753		PC	GENERAL CHARITABLE PURPOSES	2,500
PEGGY SPIEGLER MELANOMA RESEARCH FOUNDATION 410 GATEWOOD ROAD CHERRY HILL, NJ 08003		PC	GENERAL CHARITABLE PURPOSES	1,262
Total ▶ 3a				216,859

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PHILADELPHIA SCHOOL 22ND FL PSFS BLDG 12 SOUTH 12TH ST PHILADELPHIA, PA 19107		PC	GENERAL CHARITABLE PURPOSES	500
PHILLIES CHARITIES INC ONE CITIZENS BANK WAY PHILADELPHIA, PA 19148		PC	GENERAL CHARITABLE PURPOSES	407
POLICE AND FIRE FOUNDATION - VOORHEES TOWNSHIP 1180 WHITE HORSE RD VOORHEES, NJ 08043		PC	GENERAL CHARITABLE PURPOSES	150
Total ► 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
POLICE UNITY TOUR INCPO BOX 528 FLORHAM PARK, NJ 07932		PC	GENERAL CHARITABLE PURPOSES	202
POLITZ DAY SCHOOL 720 COOPER LANDING RD CHERRY HILL, NJ 08002		PC	GENERAL CHARITABLE PURPOSES	300
PUERTO RICAN UNITY FOR PROGRESS 818 BROADWAY CAMDEN, NJ 08103		PC	GENERAL CHARITABLE PURPOSES	3,000
Total ▶ 3a				216,859


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RONALD MCDONALD HOUSE OF SOUTHERN NEW JERSEY 550 MICKLE BLVD CAMDEN, NJ 08103		PC	GENERAL CHARITABLE PURPOSES	156
SCARC FOUNDATION INC 11 ROUTE 206 SUITE 100 AUGUSTA, NJ 07822		PC	GENERAL CHARITABLE PURPOSES	1,500
SPEAK329 ROUTE 73 VOORHEES, NJ 08043		PC	GENERAL CHARITABLE PURPOSES	500
Total ▶ 3a				216,859

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST VINCENT DEPAUL SOCIETY 3 LORD PLACE MARLTON, NJ 08053		PC	GENERAL CHARITABLE PURPOSES	1,000
ST JAMES SCHOOL 3217 W CLEARFIELD STREET PHILADELPHIA, PA 19132		PC	GENERAL CHARITABLE PURPOSES	6,219
SUSTAINABLE CHERRY HILL 168 BARCLAY FARMS SHOPPING CTR 133 CHERRY HILL, NJ 08034		PC	GENERAL CHARITABLE PURPOSES	5,495
Total ► 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEMPLE BETH SHALOM 1901 KRESSON RD CHERRY HILL, NJ 08003		PC	GENERAL CHARITABLE PURPOSES	20,000
THE BERNARD AND SHIRLEY HOPKINS MAKE A WAY FOUNDATION 1131 CAMPUS DR MORGANVILLE, NJ 07751		PC	GENERAL CHARITABLE PURPOSES	11,876
THE COOPER FOUNDATION INC 200 FEDERAL ST SUITE 146 CAMDEN, NJ 08103		PC	GENERAL CHARITABLE PURPOSES	15,000
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE HEART OF CAMDEN INC 1840 BROADWAY CAMDEN, NJ 08104		PC	GENERAL CHARITABLE PURPOSES	225
THE RITZ THEATRE COMPANY INC 915 WHITE HORSE PIKE HADDON TOWNSHIP, NJ 08107		PC	GENERAL CHARITABLE PURPOSES	2,000
THE STACY ZALLIE FOUNDATION 807 FOUNTAIN HALL COURT LEESBURG, VA 20176		PC	GENERAL CHARITABLE PURPOSES	3,000
Total ▶ 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE WORK GROUP3720 MARLTON PIKE PENNSAUKEN, NJ 08110		PC	GENERAL CHARITABLE PURPOSES	341
UFCW LOCAL 152 HEALTH AND WELFARE FUND 701 ROUTE 50 MAYS LANDING, NJ 08330		PC	GENERAL CHARITABLE PURPOSES	500
UNITED MITOCHONDRIAL DISEASE FOUNDATION INC 8085 SALTSBURG RD SUITE 201 PITTSBURGH, PA 15239		PC	GENERAL CHARITABLE PURPOSES	514
Total 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
URBAN PROMISE MINISTRIES PO BOX 1479 CAMDEN, NJ 08105		PC	GENERAL CHARITABLE PURPOSES	4,000
VIRTUA HEALTH FOUNDATION INC 1312 SPRUCE ST PHILADELPHIA, PA 19107		PC	GENERAL CHARITABLE PURPOSES	2,500
VOORHEES CITIZENS EVENT FOUNDATION 2400 VOORHEES TOWN CENTER VOORHEES, NJ 08043		PC	GENERAL CHARITABLE PURPOSES	2,500
Total ► 3a				216,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WOODLAND COMMUNITY DEVELOPMENT CORPORATION MORGAN VILLAGE 2300 S 8TH ST CAMDEN, NJ 08104		PC	GENERAL CHARITABLE PURPOSES	4,179
YMCA OF BURLINGTON COUNTY 302 COMMERCE SQ BLVD BURLINGTON, NJ 08016		PC	GENERAL CHARITABLE PURPOSES	1,000
Total ▶ 3a				216,859

