Return of Private Foundation

5	E٢	Z	1	2020	, o ,

Department of the Treasury

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 EN

' ~	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Go to www.irs.gov/Form990F	ror in	structions at	nd the lat	est informatio	n. Open	to Public Inspection
	For	calen	dar year 2019 or tax year beginning	12/1/	2019	, ar	d ending	11/30/2020	<u>) </u>
	Nar	ne of four	ndation				A Employer	identification number	
	ZIC	HRON	YEHOSHUA VASHER FOUNDATION						
	Nur	nber and	street (or P O box number if mail is not delivered to street address	s)		Room/suite		22-3692106	
	751	I WINT	HROP AVENUE				B Telephone	number (see instruction	ns)
			state or province, country, and ZIP or foreign postal code						
	TE	ANECK	NJ		07666	6	ļ	(201) 907-075	4
			ntry name Foreign province/state/county		Foreign	postal code	C If exempt	on application is pendin	g, check here 🕨 🔲
							د	_	
	G	Check			a former pub	lic charit	y D 1. Foreigi	n organizations, check,h	ere ▶ 🗌
1				ed returi	n			n organizations meeting	the 85% test,
1			☐ Address change ☐ Name c					here and attach compute	_
	Н		type of organization: X Section 501(c)(3) exem					foundation status was te i7(b)(1)(A), check here	rminated under . ►
14		Section	n 4947(a)(1) nonexempt charitable trust 🔲 Othe	er taxabl	le private fou	indation`		,, (b)(1)(/1), dilodi(1)dio	
<i>)</i> '	T	Fair m	arket value of all assets at J Accounting me	thod [.] [X Cash	Accru	al F if the four	dation is in a 60-month	termination
		end of	year (from Part II, col. (c),	cify)			1	tion 507(b)(1)(B), check	
		line 16			on cash basis.	.)	-		
	P	_	Analysis of Revenue and Expenses (The total of		/a\				(d) Disbursements
	_		amounts in columns (b), (c), and (d) may not necessarily	v l	(a) Revenue au expenses per		Net investment	(c) Adjusted net	for chantable
			equal the amounts in column (a) (see instructions).)	´	books		income	income	purposes (cash basis only)
		1	Contributions, gifts, grants, etc., received (attach schedule)					9	
A			Check ► if the foundation is not required to attach Sch.	。 · ⊢					
"		2	Interest on savings and temporary cash investment						
Ď		4	Dividends and interest from securities	"° -	43	953	43,953	43,953	
Z		5a		. ⊢	70,	300	40,000	40,000	
CANNED		b	Gross rents	· -				· · · · · · · · · · · · · · · · · · ·	
Ü	a	_	Net gain or (loss) from sale of assets not on line 10	$\overline{}$		- .			
	b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2)								
FEB	ē	l	Capital gain net income (from Part IV, line 2)					 	
	é	7	• •						
()	ш.	8	Net short-term capital gain						
!		9	· · · · · · · · · · · · · · · · · · ·					<u>-</u>	
20.		10a	Gross sales less returns and allowances				. , ,		
2022		b	Less. Cost of goods sold			- 			
		C 44	Gross profit or (loss) (attach schedule)	_				· · · · · · · · · · · · · · · · · · ·	
		11	Other income (attach schedule)		42	953	43,953	43,953	
	_	12	Total. Add lines 1 through 11		43,	900	43,933	43,933	· · · · · · · · · · · · · · · · · · ·
	penses	13	Compensation of officers, directors, trustees, etc.			_			
	E	14	Other employee salaries and wages						
7	å	15	Pension plans, employee benefits						· · · · · · · · · · · · · · · · · · ·
\mathbf{x}		16a	Legal fees (attach schedule)	· -					
₹	è	b	Accounting fees (attach schedule)		•				
₽	Ę	C	Other professional fees (attach schedule)						
7	Ë	17	Interest	· -					
20/20	Ę.	18	Taxes (attach schedule) (see instructions)						
7	Έ	19	Depreciation (attach schedule) and depletion					···	<u> </u>
	ğ	20	Occupancy						
5	7	21	Travel, conferences, and meetings					<u> </u>	
9	Ĕ	22	Printing and publications						
z	Operating and Administrative Ex	23	Other expenses (attach schedule)	·					
S SAN	tin	24	Total operating and administrative expenses.			اء	_	_	_
ń	Ē		Add lines 13 through 23			0	0	0	
2	þe	25	Contributions, gifts, grants paid			174			6,174
ວ	0	26	Total expenses and disbursements. Add lines 24 and 25.		6	,174	0	0	6,174
r O		27	Subtract line 26 from line 12:						
		а	Excess of revenue over expenses and disbursements .	. [_	37	779			
) i		b	Net investment income (if negative, enter -0-) .		,		43,953		
9		С	Adjusted net income (if negative, enter -0-)					43,953	
	_					_			

