Form 990-PF

EXTENDED TO NOVEMBER 16, 20 Return of Private Foundation 2020

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

Dep	artmer	t of the Treasury		social security numbers on			2013
<u>Inte</u>	rnal Re	venue Service		rs.gov/Form990PF for inst		ormation.	Open to Public Inspection
		idar year 2019 or tax year	r beginning		, and ending	T. 	
N	ame o	f foundation				A Employer identification	on number
_]	MAR	Y OWEN BORDE	EN MEMORIAL	FUND		13-613713	7
		and street (or P O box number i		•	Room/suite	B Telephone number	
_		LACKPOINT HO				732-741-4	
	-	own, state or province, cou SON , NJ 077		ostal code		C If exemption application is	pending, check here
G	Check	all that apply:	Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organization	ns, check here
			Final return	Amended return			
			Address change	Name change		2 Foreign organizations n check here and attach of	computation
H		type of organization; { ction 4947(a)(1) nonexem	X Section 501(c)(3) ex	kempt private foundation Other taxable private founda	ation OG	E If private foundation st under section 507(b)(
I F		arket value of all assets at o			X Accrual	F If the foundation is in a	
(from F	Part II, col. (c), line 16)	OI	her (specify)		under section 507(b)(
	<u> </u>	15,226	5 , 3 4 1 . (Part I, colun	nn (d), must be on cash bas	is.)	· · · · · · · · · · · · · · · · · · ·	
<u>P</u>	<u>art l</u>	Analysis of Revenue an (The total of amounts in columecessarily equal the amoun	d Expenses mns (b), (c), and (d) may not its 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, grant				N/A	
	2	Check X if the foundation					<u> </u>
X	3	Interest on savings and tempo cash investments	orary	63,727.	63,727.		STATEMENT 1
)	4	Dividends and interest fro	om securities	209,335.	207,588.		STATEMENT 2
	5a	Gross rents					
		Net rental income or (loss)		242 526			
9	g ba	Net gain or (loss) from sale of Gross sales price for all assets on line 6a	2,608,568.	342,536.		RECT	= -
Rovenie	7	assets on line 6a Capital gain net income (from			342,536.		ان-
å	2 8	Net short-term capital gai	•		342,330.	F NOV-09	
	9	Income modifications			· · · · · · · · · · · · · · · · · · ·	 古	
	10a	Grace cales less returns					155
	Ь	Less Cost of goods sold				UGULI	ارن یه
	c	Gross profit or (loss)			<u> </u>		
	11	Other income					-
_	12	Total. Add lines 1 throug		615,598.	613,851.		50 500
	13	Compensation of officers, dire		65,000.	6,500.		58,500.
	14	Other employee salaries a Pension plans, employee	-				
ď	15	Legal fees	Delicitis				
0) 'b	Accounting fees	STMT 3	7,500.	0.		7,500.
Fynenses	C	Other professional fees	STMT 4	96,364.	96,364.		0.
		Interest					
3 1	18	Taxes	ŞTMT 5	38,542.	4,895.		4,630.
	19	Depreciation and depletio	n				
Administrative	20	Occupancy					
•	21	Travel, conferences, and	meetings				
, סמפ		Printing and publications	CIDMID 6	4 707	306		4 401
į	23	Other expenses	STMT 6	4,707.	306.	 	4,401.
Operation	24	Total operating and adm expenses. Add lines 13 th		212,113.	108,065.		75,031.
ć	25	Contributions, gifts, grant	-	665,852.	200,000.		665,852.
	1	Total expenses and disb		303,000.			
		Add lines 24 and 25		877,965.	108,065.		740,883.
	27	Subtract line 26 from line	12:				
	a	Excess of revenue over expens	ses and disbursements	-262,367.	·		
	b	Net investment income (f negative, enter -0-)		505,786.		
	1	Adjusted net income (if no	enative enter (P-)	J . '		N/A	J

Form **990-PF** (2019)

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29		
	(must agree with end-of-year figure reported on prior year's return)	1	10,831,382
2	Enter amount from Part I, line 27a	2	-262,367
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	10,569,015.
5	Decreases not included in line 2 (itemize)	5	0 .
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	10,569,015

Form **990-PF** (2019)

