## EXTENDED TO APRIL 15, 2020 Return of Private Foundation

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

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

Go to year its gov/Form990PF for instructions and the latest information.

2018

2949134805224

For calendar year 2018 or tax year beginning	Irs.gov/Form990PF for inst		MAY 31, 2019	Open to Public Inspection
Name of foundation	1 1, 2010	,	A Employer identification	
, ·				
MCMULLEN FAMILY FOUNDATION	1		13-3721747	
Number and street (or P O box number if mail is not delivered to street	et address)	Room/suite	B Telephone number	
53 UNDERCLIFF RD			973-744-44	26
City or town, state or province, country, and ZIP or foreign	postal code		C If exemption application is p	ending, check here
MONTCLAIR, NJ 07042	1.1.1.1		D. 4. Carrier excenization	a shook boro
G Check all that apply: Initial return	Amended return	ormer public charity	D 1. Foreign organizations	s, check here
Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
H Check type of organization. X Section 501(c)(3) e	<del></del>	110	E If private foundation sta	
Section 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation $\mathcal{O}\mathcal{V}$	under section 507(b)(1	
	ung method: X Cash	Accrual	F If the foundation is in a	60-month termination
(from Part II, col. (c), line 16)	Other (specify)		under section 507(b)(1	(B), check here
>\$ 28,316,721. (Part I, colu	mn (d) must be on cash bas			T (d) = .
Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check X if the foundation is not required to attach Sch B	05 143	05 142		COLUMN 1
3 Interest on savings and temporary cash investments	95,143. 745,489.	95,143. 745,489.		STATEMENT 1 STATEMENT 2 N
4 Dividends and interest from securities	745,465.	743,463.		SIATEMENT Z
5a Gross rents b Net rental income or (loss)				
62 Not gain or /locs) from sale of assets not on line 10	576,087.			
b Gross sales price for all 3,183,028.				1
b Gross sales price for all 3, 183, 028.  7 Capital gain net income (from Part IV, line 2)		576,087.		
8 Net short-term capital gain				BARNAGER SIGNALISMA WI
9 Income modifications Gross sales less returns	(FINAL ALGORITHMENT (1997) 1997 1997 1997 1997 1997 1997 1997		(compare value para serios a recessor con los	
10a and allowances		780.000.000.000.000.000.000.000		
D Less Cost of goods sold				
c Gross profit or (loss)  11 Other income	4,033.	4,033.		STATEMENT 3
12 Total. Add lines 1 through 11	1,420,752.		<del> </del>	
13 Compensation of officers, directors, trustees, etc	113,049.	56,425.		56,524.
14_Other_employee_salaries_and wages				
13 FPension plans, employee benefits				
6-16a-Legal-fees 71	C 500	3,250.		3,250.
b-Accounting fees STMT 4	6,500.			3,230.
COther protessional fees STMT 5	125,014.	125,014.	<u> </u>	
16a-Legal-fees  C Other professional fees  To haccounting fees  C Other professional fees  To haccounting fees  C Other professional fees  To haccounting fees  STMT 5  STMT 6  STMT 6  STMT 6  STMT 6  STMT 6  STMT 7  Travel, conferences, and meetings  Printing and publications  23 Other expenses  STMT 7  24 Total operating and administrative  expenses. Add lines 13 through 23	9,575.	8,836.		0.
19 Depreciation and depletion	· · · · · · · · · · · · · · · · · · ·			
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications	5 000			5 066
23 Other expenses STMT 7	5,866.	0.		5,866.
24 Total operating and administrative	264,804.	198,325.	1	65,640.
expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid	2,196,075.	130,323		2,196,075.
26 Total expenses and disbursements.		**************************************	New Action and Associate and Control of the Control	1
Add lines 24 and 25	2,460,879.	198,325.		2,261,715.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	<1,040,127.		N. procedure at the second of	North Australia Control Control Control
b Net investment income (if negative, enter -0-)	00 10 10 10 10 10 10 10 10 10 10 10 10 1	1,222,427.	NT / 3	
C Adjusted net income (if pegative enter -0-)		1.2.438486343848888398888839488888	N/A	TAKE TAKE TAKE TAKE TAKE TAKE TAKE TAKE

Form **990-PF** (2018)

e Da	218	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End_	of year
, F, d	( <b>L</b> 3)	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	7,582.	37,578	37,578
		Savings and temporary cash investments			
		Accounts receivable   *	30000000000000000000000000000000000000		
		Less; allowance for doubtful accounts	Secretario de la composición del composición de la composición de la composición del composición de la composición del composición de la composición del composición del composición del composición del composición del composición del composición d	[5550/05-00-52362036005997a-p26535506-6000600	A SOURCESCOPERAGE COMMUNICATION OF THE SOURCE COMMUNICATIO
	4	Pledges receivable ► 125,000.			
		Less; allowance for doubtful accounts	165,000.	125,000	125,000
	5	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other	-	•	
1		disqualified persons			
	7	Other notes and loans receivable			
	•	Less: allowance for doubtful accounts		***************************************	
					<del> </del>
		Inventories for sale or use	·· <del>··</del>	<del></del>	<del></del>
Assets		Prepaid expenses and deferred charges			
` ¹		Investments - U.S. and state government obligations	40 450 050	40.060.00	1 27 202 40
	b	Investments - corporate stock STMT 9	19,452,059.	18,262,787	27,393,19
-	C	Investments - corporate bonds			
1	11	Investments - land, buildings, and equipment basis		1000	
		Less accumulated depreciation	AMARABARAA AA		A STATE OF THE STA
- 11	12	Investments - mortgage loans			
- 1		Investments - other . STMT 10	504,623.	668,245	760,95
- 1		Land, buildings, and equipment basis			
- [ ]			5332		
١.		Less accumulated depreciation  Other assets (describe			
		Citici assets (describe		<del> </del>	<u> </u>
- [1		Total assets (to be completed by all filers - see the	20 120 264	10 002 610	20 216 72
_		instructions. Also, see page 1, item I)	20,129,264.	19,093,610	28,316,72
		Accounts payable and accrued expenses			
1	18	Grants payable			
g   1	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
2 2	21	Mortgages and other notes payable		•	
J   2	22	Other liabilities (describe )			
				,	
` 2	23	Total liabilities (add lines 17 through 22)	0.	٠ ٥.	
╅		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.	,		
و ا ع			20,129,264.	19,093,610	
<u> </u>		Unrestricted	20,123,204.	19,093,010	• (5) 28 (4) (5) (6) (6) (6) (6) (7) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7
		Temporarily restricted			25-00-00-00-00-00-00-00-00-00-00-00-00-00
	26	Permanently restricted	· · · · · · · · · · · · · · · · · · ·		
		Foundations that do not follow SFAS 117, check here			
:	,	and complete lines 27 through 31.			
2 2	27	Capital stock, trust principal, or current funds		6	
2	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
i   2		Retained earnings, accumulated income, endowment, or other funds		,	
<b>i</b>   3	t	Total net assets or fund balances	20,129,264.	19,093,610	
٠ ၂`		•			
1,	l li	Total liabilities and net assets/fund balances	20,129,264.	19,093,610	
Pa		Analysis of Changes in Net Assets or Fund B			- Turkeya zakazini (1995-1906) 2002-1906 2002-1906 2002-1906
		net assets or fund balances at beginning of year - Part II, column (a), line	···-		T
		t agree with end-of-year figure reported on prior year's return)	-	. 1	20,129,26
				ļ	
		amount from Part I, line 27a	מוס ממוס	A MEMENTIN O	<u> </u>
		Increases not included in line 2 (itemize)	SEE ST	ATEMENT 8 3	_ <del></del>
		ines 1, 2, and 3		. 4	<del></del>
	ecre	eases not included in line 2 (itemize)			
D				6	19,093,61