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2019)

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For	n 990-Pi	F (2019) ZICHRON YEHOSHUA VASHER FOUNDATION			22-3	692106	Page 2
Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	ing of year End			
		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Valu	e	(c) Fair Mai	ket Value
	1	Cash—non-interest-bearing					
	2	Savings and temporary cash investments					
	3						
	•	Accounts receivable Less allowance for doubtful accounts					
	4	Pledges receivable			\neg		
	"	Less: allowance for doubtful accounts					
	5	Grants receivable			$\overline{}$		
	6	Receivables due from officers, directors, trustees, and other					
	١	disqualified persons (attach schedule) (see instructions)		•		•	
	_				\dashv		
	7	Other notes and loans receivable (attach schedule)					
(D		Less allowance for doubtful accounts			\longrightarrow		
Assets	8	Inventories for sale or use			\longrightarrow		
SS	9	Prepaid expenses and deferred charges					
⋖	10a	Investments—U.S. and state government obligations (attach schedule)	1 2 1 2 2 2 5				
	Ь	Investments—corporate stock (attach schedule)	1,318,265	1,356	,044		 .
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment, basis	·				
		Less accumulated depreciation (attach schedule)					
	12	Investments—mortgage loans				5 - ····	
	13	Investments—other (attach schedule)					
	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	ļ			,	J
		ınstructions. Also, see page 1, item I)	1,318,265	1,356	5,044		<u> </u>
	17	Accounts payable and accrued expenses					
S	18	Grants payable					
Liabilities	19	Deferred revenue					
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons					
<u>.</u>	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe					
	23	Total liabilities (add lines 17 through 22)	0		0		
S		Foundations that follow FASB ASC 958, check here ▶□					
Balances		and complete lines 24, 25, 29, and 30.					
<u>a</u>	24	Net assets without donor restrictions					
Ва	25	Net assets with donor restrictions					
ਰੂ		Foundations that do not follow FASB ASC 958, check here					
Fund		and complete lines 26 through 30.					
Ē	26	Capital stock, trust principal, or current funds	1,318,265	1,356	5,044		ļ
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund	, , , , , , , , , , , , , , , , , , , ,				
ë	28	Retained earnings, accumulated income, endowment, or other funds		-			
155	29	Total net assets or fund balances (see instructions)	1,318,265	1,356	3.044		
Ť,	30	Total liabilities and net assets/fund balances (see	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			o	
Net Assets or		Instructions)	1,318,265	1.356	5.044		ļ
	rt III	Analysis of Changes in Net Assets or Fund Balances	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,500	,-,-,		<u> </u>
		I net assets or fund balances at beginning of year—Part II, column (a)	line 29 (must agree v	vith			
•		of-year figure reported on prior year's return)			1	1	,318,265
2		r amount from Part I, line 27a			2	<u>-</u>	37,779
3					3		51,119
4		r increases not included in line 2 (itemize)			4	1	,356,044
_	_				5		,000,044
S S	Total	eases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5)—Par	t II column (h) line 20		6		.356,044
•	i utai	r not access of fairs palarious at one of year time 7 fillings lifte of — al	, ooianii (b), iiiic 23				