Form 990-PF (2019) MARY OWEN BORDEN MEMORIAL FUND

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				1 P-P	v acquired urchase lonation	(c) Date a		(d) Date sold (mo., day, yr.)
1a ·	·						· · · · · · · · · · · · · · · · · · ·	
b SEE ATTACHED	STATEMENT							
C								
<u>d</u>		· · · · ·						
<u>e</u>				<u> </u>				
(e) Gross sales price	(f) Depreciation a (or allowabl		Cost or other basis s expense of sale				ain or (loss s (f) minus	
a b						· -	<u></u>	
c c								
d								
e 2,608,568.			2,266,03	32.	1100 0 100			342,536
Complete only for assets showing	gain in column (h) ai	nd owned by the foundati			() Gains (C	ol. (h) gaın	minus
(i) FMV as of 12/31/69	(j) Adjusted b as of 12/31/	asis (k)	Excess of col. (i) er col. (j), if any		có	i. (k), but r	not less that (from col. (n -0-) o r
a								
b								
C								
d								
e								342,536
Capital gain net income or (net cap	oital loss) { If ga	ain, also enter in Part I, lir oss), enter -0- in Part I, lii	ne 7 ne 7	} 2	2			342,536
Net short-term capital gain or (loss	-							
If gain, also enter in Part I, line 8, o		15 1222(J) and (J).)				
If (loss), enter -0- in Part I, line 8					3		N/A	
Part V Qualification Ur	nder Section 49	940(e) for Reduce	ed Tax on Net	t Inves	tment Inc	ome		
section 4940(d)(2) applies, leave the Vas the foundation liable for the section "Yes," the foundation doesn't qualify	on 4942 tax on the dis	•	-	rıod?				Yes X No
Enter the appropriate amount in e	ach column for each y	ear; see the instructions	before making any e	entries.				
(a) Base period years Calendar year (or tax year beginnin	g in) Adjusted	(b) qualifying distributions	Net value of no	(c) oncharital	ble-use assets		Distrit (col. (b) div	(d) oution ratio yided by col. (c))
2018		802,258			241 <u>,104</u>			.05633
2017		715,377			<u>586,355</u>			.05226
2016		743,625			796,619			.05811
2015		845,195			986,307			.06043
2014		<u>852,379</u>		14,3	<u>315,963</u>	<u> </u>		.05954
Total of line 1, column (d)						2		.28668
Average distribution ratio for the 5 the foundation has been in existen	•		5.0, or by the numb	er of yea	rs	3	<u> </u>	.05733
Enter the net value of noncharitable	e-use assets for 2019	from Part X, line 5				4_	1	4,443,346
6 Multiply line 4 by line 3						5		828,138
Enter 1% of net investment incom	e (1% of Part Lline 27	7h)				6		5,058
	0 (170 OI 1 ait 1, iiii 6 27	·,				7	,	833,196
' Add lines 5 and 6								
Enter qualifying distributions from						8		740,883
If line 8 is equal to or greater than	line 7, check the box i	n Part VI, line 1b, and coi	mplete that part usin	ng a 1% t	tax rate.			

	osses for Tax on Investment Income		/L\ !!a	 	
(a) List ar 2-story I	nd describe the kind(s) of property so brick warehouse; or common stock, t	old, e.g., real estate, 200 shs. MLC Co.	P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SCHEDULE ATTA	CHED		P		
b SCHEDULE ATTAC			P		
c SCHEDULE ATTAC			P		
d SCHEDULE ATTAC			P		
e CLASS ACTION S			P		
f CAPITAL GAINS					
9	DIVIDUNED				
h			· · · · · · · · · · · · · · · · · · ·		
<u> </u>					
				 	
<u>k</u>					
<u> </u>					
<u>n</u>					
0					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h (e)) Gain or (loss) plus (f) minus (g)	
a 110,659		122,938.			-12,279.
b 314,403		248,529.			65,874.
c 861,705		898,897.			-37,192.
d 1,321,239		995,668.			325,571.
e 401					401.
f 161					161.
9	-	1			
h					
	-				
<u></u>					
16		 			
<u>k</u>		<u> </u>			
<u> </u>	-		 	· · · · · · · · · · · · · · · · · · ·	
<u>m</u>					
n					
0		the females as 10/01/00			
Complete only for assets show	ring gain in column (h) and owned by		(I) LO	sses (from col. (h)) of col. (h) gain over	r col (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)	but i	not less than "-0-")	COI. (K),
(1)	as of 12/31/69	over col. (j), if any			10.050
<u>a</u>					<u>-12,279.</u>
b					<u>65,874.</u>
C					<u>-37,192.</u>
d	<u> </u>				325,571.
e					401.
f					161.
9					
h					
1					
k					
					
<u>m</u>	 	 			-
<u>n</u>	 	 			
0		L			 _
		er in Part I, line 7			242 526
2 Capital gain net income or (net or)	capital loss) (If (loss), enter "-	er in Part I, line 7 -0-" in Part I, line 7	2		<u>342,536.</u>
3 Net short-term capital gain or (le	oss) as defined in sections 1222(5) a	ind (6):			
If gain, also enter in Part I, line 8	3, column (c).)		_	
If (loss), enter "-0-" in Part I, line	2.8	J	3	N/A	