TY 2017 Accounting Fees Schedule**Name:** THE RAVITZ FAMILY FOUNDATION

C/O STEVE RAVITZ

EIN: 52-1999567**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	6,800	0		6,800

TY 2017 Investments - Other Schedule

Name: THE RAVITZ FAMILY FOUNDATION
C/O STEVE RAVITZ

EIN: 52-1999567

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESCO UNIT	FMV	102,806	114,072
BLACKROCK EQTY DIVIDEND	FMV	45,803	47,043
DELAWARE SMALL CAP CORE	FMV	33,831	40,432
EDGEWOOD GROWTH FUND CL	FMV	45,468	48,065
ISHARES RUSSELL 1000	FMV	43,009	50,370
ISHARES RUSSELL 1000	FMV	81,117	93,379
ISHARES US TREASURY BOND	FMV	58,612	58,788
ISHARES TR CORE MSCI EAF	FMV	42,322	43,884
MFS VALUE FD CL I	FMV	36,360	46,930
OPPENHEIMER INTERNATL	FMV	44,191	53,254
SPDR BLMBERG BRCLY	FMV	16,499	16,451
T ROWE PRICE EMERGING	FMV	50,700	54,753
TCW TOTAL RETURN	FMV	75,023	75,418
THE OAKMARK INTL FUND	FMV	26,902	33,855
VANGUARD INTRMIDATE-TERM	FMV	133,271	134,493
VANGUARD SHORT-TERM	FMV	24,980	24,773
VANGUARD TOTAL INTERNATL	FMV	7,817	7,884

TY 2017 Other Expenses Schedule

Name: THE RAVITZ FAMILY FOUNDATION
C/O STEVE RAVITZ

EIN: 52-1999567

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MERRILL LYNCH FEES	12,529	12,529		0
ADVERTISING	1,120	0		1,120
FEES	26	0		26
SPECIAL EVENTS	59,530	0		59,530
INSURANCE	1,158	0		1,158
MISCELLANEOUS EXPENSE	3,500	0		500

TY 2017 Other Income Schedule

Name: THE RAVITZ FAMILY FOUNDATION
C/O STEVE RAVITZ

EIN: 52-1999567

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	15,957		15,957

TY 2017 Other Increases Schedule

Name: THE RAVITZ FAMILY FOUNDATION
C/O STEVE RAVITZ

EIN: 52-1999567

Description	Amount
EXPIRED GRANTS	1,939
CHANGE IN VALUE OF INVESTMENTS	527
ACCRUAL TO CASH ADJUSTMENT	30,920

TY 2017 Taxes Schedule

Name: THE RAVITZ FAMILY FOUNDATION
C/O STEVE RAVITZ

EIN: 52-1999567

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAXES	750	0		0
FOREIGN TAXES	330	330		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2017
	Name of the organization THE RAVITZ FAMILY FOUNDATION C/O STEVE RAVITZ	Employer identification number 52-1999567