Part	V Capital Gains an	d Losses for Tax on Investm	nent Income					
		ind(s) of property sold (for example, real estause, or common stock, 200 shs MLC Co)	ate,	(b) How acquired P—Purchase D—Donation		ite acquired , day, yr)	(d) Date sold (mo , day, yr)	
1a								
b								
с								
<u>d</u>								
<u>e</u>				<u> </u>				
	(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale						n or (loss) f) minus (g))	
<u>a</u>								
<u> </u>							,	
<u> </u>								
<u>d</u>								
<u>е</u>	Complete cally for an ate at		by the ferradation	10/21/60				
	Complete only for assets s	howing gain in column (h) and owned					(h) gain minus less than -0-) or	
	(I) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any			rom col (h))	
<u>a</u>								
b								
<u>c</u>								
<u>d</u>		· · · · · · · · · · · · · · · · · · ·					······	
<u>e</u>		f If goin	also enter in Par	t Lline 7				
2	Capital gain net income of	r (not canital loce)	aiso enter in Par , enter -0- in Par	· · · · · · · · · · · · · · · · · · ·	2		0	
3	·	n or (loss) as defined in sections 1:						
	-	, line 8, column (c). See instruction		,				
Part	Part I, line 8	der Section 4940(e) for Redu	· · · · · · ·	J	3		0	
If sect	ion 4940(d)(2) applies, leav	vate foundations subject to the sec ve this part blank. section 4942 tax on the distributat					☐ Yes ☐ No	
		ualify under section 4940(e). Do n			<u> </u>			
1	Enter the appropriate amo	ount in each column for each year,	see the instruct	ions before makır	ig any e	entries.		
Cale	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use as	sets	ets (col (b) divided by col (c))		
	2018		0		0		0.000000	
	2017		143	1,268	3,187		0.000113	
	2016		1,260		2,871		0.013852	
	2015		1,956		3,126		0.002085	
	2014		1,778	803	3,021		0.002214	
2 3		for the 5-year base period—divide				2	0.018264	
•	_	oundation has been in existence if				3	0.003653	
4	Enter the net value of non	charitable-use assets for 2019 from	m Part X, line 5		. -	4		
5	Multiply line 4 by line 3 .				. -	5		
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			.	6	0	
7	Add lines 5 and 6				. -	7	0	
8		ns from Part XII, line 4			_	8	0	
	If line 8 is equal to or great Part VI instructions.	iter than line 7, check the box in Pa	art VI, line 1b, ar	nd complete that p	oart usii	ng a 1% tax	rate. See the	

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruction	ons)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	_ "			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check				879
_	here ▶ ☐ and enter 1% of Part I, line 27b	<u> </u>			
С	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-)				0
3	Add lines 1 and 2				879
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	<u> </u>			879
6	Credits/Payments.				<u> </u>
a	2019 estimated tax payments and 2018 overpayment credited to 2019 6a	1			
b	Exempt foreign organizations—tax withheld at source				
c	Tax paid with application for extension of time to file (Form 8868) 6c	ļ			
d	Backup withholding erroneously withheld 6d	İ			
7	Total credits and payments. Add lines 6a through 6d				0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	 			3
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<u> </u>			882
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10				0
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax	\vdash			0
	VII-A Statements Regarding Activities	<u> </u>			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a	1	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	i t			
_	Instructions for the definition		1b		х
	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.	- 1			
С	Did the foundation file Form 1120-POL for this year?	ľ	1c		$\overline{\mathbf{x}}$
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	٠, إ	 -		^
•	(1) On the foundation. \$	}			1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
·	on foundation managers. >\$			i	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ľ	2		
_	If "Yes," attach a detailed description of the activities.	.			
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	. ľ	3		×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	·	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	İ	5	1,171	
•	If "Yes," attach the statement required by General Instruction T	٠. ١			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1			
•	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	İ		1	
	conflict with the state law remain in the governing instrument?	. [6		×
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	i f	7	X	
8а	Enter the states to which the foundation reports or with which it is registered. See instructions.	-		_ ^	
- u	NJ	ŀ		1 1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
U	(or designate) of each state as required by General Instruction G? If "No," attach explanation	ŀ	8b		
۵		. }	-00	-	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	ŀ	<u></u>		
	or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If	ļ			
40	"Yes," complete Part XIV	٠,	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		40	i	.,
	names and addresses		10	ı I	Х