<u> </u>	and Losses for Tax on I he kind(s) of property sold (for ex			( <b>b)</b> Ho	w acquired	(c) Date	acquired	(d) Date sold
2-story brick war	ehouse; or common stock, 200 st	is. MLC Co.)	·	D-1	Purchase Donation	`(mo., c	day, yr.)	(mó., day, yr.)
	CHEDULED ATTACHI	ED			P			
b c	<del></del>		<del></del>	<del>                                     </del>				
<u>d</u>	<del></del>		<del>"</del>					
e	<del></del>						-	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus e	st or other basis expense of sale			(h) G ((e) plu	ain or (loss) s (f) minus (	(g))
a 3,183,028.			2,606,94	1.	····			576,087.
b								
d			<del></del>	-				
e			<u> </u>					
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69.				Col. (h) gain	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (I) col. (J), if any		cc	ol. (k), but Losses	not less thar (from col. (	h))
a								576,087
<u>b</u>		ļ <u> </u>						<del></del>
<u>c</u>								<del></del>
d e		<u> </u>	****					
	( If goin, also anti-	nr in Dart I line	7	7				
2 Capital gain net income or (net cap	, (",",",",",",",",",",",",",",",",",","		7	<u>}</u>	2			576,087
3 Net short-term capital gain or (loss If gain, also enter in Part I, line 8, c		ınd (6).		٦١				
If (loss), enter -0- in Part I, line 8	olumn (c).			<b>)</b>	3		N/A	
Part V Qualification Ur	nder Section 4940(e) fo	r Reduced	Tax on Net	Inve	stment In	come		
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment ir	ncome.)				
If section 4940(d)(2) applies, leave thi	s part blank.							
Was the foundation liable for the secti		mount of any w	ar in the been no	riod2				Yes X No
If "Yes," the foundation doesn't qualify			•	llour				Tes [AL] NO
1 Enter the appropriate amount in ea				ntries.	<del>-:</del>			
(a) Base period years	(b)			(c)			— Distrib	(d)
Calendar year (or tax year beginnin			Net value of no					ided by col. (c))
2017		41,377. 96,150.			883,28 145,36			.078351
2016 2015		41,397.			929,49			.077478
2013		50,610.			628,80			.071157
2013		71,799.			077,27			.025661
2 Total of line 1, column (d)						2		.331430
3 Average distribution ratio for the 5 the foundation has been in existen	•	on line 2 by 5.0	0, or by the numb	er of yea	ars	3		.066286
4 Enter the net value of noncharitable	e-use assets for 2018 from Part X	line 5				4	2	8,441,741.
	0 000 000000 101 20 10 1101111 0117	,						1,885,289.
5 Multiply line 4 by line 3						5		
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6_		12,224.
7 Add lines 5 and 6						7		1,897,513.
8 Enter qualifying distributions from		. 4bd	lata that are the	o a 407 :	tav sat-	8		2,261,715.
If line 8 is equal to or greater than See the Part VI instructions.	IIIIe 7, CHECK THE DOX IN PART VI, III	e io, and comp	nete mat part usin	ıyaı‰	tax rate.			