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other 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 33¹/₃% 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 990PF, 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 THE RAVITZ FAMILY FOUNDATION C/O STEVE RAVITZ	Employer identification number 52-1999567
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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
—	See Additional Data Table _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

52-1999567

Part II **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

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

Name of organization THE RAVITZ FAMILY FOUNDATION C/O STEVE RAVITZ	Employer identification number 52-1999567
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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 additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	

Additional Data

Software ID:
Software Version:
EIN: 52-1999567
Name: THE RAVITZ FAMILY FOUNDATION
C/O STEVE RAVITZ

Form 990 Schedule B, 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
<u>1</u>	ALLIED BEVERAGE	\$ 7,500	Person <input checked="" type="checkbox"/>
	600 WASHINGTON AVE		Payroll <input type="checkbox"/>
	CARLSTADT, NJ07072		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>2</u>	BIMBO BAKERY USA	\$ 10,000	Person <input checked="" type="checkbox"/>
	PO BOX 110		Payroll <input type="checkbox"/>
	NORRISTOWN, PA19404		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>3</u>	CAMPBELLS SOUP	\$ 7,500	Person <input checked="" type="checkbox"/>
	3 EXECUTIVE CAMPUS ROUTE 70 CUTHBER		Payroll <input type="checkbox"/>
	CHERRY HILL, NJ08002		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>4</u>	CENTO	\$ 5,500	Person <input checked="" type="checkbox"/>
	100 CENTO BLVD		Payroll <input type="checkbox"/>
	THOROFARE, NJ08086		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>5</u>	CLEMENS FOOD GROUP HATFIELD	\$ 5,500	Person <input checked="" type="checkbox"/>
	2700 CLEMENS ROAD PO BOX 902		Payroll <input type="checkbox"/>
	HATFIELD, PA19440		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>6</u>	COKE	\$ 15,000	Person <input checked="" type="checkbox"/>
	801 EAST ERIE AVE		Payroll <input type="checkbox"/>
	PHILADELPHIA, PA19134		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	COLD TECHNOLOGY	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	1001 LOWER LANDING ROAD SUITE 203		
	BLACKWOOD, NJ08028		
<u>8</u>	DIETZ & WATSON	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	5701 TACONY ST		
	PHILADELPHIA, PA19135		
<u>9</u>	FRITO	\$ 12,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	PO BOX 650378		
	DALLAS, TX 75265		
<u>10</u>	GUARINO SONS INC	\$ 5,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	PO BOX 57		
	NATIONAL PARK, NJ08063		
<u>11</u>	HERR'S	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	6810 TILGHMAN STREET		
	ALLENTOWN, PA18106		
<u>12</u>	HERSHEY'S	\$ 5,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	PO BOX 806 HERSHEY PA 17033		
	HERSHEY, PA17033		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u>	KEEBLERKELLOGS	\$ 11,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	ONE KELLOGG SQUARE		
	BATTLE CREEK, MI49016		
<u>14</u>	KRAFT	\$ 5,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	355 CLEARVIEW AVE		
	EDISON, NJ08818		
<u>15</u>	LYNMAR BUILDERSPALMIERI ENT	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	261 HARVARD AVE		
	WESTVILLE, NJ08093		
<u>16</u>	MONDELEZ	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	100 DEFOREST AVE		
	EAST HANOVER, NJ07936		
<u>17</u>	PEPPERIDGE FARM	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	549 HIRSCH AVE		
	RUNNEMEDE, NJ08078		
<u>18</u>	PEPSICANADA DRY	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	8275 ROUTE 130		
	PENNSAUKEN, NJ08110		

Form 990 Schedule B, 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
<u>19</u>	PROFORMA	<u>\$ 5,500</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	157 COOPER RD		
	WEST BERLIN, NJ 08091		
<u>20</u>	SCHMIDT'S BAKERY	<u>\$ 5,500</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	780 FITCH LANE		
	BALTIMORE, MD 21236		
<u>21</u>	SNYDERS OF HANOVER	<u>\$ 8,000</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	PO BOX 6917 1250 YORK COURT		
	HANOVER, PA 17331		