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		Х
	Website address ► N/A			
14	The books are in care of ▶ OFRA WEINBERGER Telephone no. ▶ (201) 90	7-075	4	
	Located at ► 751 WINTHROP AVENUE TEANECK NJ ZIP+4 ► 07666			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		. 1	▶ 🗆
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		_X_
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the			
	name of the foreign country			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			'
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.) Yes X No	ŀ		
			,	'
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	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance, check here	10	14/7	-
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1c		X
•	were not corrected before the first day of the tax year beginning in 2019?	10		 ^-
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)):			
_	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
а	6d and 6e) for tax year(s) beginning before 2019?]
		ļ		
L	If "Yes," list the years 20 , 20 , 20 , 20	ŀ		
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		•	ł '
		2h	N/A	
_	all years listed, answer "No" and attach statement—see instructions.)	2b	IV/A	
С			 '	'
2-	▶ 20, 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
3a	at any time during the year?			
ı.	, , ,		<u> </u> ,	
b	If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	3b	N/A	1.,
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	l	X_

Page 6

Lair	VIES Statements Regarding Activities	TOT VVI	nich Form 4	4/20 IV	lay Be Re	quire	a (Contin	ueu)			
5a	During the year, did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to it			section	4945(e))?		Yes	X No		Yes	No
	(2) Influence the outcome of any specific public ele	ction (s	see section 49	955); or	to carry on		Yes	X No			
	directly or indirectly, any voter registration drive (3) Provide a grant to an individual for travel, study						Yes	No No			
	(4) Provide a grant to an organization other than a						٠٠٠ ا	23 114			
	section 4945(d)(4)(A)? See instructions						☐ Yes	X No		,	
	(5) Provide for any purpose other than religious, ch purposes, or for the prevention of cruelty to chil						Yes	X No			*
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions								5b	N/A	
	Organizations relying on a current notice regarding							▶ □			
С											
0-	If "Yes," attach the statement required by Regulation						۰				
6a	Did the foundation, during the year, receive any fur on a personal benefit contract?						Yes	⊠ No	·		
b	Did the foundation, during the year, pay premiums	, directly	y or indirectly	on a p	ersonal ber	efit cor	ntract? .		6b		Х
7a	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a page.	erty to a	prohibited tax	shelter ti	ransaction?		Yes	X No			
b	If "Yes," did the foundation receive any proceeds of	r have	any net incom	ne attrib	utable to th	e trans		Z 110	7b	N/A	
8									•		
Part	VIII Information About Officers, Direct									es,	
	and Contractors										
1	List all officers, directors, trustees, and foundate										
	(a) Name and address	hou	e, and average irs per week ted to position	(If r	mpensation not paid, nter -0-)	emplo	Contribution byee benefit erred compe	plans °	(e) Expe	nse ac allowan	
OFRA	WEINBERGER	TOLIC									
751 V	VINTHROP AVENUE TEANECK, NJ	IRUS	TEE 2.00		0						
751 W		IRUS			0						
751 W		IRUS			0						
751 W		IRUS			0						
751 W			2.00	cluded		see ins	structions	s). If no	ne, ent	er	
	Compensation of five highest-paid employees (other t	2.00	verage veek			(d):Contrib employee plans and compen	utions to benefit deferred	,(e) Exp		
	Compensation of five highest-paid employees ("NONE." (a) Name and address of each employee paid more than \$50,000	other t	han those ind	verage veek	on line 1—		(d)-Contrib employee plans and	utions to benefit deferred	,(e) Exp	ense ac	
2	Compensation of five highest-paid employees ("NONE." (a) Name and address of each employee paid more than \$50,000	other t	han those ind	verage veek	on line 1—		(d)-Contrib employee plans and	utions to benefit deferred	,(e) Exp	ense ac	
2	Compensation of five highest-paid employees ("NONE." (a) Name and address of each employee paid more than \$50,000	other t	han those ind	verage veek	on line 1—		(d)-Contrib employee plans and	utions to benefit deferred	,(e) Exp	ense ac	
2	Compensation of five highest-paid employees ("NONE." (a) Name and address of each employee paid more than \$50,000	other t	han those ind	verage veek	on line 1—		(d)-Contrib employee plans and	utions to benefit deferred	,(e) Exp	ense ac	
2	Compensation of five highest-paid employees ("NONE." (a) Name and address of each employee paid more than \$50,000	other t	han those ind	verage veek	on line 1—		(d)-Contrib employee plans and	utions to benefit deferred	,(e) Exp	ense ac	