Part VI	Excise Tax Based on Investment Income (Section 494			<u>948 - se</u>	e instructio	ns)	
1a Exempt	operating foundations described in section 4940(d)(2), check here 🕨 🔛 and e	nter "N/A" on	line 1.				
Date of r	uling or determination letter: (attach copy of letter if ned	cessary-see	instructions)				
<b>b</b> Domesti	foundations that meet the section 4940(e) requirements in Part V, check here	<b>X</b> and	enter 1%	1	12,2	24.	
of Part I,	line 27b						
c All other	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).						
2 Tax und	er section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; of	2		0.			
3 Add line:	s 1 and 2			3	12,2	224.	
4 Subtitle	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; o	thers, enter -	-0-)	4		<u>0.</u>	
5 Tax bas	ed on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5	12,2	224.	
6 Credits/F	Payments:						
a 2018 est	imated tax payments and 2017 overpayment credited to 2018	6a	10,400.				
<b>b</b> Exempt	oreign organizations - tax withheld at source	6b	0.				
c Tax paid	with application for extension of time to file (Form 8868)	6c	15,000.				
d Backup	withholding erroneously withheld	6d	0.				
	dits and payments. Add lines 6a through 6d			7	25,4	100.	
8 Enter an	y penalty for underpayment of estimated tax. Check here 📖 if Form 2220 is atta	ched	i.	8		0.	
9 Tax due	. If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>		<b>&gt;</b>	9			
	ment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<b>▶</b>	10	13,1		
	amount of line 10 to be: Credited to 2019 estimated tax	13,	176. Refunded►	11		<u>0.</u>	
AF 20200 0 171	Statements Regarding Activities					<del></del>	
-	ne tax year, did the foundation attempt to influence any national, state, or local legis	slation or did	it participate or intervene	ın	1900 00000	No	
	ical campaign?				1a	X	
•	end more than \$100 during the year (either directly or indirectly) for political purpo			tion '	1b	X Mary sheet 5	
	swer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	of any materi	als published or				
	ed by the foundation in connection with the activities.						
	oundation file Form 1120-POL for this year?				1c	X	
	amount (if any) of tax on political expenditures (section 4955) imposed during the		0				
	he foundation. > \$ (2) On foundation managers		0.				
	reimbursement (if any) paid by the foundation during the year for political expend	iture tax imp	osed on foundation				
manage			•				
	foundation engaged in any activities that have not previously been reported to the l	RS7			2	X	
•	attach a detailed description of the activities.			_			
	foundation made any changes, not previously reported to the IRS, in its governing	ınstrument, a	articles of incorporation, o	r		X	
	or other similar instruments? If "Yes," attach a conformed copy of the changes	~			3 4a	X	
	oundation have unrelated business gross income of \$1,000 or more during the year	11 f		N/A		, A.	
	has it filed a tax return on Form 990-T for this year?	2		N/A	5	X	
	re a liquidation, termination, dissolution, or substantial contraction during the year?	•				2 S S S S S S S S S S S S S S S S S S S	
•	attach the statement required by <i>General Instruction T</i> equirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ıther					
	quage in the governing instrument, or	itiiGi.	•				
•	guage in the governing insulinions, or te legislation that effectively amends the governing instrument so that no mandator	n directions	that conflict with the state	law			
	n the governing instrument?	y un conons	mat commet with the state	ICAN	6 X	20228668	
	oundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	olete Part II. r	col (c) and Part XV		7 X	<del>                                     </del>	
/ Did the i	ounteation have at least \$0,000 in assets at any time during the year in 103, comp	Jioto i dit ii, t	sol. (e), and rait Av			199983	
9a Enter the	e states to which the foundation reports or with which it is registered. See instruction	nns 🕨					
NJ,	•				-		
	swer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney Gene	eral (or designate):		-		
	state as required by General Instruction G? If "No," attach explanation	*	(0. 000.3)		8b X	e communication	
	undation claiming status as a private operating foundation within the meaning of se	ection 4942/i	)(3) or 4942(i)(5) for cale	ndar		\ \ \ \ \ \	
	8 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," con				9	X	
-	persons become substantial contributors during the tax year? if *Yes,* attach a schedi				10	X	
	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		,		Form <b>990-PF</b>	(2018)	

LA S	ntvil-A Statements Regarding Activities (continued)		Land water 1		
			30 Y	'es	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				v
	section 512(b)(13)? If "Yes," attach schedule. See instructions		11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had adv	isory privileges?	1		, •
	If "Yes," attach statement. See instructions		12	<del>.</del>	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	<u> </u>	
	Website address ► NONE  The books are in care of ► MCMULLEN FAMILY FOUNDATION  Telephone	ne no.▶973-74	14-44	26	
14	Located at >53 UNDERCLIFF RD, MONTCLAIR, NJ	ZIP+4 ▶0		20	
45	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		, 0 1 2	_	$\Box$
13	and enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b> 15	. N/	Α	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank	· ———		'es	No
10	securities, or other financial account in a foreign country?	•	16		$\frac{\mathbf{x}}{\mathbf{x}}$
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		XXXX 3		
	foreign country				
Pa	int VII B Statements Regarding Activities for Which Form 4720 May Be Required		1 30 000 000		
-100 150	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		**** Y	es/	No
18	During the year, did the foundation (either directly or indirectly):	<u> </u>			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
•	a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X 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)?	Yes X 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	Yes X No			
	termination of government service, if terminating within 90 days.)	Yes [A] No			
,	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations .	N/A	1b		M
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	<b>▶</b> □	2002	388	~~~~
	Diganizations relying on a current notice regarding disaster assistance, check here:  Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not correct	ted			
•	before the first day of the tax year beginning in 2018?		1c	K.14886	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating four	dation			
_	defined in section 4942(j)(3) or 4942(j)(5)):				
	to the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) b	eginning			
	before 2018?	Yes X No			
	If "Yes," list the years ▶ , , , , , , , , , , , , , , , , , ,				
1	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to ii	ncorrect .			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" an				
	statement - see instructions.)	N/A	2b		
(	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	<b>&gt;</b>				
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	, (==)			
	during the year?	Yes X No			
١	olf "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified per				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Scheo	iule C,			2368
	Form 4720, to determine if the foundation had excess business holdings in 2018.)	N/A	3b		v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	35 SE	X ******
l	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	purpose tnat			Y

Form 990-PF (2018) MCMULLEN FAMILY FOUNDATI	ON		13-37217	7 <b>4</b> 7 Page 6
Rart VII-B Statements Regarding Activities for Which I		Required (contin		
5a During the year, did the foundation pay or incur any amount to:				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗓 No 🏻	
(2) Influence the outcome of any specific public election (see section 4955); o				
any voter registration drive?	_		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		es 🗶 No	
4945(d)(4)(A)? See instructions	or adventional aurages or t	<del></del>	es 🕰 No 🛭	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or i		es 🗓 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	lar the excentions described i		52 [XX] NO	
section 53.4945 or in a current notice regarding disaster assistance? See instri	·	in Hogolations	N/A	5b
Organizations relying on a current notice regarding disaster assistance, check f			<b>▶</b> □	
. c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined		
expenditure responsibility for the grant?			es 🔲 No 🖔	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			8	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	oay premiums on •			
a personal benefit contract?		Y	es 🕱 No 💈	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		. [	6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
8 is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration o		es 🗶 No	
excess parachute payment(s) during the year?  Part VIII  Information About Officers, Directors, Trust	oos Foundation Ma			2535   35398   7755
Paid Employees, and Contractors	ces, i outlidation ivia	mayers, riigin	У	
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.		·	
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
•				•
SEE STATEMENT 11	•	100,000.	13,049	0.
			,	
	•			
				<u> </u>
		· · · · · · · · · · · · · · · · · · ·	<del> </del>	<del> </del>
			٠,	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
	devoted to position	(C) Compensation	employee benefit plans and deferred compensation	allowances
NONE				
	-			
		1		} .
		ļ	<u> </u>	<del>                                     </del>
•				
		<del> </del>		<del> </del>
Total number of other employees paid over \$50,000	<u> </u>		<u>'</u>	

Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	_	
		_
	<del></del> -	
	$\dashv$	
	7	
Total number of others receiving over \$50,000 for professional services		<b>▶</b> 0
Part X-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis' number of organizations and other beneficiaries served, conferences convened, research papers produced to the foundation of the foundati		Expenses
1 N/A		<del></del>
2		
3		
4		
Part X-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		
3		
	<del></del>	
Total. Add lines 1 through 3	<b>•</b>	0.

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, 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	28,024,323.
b	Average of monthly cash balances	1b	28,024,323.
	Fair market value of all other assets	1c	819,557.
	Total (add lines 1a, b, and c)	16	28,874,864.
	Reduction claimed for blockage or other factors reported on lines 1a and	1.50	
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	28,874,864.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	433,123.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	28,441,741.
6	Minimum investment return. Enter 5% of line 5	6	1,422,087.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	d certain	
_	foreign organizations, check here  and do not complete this part.)	· · ·	1 422 007
1	Minimum investment return from Part X, line 6	1	1,422,087.
	Tax on investment income for 2018 from Part VI, line 5		
	Income tax for 2018. (This does not include the tax from Part VI.)	√(+3,	10 004
C	Add lines 2a and 2b	2c	12,224.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,409,863.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,409,863.
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	1,409,863.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	ا مستنفسا مستنفسا	0 064 845
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,261,715.
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:	از از د انستان	
a	Surtability 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	2,261,715.
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	5	12,224. 2,249,491.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,249,491.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies f	

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				1,409,863.
2 Undistributed income, if any, as of the end of 2018			har to see the second of the s	
a Enter amount for 2017 only			0.	99.00
b Total for prior years:		5009794CBburtheneb255Y7 ddf08Gbb3u8Y40024L28. 5800287.5		
b rotal to prior yours.		0.		
3 Excess distributions carryover, if any, to 2018.				
a From 2013				
b From 2014				
c From 2015 816,363.			2.9	
dFrum 2016 878,958.				
eFrom 2017 867,957.				
f Total of lines 3a through e	2,563,278.			
4 Qualifying distributions for 2018 from			335 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Part XII, line 4: ▶\$ 2,261,715.				
a Applied to 2017, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		AND A SOURCE OF THE SECOND SEC		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	Superiority States Sandy Sandy States			
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				1,409,863.
e Remaining amount distributed out of corpus	851,852.			
5 Excess distributions carryover applied to 2018	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as				
indicated below:	2 445 420			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,415,130.			
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.	Control Contro	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line	***		_	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2019				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.			200000000000000000000000000000000000000
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	0.		200 A	
9 Excess distributions carryover to 2019	1 2 445 422			
Subtract lines 7 and 8 from line 6a	3,415,130.		# 100 may 100	A CONTRACTOR OF THE CONTRACTOR
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015 816, 363.				
c Excess from 2016 878, 958.				
d Excess from 2017 867, 957.				
e Excess from 2018 851,852.				

	N FAMILY FO		<del>-</del> -		21747 Page 10
Rant XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2018, enter the date of t	he ruling	▶		
b Check box to indicate whether the found	dation is a private operatir	ng foundation described i		4942(j)(3) or 49	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed	]		<u> </u>		J
<b>b</b> 85% of line 2a	<del></del>		<del></del>	<del>                                     </del>	
	<del></del>	<u>.</u>	<u> </u>	<del>                                     </del>	
c Qualifying distributions from Part XII,					
line 4 for each year listed			<u> </u>	<del> /</del>	
4 Amounts included in line 2c not	ľ		/		ĺ
used directly for active conduct of			/		
exempt activities				<u> </u>	
e Qualifying distributions made directly					
for active conduct of exempt activities.				İ	
Subtract line 2d from line 2c				L	
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:			<i>y</i>	1	1
(1) Value of all assets		/		}	
• •				†	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter	<del></del>	/	<del></del>		
2/3 of minimum investment return	ļ		ļ		<u> </u>
shown in Part X, line 6 for each year					
listed	<del></del>	/	·	<del></del>	· · · - · · · · · · · · · · · · · · · ·
c "Support" alternative test - enter.					
(1) Total support other than gross	1				
investment income (interest, dividends, rents, payments on			(		ĺ
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				<del> </del>	
Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	_ <del></del>				
	-	than 20/ of the total conti	ributions recogned by the	foundation hofors the also	on of any toy
a List any managers of the foundation wh year (but only if they have contributed r			noutions received by the	ioditioation before the cio	se of ally lax
	пого инал. фозосор; (ссе с	000011 001 (U/(E/:/			
NONE					
b List any managers of the foundation wh			or an equally large portion	on of the ownership of a p	artnership or
other entity) of which the foundation ha	is a 10% of greater interes	iL .			
NONE					
2 Information Regarding Contribut		• • •	-		
Check here 🕨 🗶 If the foundation of					ests for funds. If
the foundation makes gifts, grants, etc.,	, to individuals or organiza	itions under other conditi	ons, complete items 2a,	b, c, and d.	
a The name, address, and telephone num	ber or email address of th	e person to whom applic	ations should be addres	sed	
b The form in which applications should b	ne submitted and informat	ion and materials they sh	iould include		
5 The form in which applications should t	so sagnimud and ilijui iliai	aon and materials tricy sil	iodia maidae,		
c Any submission deadlines;		<del></del>			
o miny sucritission deadiffes.					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields.	kınds of institutions, or o	other factors:	
	, 0 g		•		

Supplementary informatio	<del></del>			
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 Paid during the year		· · · · · · · · · · · · · · · · · · ·		
,		-		
		}		
	L-0			,
SEE SCHEDULE ATTACHED 4857 NORTHLAKE BOULEVARD	NONE	PUBLIC	GENERAL SUPPORT	
PALM BEACH GARDENS, FL 33418				2,196,075.
, , , , , , , , , , , , , , , , , , , ,				
		1		
<del></del>			<del></del>	
		)		
	<del> </del>			
		1		
Total	<del></del>		<b>▶</b> 3a	2,196,075.
b Approved for future payment				
NONE				
NONE		}		
				·
	1			
	<u> </u>			
	<del></del>	<del> </del>		
	1			
Total	1	<u> </u>	<b>▶</b> 3b	0.
10101			<b>►</b> 30	٠.