Part	and Contractors (continued)		
3	Five highest-paid independent contractors for professional services. See	instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	, (c) Compensation
NONE		- -	
		. <u>.</u>	
Total r	number of others receiving over \$50,000 for professional services	<u>.</u>	<u> </u>
Part	IX-A Summary of Direct Charitable Activities		
	e foundation's four largest direct chantable activities during the tax year. Include relevant statistical info zations and other beneficiaries served, conferences convened, research papers produced, etc	rmation such as the number of	Expenses
1 <u>A</u>	ID TO NEEDY		
2			
3 _			
4		9	
Part	IX-B Summary of Program-Related Investments (see instructi	ons)	
	ribe the two largest program-related investments made by the foundation during the tax year on lines 1		Amount
1			
2 			
	her program-related investments. See instructions		
3			
T = 4 = 1	Add live data and the		
ı otal.	Add lines 1 through 3		i

Form **990-PF** (2019)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	n foundat	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	•	
	purposes		
а	Average monthly fair market value of securities	1a	1,354,590
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,354,590
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3 °	1,354,590
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	20,319
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,334,271
6	Minimum investment return. Enter 5% of line 5	6	66,714
Part :		ns	
	and certain foreign organizations, check here and do not complete this part.)	11	66,714
1	Minimum investment return from Part X, line 6		00,714
2a		4	
b c	Income tax for 2019. (This does not include the tax from Part VI.)	2c	879
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	65,835
4	Recoveries of amounts treated as qualifying distributions	4	05,655
5	Add lines 3 and 4	5	65,835
6	Deduction from distributable amount (see instructions)	6	00,000
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
,	line 1	7	65.835
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	6,174
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1.2	
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	6,174
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	
6	Adjusted qualifying distributions, Subtract line 5 from line 4	6	6,174
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when	ther the fo	undation
	qualifies for the section 4940(e) reduction of tax in those years.		

Part	XIII Undistributed Income (see instructions	3)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				65,835
2	Undistributed income, if any, as of the end of 2019				00,000
– a	Enter amount for 2018 only			o	٥
b	Total for prior years: 20, 20, 20		· · · · · · · · · · · · · · · · · · ·		
3	Excess distributions carryover, if any, to 2019	, , ,	'		~ ,1#11
а	From 2014		, ,		* .
b	From 2015				,
	From 2016		-		
d	From 2017				
e	From 2018				
f	Total of lines 3a through e	301,572			
4	Qualifying distributions for 2019 from Part XII,	301,372			
7	line 4 ▶ \$ 6,174				
а	Applied to 2018, but not more than line 2a				
	Applied to undistributed income of prior years			Ď.	
	(Election required—see instructions)				a
С	Treated as distributions out of corpus (Election				
·	required—see instructions)				
Ь	Applied to 2019 distributable amount				6,174
e	Remaining amount distributed out of corpus				0,114
5	Excess distributions carryover applied to 2019.				
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)	59,661		}	59,661
6	Enter the net total of each column as	00,001			00,001
•	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	241,911			
b	Prior years' undistributed income. Subtract	2,0			o
	line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed			-	
d	Subtract line 6c from line 6b. Taxable				
	amount—see instructions				
е	Undistributed income for 2018. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions			0	
f	Undistributed income for 2019. Subtract lines			Ć.	-
	4d and 5 from line 1. This amount must be				s
	distributed in 2020				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)				
8	Excess distributions carryover from 2014 not				
	applied on line 5 or line 7 (see instructions)	171,879			==
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a	70,032			
10	Analysis of line 9:				
а	Excess from 2015				0
b	Excess from 2016				
c	Excess from 2017 5,500				
d	Excess from 2018				
е	Excess from 2019				