ter areas amounts unless otherwise indicated	Unrelated I	ousiness income	Exclude	ed by section 512, 513, or 514	(6)
ter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
Program service revenue:	code	Amount	code	Amount	Tunction income
a	_		$\vdash \vdash$		<del></del>
b	_		<del></del>		
C	_		<b>├</b> ─┤-		
d	_		<b></b>		<del></del>
e	_		1		
	_				
g Fees and contracts from government agencies			<b> </b>		
Membership dues and assessments			<u> </u>		
nterest on savings and temporary cash				ł	
nvestments			14	95,143.	
Dividends and interest from securities			14	745,489.	
Net rental income or (loss) from real estate:	, ~\	, , , , , ,	* 1	, , , , , , , , , , , , , , , , , , , ,	1 1 2 5 5 1 L A
a Debt-financed property					
b Not debt-financed property					· ·
Net rental income or (loss) from personal			T		
property					
Other investment income			14	4,033.	
Gain or (loss) from sales of assets other					<del></del>
than inventory			18	576,087.	
Net income or (loss) from special events			<del>  -                                   </del>	3,0,00	
Gross profit or (loss) from sales of inventory	-	· · · · · ·	╁╌╌┼	<del></del>	
Other revenue.			+		
			1	,	
a	<del>-  </del>		<del>  -</del>		
<u> </u>	_ <del>                                    </del>	<del></del>	<del>                                     </del>		
<u> </u>	_		$\vdash$		
	_		$\vdash$		
e		0.		1,420,752.	
Subtotal. Add columns (b), (d), and (e)	, ,	0.	l		1,420,7
Total. Add line 12, columns (b), (d), and (e)				13	1,420,7
e worksheet in line 13 instructions to verify calculations.	.)				
art XVI-B Relationship of Activities	s to the Accon	nplishment of Ex	cempt	Purposes	
	ncome is reported in (	column (e) of Part XVI-A	contribu	ted importantly to the accomp	lishment of
ne No. Explain below how each activity for which in					
	ian by providing fund:	s for such purposes).			
	nan by providing fund:	s for such purposes).			
	nan by providing fund.	s for such purposes).			
	nan by providing fund	s for such purposes).			
	nan by providing fund	s for such purposes).			
	nan by providing fund	s for such purposes).			
	nan by providing fund	s for such purposes).			
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	nan by providing fund	s for such purposes).			
	nan by providing fund	s for such purposes).			
	nan by providing fund	s for such purposes).			
	nan by providing fund	s for such purposes).			
	nan by providing fund	s for such purposes).			