Form 99	90-PF (2019) ZICHRON YEHOSHUA	VASHER FOUN	DATION		22-3692	2106 page 10	
Part	XIV Private Operating Foundati	ions (see instru	ctions and Part	VII-A, question 9)		N/A/	
1a	If the foundation has received a ruling o						
	foundation, and the ruling is effective for		·			/	
b	Check box to indicate whether the foundation				4942())(3	or 4942(j)(5)	
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years			
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total	
	investment return from Part X for each year listed					0	
ь	85% of line 2a					0	
c	Qualifying distributions from Part XII,			+	/	_	
·	line 4, for each year listed		1		/	0	
	Amounts included in line 2c not used directly			 			
d	for active conduct of exempt activities					0	
_	·			 	 	<u> </u>	
е	Qualifying distributions made directly						
	for active conduct of exempt activities.					•	
	Subtract line 2d from line 2c			 		0	
3	Complete 3a, b, or c for the						
	alternative test relied upon				,		
а	"Assets" alternative test—enter:		/	'		_	
	(1) Value of all assets		/	<u></u>		0	
	(2) Value of assets qualifying under						
_	section 4942(j)(3)(B)(i)				ļ	0	
b	"Endowment" alternative test—enter 2/3		/		l		
	of minimum investment return shown in		/				
	Part X, line 6, for each year listed					0	
С	"Support" alternative test—enter:		/				
	(1) Total support other than gross		/				
	investment income (interest, dividends, rents, payments on	/	1				
	securities loans (section	/					
	512(a)(5)), or royalties)				9	0	
	(2) Support from general public and 5 or more exempt						
	organizations as provided in						
	section 4942(j)(3)(B)(iii)					0	
	(3) Largest amount of support from						
	an exempt organization					0	
	(4) Gross investment income	./	'			0	
Part	XV Supplementary Information	n (Complete thi	s part only if th	ne foundation ha	id \$5,000 or more	e in assets at	
	any time during the year—	see instruction	s.)				
1	Information Regarding Foundation M	anagers:					
а	List any managers of the foundation wh					oundation	
	before the close of any tax year (but on	ly if they have cont	tributed more than	\$5,000). (See sect	ion 507(d)(2).)		
					•		
b	List any managers of the foundation wh	o own 10% or mor	e of the stock of a	corporation (or an	equally large portion	of the	
	ownership of a partnership or other enti	ty) of which the fou	undation has a 109	% or greater interes	t.		
2	Information Regarding Contribution,	Grant, Gift, Loan,	Scholarship, etc	., Programs:			
	Check here ▶ 🛛 If the foundation on				ations and does not	accept	
	unsolicited requests for funds. If the fou						
	conditions, complete items 2a, b, c, and	d. See instruction	S.				
а	The name, address, and telephone num	ber or email addre	ess of the person t	to whom application	s should be address	sed	
-							
OFR/	A WEINBERGER 751 WINTHROP AVEN	UE TEANECK . N	J 07666				
	The form in which applications should be			terials they should i	nclude:		
•	•, • • • • • • • • • • • • • • • • • •			•	•		
LETT	ERS OF RECOMMENDATIONS AND DI	ESCRIPTIONS OF	ACTIVITIES				
	Any submission deadlines:						
NON	-						
d	Any restrictions or limitations on awards	s, such as by geog	raphical areas, ch	aritable fields, kınds	of institutions, or ot	her	
	factors.						

NONE

Form 990-PF (2019)

Total

Part X	V Supplementary Information (contin	ued)				- Lugo II
3 (V Supplementary Information (contine Grants and Contributions Paid During	the Year or Approve	ed for Fut	ture Payment		
	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount	
1	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	,	
a /	Paid during the year					
FIDELIT	TY CHARITABLE	NONE	NC	AID TO NEEDY		6,174
					:	
	•					
		·			9	
					- 1	
				•		
					3	
					ŀ	
			[
					-	
					ļ	
	Total	· · · · · · · · · ·			▶ ° 3a	6,174
b /	Approved for future payment		[
	•					
		,			ľ	
			ŀ			
				}		
				•		
			1		,	
				1		