13-3721747 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** 

(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  a Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Cash (2) Other assets  b Other transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  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.	1	Did the ord	nanization directly or indir	ectly engage in any of	the following	with any other organization	described in section	on 501(c)	TY	'es	No
a Transfer from the reporting foundation to a noncharitable exempt organization of;  (1) Cash (3) Other assets  5) Other transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of Indianse, equipment, or other assets  (4) Rembursement arrangements  (5) Loans or foun guizanties  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (6) Remain of indianse, equipment, making lists, other assets, or paid employees  (7) It is an answer to any of the above is "Yes," complete the following schedule. Column (1) should always show the fair market value of the goods, other assets, or services received.  (8) Amount minothed  (9) Amount minothed  (1) Amount minothed  (1) The value of organization  (1) The value of the goods, other assets, or services received.  (9) Amount minothed  (1) Amount minothed  (2) Amount minothed  (3) Amount minothed  (4) Description of relationship  (5) Description of relationship  (6) Description of relationship  (6) Description of relationship  (6) Description of relationship  (7) Amount minothed  (8) Descr	•							· ·		$\neg \dagger$	<u> </u>
(1) Cash (2) Other sarests  5 Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Retent of facilities, equipment, or other assets (4) Remburscent arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) A fifth answer to any of the above is "Yes," complete the following schedule, Cultimn (6) should always show the fair market value of the goods, other assets, or services received. (8) Amount involved (9) Amount involved (1) Name of foreignation (1) Amount involved (1) Name of foreignation (1) Amount involved (1) Name of foreignation (2) Name of foreignation (3) Personnel of twicking a facility of the section of twice of the following schedule. (1) Name of foreignation (2) Name of foreignation (3) Personnel of twice of the following schedule. (4) Name of foreignation (5) Complete the following schedule. (4) Name of foreignation (5) Personnel of twice of the following schedule. (4) Name of foreignation (5) Personnel of twice of the following schedule. (6) Type of organization (6) Description of relationship  (6) Description of relationship (7) Personnel of twice of the following schedule. (8) Name of foreignation (9) Personnel of twice of the following schedule. (9) Personnel of twice of twice of the following schedule. (1) Name of foreignation of twice of the following schedule. (1) Name of foreignation of twice of the following schedule. (1) Name of foreignation of twice of the following schedule. (1) Name of foreignation of twice of the following schedule. (1) Name of for	2	•									-
(2) Other assets  0 Other transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets to a noncharitable exempt organization  (3) Rental of racines, equipment, or other assets  (4) Rembursement arrangements  (5) Loans or forthings, equipment, making lists, other assets, or paid employees  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundration development or services presented or services	•		nom are roperang rearres		5 5/15p. 5	, <u>-</u>			1a(1)		X
b Other transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchase of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reminuscent arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (7) White answer to any of the above is "Cres", complete the following schedule. Column (b) should always show the fair market value of the poots, other assets, or services received.  (8) Amount involved  (9) Amount involved  (1) Amount involved  (2) Amount involved  (3) Amount involved  (4) Name of organization  (5) Involve presenting of organization (column (b) the section 501(c) (c)) or in section 527?  (a) Involve involved (column (b) the section 501(c) (c)) or in section 527?  (b) If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  (d) Securption of relationship  N/A  (e) Description of relationship  N/A  (i) Name of organization (column (b) Type of organization (column (b) the series of the best of my sincehology of the series of the series of the series of organization (column (b) Type of organiza			accate								
(1) Sales of assets for an noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rembursement arrangements  (5) Loans or other apparents  (6) Performance of services or membership or fundrasing solicitations  (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees  (8) Performance of services or 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) Inverso (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of venders, transactions, and sharing arrangements.  (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of venders, transactions, and sharing arrangements.  (c) Name of the following schedule.  (d) Name of the following schedule.  (e) Name of noncharitable exempt organization (d) Description of relationship (e) Investigation of organization (e) Type of organization (e) Description of relationship (e) Description of relationship (e) Investigation of organization (e) Type of organization (e) Description of relationship (e) Description of r	h	` '							1.5(-/)		
(2) Purchases of assets from a noncharitable exempt organization (3) Retrail of facilities, equipment, or other assets (4) Reminishment arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) It the answer to any of the above is "es", complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received.  (8) It the answer to any of the above is "es", complete the following schedule. Column (b) the value of the goods, other assets, or services received.  (9) Amount involved (1) Amount involved (2) Name of inoncharitable exempt organization (4) Decomption of having arrangements with the second of the condition of the con	U			nla avamat arganizatio	ın				1h/1)		X
(3) Rental of facilities, opulpment, or other assets (4) Remiturisement arrangements (5) Loans or floan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Ferromance of services or membership or fundrasing solicitations (8) Ferromance of services or membership or fundrasing solicitations (8) Interest or any of the above is "Yes," complete the following schedule. Column (9) should always show the fair market value of the goods, other assets, or services received.  (8) Amount involved (9) Amount in		` '								+	
(4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Example of facilities, equipment, making lists, other assets, or paid employees (8) The answer or any of the above or Sets, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services green 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) Amount involved   (b) Rame of noncharitable exempt organization   (d) Description of least-services, and always arrangements.    (a) Amount involved   (b) Rame of noncharitable exempt organization   (d) Description of least-services, and always arrangements.    (a) Amount involved   (b) Rame of noncharitable exempt organization   (d) Description of relationships   Ves     No					janization				<del> </del>	-	
(8) I cans or loan guarantees (6) Performance of services or membership of fundrating solicitations (7) Enteronance of services or membership of fundrating solicitations (8) Performance of services or membership of fundrating solicitations (8) I dean answer to any of the above is "res," complete the following schedule. Column (1) should always show the tair market value of the goods, other assets, or services received.  4) If the answer to any of the above is "res," complete the following schedule. Solid in (1) Should always show the tair market value of the goods, other assets, or services received.  4) Linea no (1) Amount involved (2) Name of inorical national exempt organization (4) Descretion of branders, transactions, and sharing arrangement, show in column (4) Check in the value of the goods, other assets, or services received.  10) Amount involved (2) Name of inorical national involved (3) N/A  2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (4) Descretion of branders, transactions, and sharing arrangement, show in section 501(c) (other than section 501(c) (other th				or other assets					<del></del>		
(6) Performance of services or membership or fundraising solicitations  C Sharing of facilities, equipment, making lists, other assets, or paid employees  If the answer on 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 grown by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received.  (a) Name of (b) Amount involved  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Describtion of transfers, transactions, and sharing arrangements.  N/A  (a) Name of organization  (b) Type of organization (c) Describtion of relationship  (b) If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  (b) Type of organization  (c) Description of relationship  Type of organization of the best of my knowledge and best of an arrange organization of the position of my knowledge and best of an arrange organization of the property organization of the position of the property organization of the position of the property organization of the property organization or the property organization of the position of relationship  N/A  Under penalties of por_un, Localize that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and best of an arrange organization of the property organization of the property organization of the property organization of the property organization or the property organization or the property organization or the property organization or the property organization org									<del></del>		
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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 geven 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]		` '		•	_				<del></del>		
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.		-		_						i	
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 strangements	d									s,	
a) Lines no   (b) Amount involved   (c) Name of noncharitable exempt organization   (d) Description of transfers, transactions, and sharing amangements   N/A      2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c) (3)) or in section 527?   Yes   X   No     If Yes, complete the following schedule.   (a) Name of organization   (b) Type of organization   (c) Description of relationship     N/A			-			ed less than fair market value	in any transaction	or sharing arrangement, s	show in		
N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?    Indirect in the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?    Indirect in the foundation of organization of		<u> </u>									
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  b If Yes, 'complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign and belief, it is true, correct, and complete Declaration of preparer (other than teappyer) is based on all information of which preparer and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and knowledg	(a)L	ine no	(b) Amount involved	(c) Name of r		exempt organization	(d) Description	of transfers, transactions, and	sharing arrai	ngemer	nts
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes					N/A						
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes											
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes											
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes											
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes											
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes											
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes											
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes							1				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes			·								
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes						···	1				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes						····					
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>					<del> </del>			-	
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes						<del></del>	<u> </u>				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes											
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes							<del>                                     </del>			_	
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		-					<u> </u>	· · · · · · · · · · · · · · · · · · ·			
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes	0-	la tha faur	ndetion directly or indirect	the officered with or re	lated to one	or more tay exempt erganiz	ations described				
b If Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  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 prepare (other than taxpayer) is based on all information of which preparer has any knowledge  Signature of officer or trustee  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Print's elin   Firm's Elin   Phone no. 212-576-1400	2 <b>a</b>		•	•		of more tax-exempt organiza	auons described	Г		Y	1 No
(a) Name of organization  N/A  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 return with the preparer shown below? See instruction of officer or trustee  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer Use Only  Prim's address ► 440 PARK AVE. SOUTH  NEW YORK, NY 10016  Prim's address ► 120 Print/Type organization  (c) Description of relationship  (c) Description of relationship  (c) Description of relationship  (c) Description of relationship  May the IRS discuss this return with the preparer shown below? See instruction of which preparer shown below? See instruction in the preparer shown below? See instruction			, , ,		11011 527			L	162		טאונ
N/A  Sign Here  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below? See instruction and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer shown below? See instruction with the preparer shown below? See instruction if the preparer shown below? See inst	b	If Yes," co				(h) Type of organization	<del></del>	(a) Description of relations	hin		
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Sign Here    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 return with the preparer shown below? See instruction if PTIN self- employed    Print/Type preparer's name			N/A								
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Sign Here    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 return with the preparer shown below? See instruction if PTIN self- employed    Print/Type preparer's name		_						<del></del>			
Sign Here    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 return with the preparer shown below? See instruction if PTIN self- employed    Print/Type preparer's name							<del></del>				
Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Date   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's signature		and he	penalties of perjury, I declare	that I have examined this	return, includin parer (other thai	g accompanying schedules and s n taxpayer) is based on all informa	statements, and to the l	The second secon	y the IHS dis	cuss t	nis
Paid Preparer Use Only    Signature of officer or trustee		gn   👢			, a a (o.i.a iiia			she	own below?	prepare Se <u>e ins</u>	ar str
Paid Print/Type preparer's name  Preparer's signature  IRA RUBENSTEIN  Firm's name ► MBAF CPAS, LLC  Firm's name ► MBAF CPAS, LLC  Firm's address ► 440 PARK AVE. SOUTH  NEW YORK, NY 10016  Proparer's signature  Date Self- employed  Print/Type preparer's name Preparer's signature  Proparer's signature Proparer's signature Proparer's signature Print/Type preparer's name Proparer's signature Proparer's sign	He	ere	X Fele VI	V/c Malle		12/10/19	PRESID	ENT	X Yes		No
Paid Preparer Use Only  Firm's address ► 440 PARK AVE. SOUTH NEW YORK, NY 10016  Po0009048  Po0009048  Firm's EIN ► 13-3842744  Phone no. 212-576-1400		Sigr	nature of officer or trustee				Title	<u> </u>			
Paid Preparer Use Only  Firm's address ► 440 PARK AVE. SOUTH NEW YORK, NY 10016  P00009048  Firm's EIN ► 13-3842744  Phone no. 212-576-1400			Print/Type preparer's na	ame	Preparer's si	onature	Date				
Preparer Use Only Firm's name ► MBAF CPAS, LLC Firm's EIN ► 13-3842744  Firm's address ► 440 PARK AVE. SOUTH NEW YORK, NY 10016 Phone no. 212-576-1400					2		dala	self- employed			
Use Only    Firm's address   440   PARK   AVE   SOUTH   NEW   YORK   NY   10016   Phone no.   212-576-1400	Pá	aid	IRA RUBENS	TEIN d		diff	9/1/17	P0	00090	48	
Use Only    Firm's address   440   PARK   AVE   SOUTH   NEW   YORK   NY   10016   Phone no.   212-576-1400	Pr	eparer			TC .	<del>4</del> <del>6</del> 11		Firm's EIN ► 13-3	84274	4	
Firm's address ► 440 PARK AVE. SOUTH  NEW YORK, NY 10016  Phone no. 212-576-1400		-		,		•					
NEW YORK, NY 10016 Phone no. 212-576-1400		•	Firm's address > 44	O PARK AVI	sou	TH		<u> </u>			
			1					Phone no. 212-5	76-14	00	
	-		1 1412	TOTAL , IV.		<del>-</del>	· · · · · · · · · · · · · · · · · · ·				(2018)

FORM 990-PF INTERES	ST ON SAVING	S AND T	EMPOR.	ARY C	ASH :	INVESTME	ENTS S	TATEMENT	1
SOURCE		RE	(A) VENUE BOOK			(B) INVESTME INCOME		(C) ADJUSTED NET INCOM	
BROKERAGE ACCOUNTS			100,3	66.		100,36	56.		
BROKERAGE ACCOUNTS ACCRUED INTEREST PA	ID		<1,8	71.>		<1,87	71.>		
BROKERAGE ACCOUNTS BOND PREMIUM JPMORGAN CHASE BANK	- LESS:		<3,3	59.> 7.		<3,35	59.> 7.		
TOTAL TO PART I, LI	NE 3		95,1	43.		95,14	13.		
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM	SEC	JRITIES	S	TATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	REV	A) ENUE BOOK	NET I	(B) INVEST- INCOME		
BROKERAGE ACCOUNTS	745,489.	-	0.	74	5,48	9. 74	15,489.		
TO PART I, LINE 4	745,489.		0.	74	5,48	9. 74	15,489.		
FORM 990-PF		OTHER	INCO	ME			s	TATEMENT	3
DESCRIPTION			RE	(A) VENUE BOOK		(B) NET IN MENT II	/EST-	(C) ADJUSTE	
SECURITY LITIGATION THRU WEST STREET CA		er s		4,	189.	4	1,189.		
VII IRS REFUND				<	:153.: 5.	>	<153.> 5.		
THRU VINTAGE VII AI	V				<8.	>	<8.>		
TOTAL TO FORM 990-P	F, PART I, I	LINE 11	-	4,	033.	4	1,033.		

FORM 990-PF	ACCOUNTI	NG FEES	S'.	PATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
ACCOUNTING FEES	6,500.	3,250.	<del></del>	3,250.
TO FORM 990-PF, PG 1, LN 16B	6,500.	3,250.		3,250.
FORM 990-PF C	THER PROFES	SIONAL FEES	S	ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
INVESTMENT FEES	129,814.	129,814.		0.
TO FORM 990-PF, PG 1, LN 16C	129,814.	129,814.		0.
FORM 990-PF	TAX	ES	S'	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES
FOREIGN TAXES - STOCKS FEDERAL TAXES	8,836. 739.			0.
TO FORM 990-PF, PG 1, LN 18	9,575.	8,836.		0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REPORTING FEES POSTAGE TELEPHONE MISCELLANEOUS OFFICE SUPPLIES DUES AND SUBSCRIPTIONS	750. 556. 2,936. 440. 434. 750.	0. 0. 0.		750. 556. 2,936. 440. 434. 750.
TO FORM 990-PF, PG 1, LN 23	5,866.	0.		5,866.

FORM 990-PF OTHER INCREASES	S IN NET ASSETS OR E	FUND BALANCES	STATEMENT
DESCRIPTION			AMOUNT
DIFFERENCE BETWEEN BOOK & TAX	K PARTNERSHIPS		4,473
TOTAL TO FORM 990-PF, PART I	II, LINE 3		4,473
FORM 990-PF	CORPORATE STOCK		STATEMENT
DESCRIPTION .		BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED STATEMENT		18,262,787.	27,393,193
TOTAL TO FORM 990-PF, PART II	I, LINE 10B	18,262,787.	27,393,193
FORM 990-PF	OTHER INVESTMENTS	6	STATEMENT 1
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
GOLDMAN SACHS PARTNERSHIP	COST	668,245.	760,950
TOTAL TO FORM 990-PF, PART II	I, LINE 13	668,245.	760,950

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STATEMENT

FORM 990-PF

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CATHERINE MCMULLEN	TREASURER 0.10	0.	0.	0.
BASKING RIDGE, NJ 07920	0.10	0.	0.	,
PETER MCMULLEN	PRESIDENT 1.10	0.	0.	0.
ESSEX FALLS, NJ 07021				
JOHN J. MCMULLEN, JR.	VICE PRESIDENT 0.10	0.	0.	0.
RIVIERA BEACH, FL 33404				
JACQUELINE MCMULLEN	DIRECTOR 0.10	0.	0.	0.
MONTCLAIR, NJ 07042	0.120			
PATRICK GILMARTIN	DIRECTOR	0.	0.	0.
IRVINGTON, NY 10533	0.10	0.	0.	0.
JAMES BLAKE	DIRECTOR			•
WEST ORANGE, NJ 07052	0.10	0.	0.	0.
ILIA SCRIVEN (LEASED EMPLOYEE)	EXECUTIVE DIREC			
MONTCLAIR, NJ 07042	8.00	73,500.	8,620.	0.
LINDA DRASHEFF (LEASED EMPLOYEE)		06.500	4 400	•
MONTCLAIR, NJ 07042	4.00	26,500.	4,429.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	100,000.	13,049.	0.