0

Pai	t XVI-A Analysis of Income-Producing Ac	tivities				
	r gross amounts unless otherwise indicated.	7	usiness income	Excluded by sect	ion 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue		 	 		
	a				•	
	b			-		
	<u> </u>	·	ļ	 		
	d					
	e					
	·	ļ		 		
_	g Fees and contracts from government agencies			-		
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments .					<u> </u>
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:					-
	a Debt-financed property		ļ. <u></u>			
	b Not debt-financed property				٠ ,	
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			!		ļ
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
	b			ļ		
	c		ļ	<u> </u>		
	d					
	•					
	Subtotal. Add columns (b), (d), and (e)				0	0
	Total. Add line 12, columns (b), (d), and (e)				13	
(See	worksheet in line 13 instructions to verify calculations	s.)			13	
(See	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A	i.) Accomplishm	ent of Exemp	t Purposes		
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations EXVI-B Relationship of Activities to the A Explain below how each activity for which income	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
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(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incomaccomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	
(See Pa	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	s.) Accomplishm ne is reported in c poses (other than	column (e) of Part in by providing fund	t Purposes	I importantly to the	

22-3692106 ZICHRON YEHOSHUA VASHER FOUNDATION Form 990-PF (2019) Page **13** Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No

		ction 501(c) (othe	r than section 501(c)	(3) organizations) or i	n section 527, re	elating to politic	al				
а			orting foundation to	a noncharitable exem	ot organization o	f.			i		
<u> </u>			-						. 1a(1)	X
									1a(X
ь	` '	transactions:								ها اد	
			a noncharitable exer	npt organization					. 1b(1)	X
				ole exempt organization					. 1b(X
				assets							X
	• •		• •								X
			_								X
				p or fundraising solicit							X
_				s, other assets, or pai							$\frac{1}{x}$
c d				nplete the following sch						<u>'</u>	<u> </u>
u				iven by the reporting fo							
	value	in any transaction	or sharing arrangeme	nt, show in column (d)	the value of the o	oods, other asse	ets. or	services r	received.		
(a) Line		(b) Amount involved		hantable exempt organization		escription of transfe				rrangemi	ents
(a) Line	9 no.	(b) Amount involved	(c) Name of none	mantable exempt organization	(4) 0	escription of transit		38000013, 8	ing sharing a	rangome	
	-		· · · · · · · · · · · · · · · · · · ·								
	-+					-					
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_											
2a				ted with, or related to					Шν.	. 🖂	. .
			, , ,	tion 501(c)(3)) or in s	ection 5277				те:	s 🛚	NO
<u>b</u>	If "Ye		following schedule.								
		(a) Name of organ	ization	(b) Type of or	(b) Type of organization			(c) Description of relationship			
			·								
						1			•		
	Under penalties of penury, 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					is true,					
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based of			yer) is based on all information of	<u> </u>			May the IRS discuss this return with the preparer shown below See instructions Yes			
Here				s No							
	Sigi	nature of officer or trus	tee	Date	Title						- U
Daid		Print/Type preparers	s name	Preparer's signature		Date		Check	ır PTIN		
Paid								self-emplo	- ;		
Prepa		Firm's name					Firm's	EIN ▶			
Use (nly	Firm's address Phone no									

Schedule B

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

Department of the Treasury internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Employer identification number

ZICHRON YEHOSHUA VASHI	22-3692106					
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation					
• •	overed by the General Rule or a Special Rule. , (8), or (10) organization can check boxes for both the General Rule and a	Special Rule. See				
General Rule						
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special Rules						
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the " General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
	isn't covered by the General Rule and/or the Special Rules doesn't file Schoot answer "No" on Part IV, line 2, of its Form 990; or check the box on line H					

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
ZICHRON YEHOSHUA VASHER FOUNDATION	22-3692106

	12.100.107.17.01.211.1.00.107.11.1011		ZZ-000Z 100		
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	DR. JUDAH WEINBERGER 751 WINTHROP ROAD TEANECK NJ 07666-2266 Foreign State or Province Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	HANNAH TRUST 1077 YARMOUTH BOCA RATON FL 33434 Foreign State or Province' Foreign Country'	\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3	WEINBERGER FAMILY TRUST 1077 YARMOUTH BOCA RATON FL 33434 Foreign State or Province. Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	, (d) Type of contribution		
	Foreign State or Province Foreign Country.	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Foreign State or Province: Foreign Country:	\$	Person Payroll Oncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Foreign State or Province Foreign Country	\$~	Person Payroll Noncash (Complete Part II for noncash contributions)		