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

MCMUILEN FAMILY FOUNDATION					[.
GRANTEES LIST					
5/31/2019					
Grant Recipient	Address	Foundation Status	Relationship	Purpose of Grant Contribution	Amount
				,	
Arts Wisconsin	Box 1054, Madison, Wi 53701-1054	Public	None	Shanghai Quartet Documentary	11,075 00
Bill Meissner Food Pantry Of MCC Of The Palm Beaches	4857 Northlake Boulevard, Palm Beach Gardens, FL 33418	Public	None	Support Their Activities	2,000 00
Boston College	140 Commonwealth Avenue, Chestnut Hill, MA 02467-3934	Public	None	Museum Renovation/Move	1,400,000 00
Busch Wildlife Sanctuary	2500 Jupiter Park Drive, Jupiter, FL 33458	Public	None	Support Their Activities	5,000 00
Community Food Bank Of New Jersey	31 Evans Terminal Road, Hillside, NJ 07205	Public	None	Support Their Activities	6,000 00
Delbarton School	230 Mendham Road, Morristown, NJ 07960	Public	None	Support Their Activities	100,000 00
Exodus Transitional Community, Inc.	2271 Third Avenue, Floor 2, New York, NY 10035	Public	None	Support Their Activities	10,000 00
Family Service League Of New Jersey	60 South Fullerton Avenue, Sulte 109, Montdair, NJ 07042	Public	None	Support Their Activities	4,000 00
FIRST(c/o Josh Weston , Automatic Data Processing, Inc.)	One ADP Boulevard, Roseland, NJ 07068	Pubilc	None	Support Their Activities	2,000 00
Friends of Glen Gray, Inc.	200 Midvale Mountain Road, Mahwah, NJ 07430-2700	Public	None	Support Their Activities	5,000 00
Human Needs Food Pantry	9 Label Street, Montclair, NJ 07042	Public	None	Support Their Activities	5,000 00
KIPP New Jersey	60 Park Place, Suite 802, Newark, NJ 07102	Public	None	Support Their Activities	80,000 00
Liberty Science Center	222 Jersey City Boulevard, Jersey City, NJ 07305	Public	None	Support Their Activities	2,500 00
Main St. Counseling Center	8 Marcella Avenue, West Orange, NJ West Orange	Public	None	Support Their Activities	2,500 00
Mass Humanitles	66 Bridge Street, Northhampton, NJ 01060	Public	None	Support Their Activities	10,000 00
Metro YMCA of The Oranges	139 E. McClellan Avenue, Livingston, NJ 07039	Public	None	Support Their Activities	5,000 00
Montclair Art Museum	3 South Mountain Avenue, Montdair, NJ 07042	Public	None	Support Their Activities	1,000 00
Montclair High School Alumni Association Inc.	483 Park Street, Upper Montdalr, NJ 07043	Public	None	Alumni Association Scholarship Program	48,000 00
Montclair History Center	108 Orange Road, Montclair, NJ 07042	Public	None	Support Their Activities	2,000 00
Montclair State University Foundation	1 Normal Avenue, Montclarr, NJ 07042	Public	None	Support Their Activities	50,000 00
OASIS - A Haven For Women And Children	59 Mill Street, Paterson, NJ 07501	Public	None	Support Their Activities	2,000 00
Princess Grace Foundation-USA	150 East 58th Street, Floor 25, New York, NY 10155	Public	None	Support Their Activities	2,000 00
Seton Hall Preparatory School	120 Northfield Avenue, West Orange, NJ 07052	Public	None	Support Their Activities	10,000.00

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St. Mary's Abbey	230 Mendam Road, Morristown, NJ 07960	Public	None	Support Their Activities	1,000 00
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The Cradle Foundation	2049 Ridge Avenue, Evanston, IL 60201	Public	None	Support Their Activities	10,000 00
		_			
The Lustgarten Foundation	415 Crossways Park Drive, Suite D, Woodbury, NY 11797	Public	None	Support Their Activities	10,000 00
The Meghan P. Birdsall Scholarship Fund	PO Box 613, Essex Fells, NJ 07021	Public	None	Support Their Activities	1,500 00
The Mission Continues	1141 South 7th Street, St Louls, MO 63104-3623	Public	None	Support Their Activities	2,000 00
energy and stated and an energy and an energ					
The Montclair Foundation	21 Van Vieck Street, Montciair, NJ 07042	Public	None	Support Their Activities	10,000 00
					- 4
The Salvation Army Montclair Citadel	13 Trinty Place, Montclair, NJ 07042	Public	None	Support Their Activities	20,000 00
The Seamen's Church Institute	50 Broadway, Floor 26, New York, NY 1004-3802	Public	None	Support Their Activities	1,000 00
The Seeing Eye	Post Office Box 375, Morristown, NJ 07963-0375	, Public	None	Support Their Activities	2,000 00
The Yogi Berra Museum & Learning Center	8 Yogi Berra Drive, Little Falls, NJ 07424	Public	None	Support Their Activities	25,000 00
					-
Tri-County Scholarship Fund	Four Century Drive, Parsippany, NJ 07054	Public	None	Support Their Activities	2,500 00
Webb Institute	298 Crescent Road, Glen Cove, NY 11542-1398	Public	None	Fund Student Assistance Endowment	20,000 00
				Fund Student Assistance Endowment	20,000.00
				Fund Student Assistance Endowment	20,000 00
				Fund Student Assistance Endowment	20,000 00
YMCA Of Montclair	25 Park Street, Montclair, NJ 07042	'Public	None	Support Their Activities	00 000'05
				Support Their Activities	25,000 00
Zoological Society Of New Jersey, Inc.	: 560 Northfield Avenue, West Orange, NJ 07052	Public	None	Support Their Activities	20,000 00
	SINCIAL INITIALITY OF THE PROPERTY OF THE PROP	=			2 105 075 00
	IOLAL CHARLIABLE CONTRIBUTIONS				2,430,01