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1		990-PF (2019) MARY OWEN BORDEN MEMORIAL FUND 13-613	<u>7137</u>		² age 4	-
Date of ruling or determination letter:			instru	ctio	ns)	-
b Domestinochundations that meet the section 4947(a) requirements in Part V, check here	1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
b Domestinochundations that meet the section 4947(a) requirements in Part V, check here		Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	,			•
of Part I, line 27b a 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-) 3 Add lines 1 and 2 5 Subtitle A (incomp) 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 2 are on liss, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If 2 are on liss, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If 2 are on liss, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If 2 are on liss, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If 2 are on liss, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If 2 are on liss, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If 2 are on line 5 line 6 li	b	Domestic-foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	<u>0,1</u>	<u> 16.</u>	
2 Tax under section 511 (Gomestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 Add lines 1 and 2 4 Subtitle A (Innome) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment tineone. Subtract line 4 from line 3. If zero or less, enter -0-) 5 Tax based on investment tineone. Subtract line 4 from line 3. If zero or less, enter -0-) 5 Tax based on investment tineone. Subtract line 4 from line 3. If zero or less, enter -0-) 6 Lement for engine organizations - tax withheld at source 6 Documents: 8 2019 estimated tax payments and 2018 overapyment or detected to 2019 6 Exempt foreign organizations - tax withheld at source 6 Document organizations - tax withheld at source 6 Document organizations - tax withheld at source 7 Total credits and payments. Add lines 6a through 6d 8 Either any penalty for underpayment of estimated tax. Deck here In the 10 Document of the 1						
A Add lines 1 and 2 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 3.11 zero or less, enter -0- 6 C redistic*Payments: 2 2019 estimated tax payments and 2018 overpayment credited to 2019 £ Exempt foreign organizations - tax withheld at source 7 Tax pate with application for extension of tume to lie (Form 8868) 6 0 0. 6 0 0. 6 0 0. 6 0 0. 6 0 0. 7 Total redistion and payments. Add lines 6 although 6d 8 2. 9 Tax due If this total of lines 5 and 8 is more than line 7, relier amount overed 9 Tax due If this total of lines 5 and 8 is more than line 7, relier amount overed 9 Tax due If this total of lines 5 and 8 is more than line 1, relier amount overed 9 Tax due If this total of lines 5 and 8 is more than line 1, relier amount overed 10 Overpayment. Illino 7 is more than his total of lines 5 and 8, either the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax line 1 to 1. 12 During the tax year, did the foundation attempt to influence any nationals, state, or local legislation or did it participate or intervene in any political campaign? 12 During the tax year, did the foundation attempt to influence any nationals, state, or local legislation or did it participate or intervene in any opticutal campaign? 14 Dut signed more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 13 Line answer is "Yes" to 1 or 1th, attach a detailed description of the activities. 14 During the tax year, did the foundation Auring the year (either directly or indirectly) for political appenditure tax imposed or individual or intervene in any opticutal campaign. 15 Line 1 Line 2 Line	C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)				
A Add lines 1 and 2 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 3.11 zero or less, enter -0- 6 C redistic*Payments: 2 2019 estimated tax payments and 2018 overpayment credited to 2019 £ Exempt foreign organizations - tax withheld at source 7 Tax pate with application for extension of tume to lie (Form 8868) 6 0 0. 6 0 0. 6 0 0. 6 0 0. 6 0 0. 7 Total redistion and payments. Add lines 6 although 6d 8 2. 9 Tax due If this total of lines 5 and 8 is more than line 7, relier amount overed 9 Tax due If this total of lines 5 and 8 is more than line 7, relier amount overed 9 Tax due If this total of lines 5 and 8 is more than line 1, relier amount overed 9 Tax due If this total of lines 5 and 8 is more than line 1, relier amount overed 10 Overpayment. Illino 7 is more than his total of lines 5 and 8, either the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax line 1 to 1. 12 During the tax year, did the foundation attempt to influence any nationals, state, or local legislation or did it participate or intervene in any political campaign? 12 During the tax year, did the foundation attempt to influence any nationals, state, or local legislation or did it participate or intervene in any opticutal campaign? 14 Dut signed more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 13 Line answer is "Yes" to 1 or 1th, attach a detailed description of the activities. 14 During the tax year, did the foundation Auring the year (either directly or indirectly) for political appenditure tax imposed or individual or intervene in any opticutal campaign. 15 Line 1 Line 2 Line					0.	_
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6. CreditsPayments: 2 2019 estimated bax payments and 2018 overpayment credited to 2019 5. Exempt foreign organizations - tax withheld at source 6. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	3	Add lines 1 and 2	1	0,1	16.	_
5 Tax based on investment income: Subtract line 4 from line 3. If zero or less, enter -0- 6 CreditsPyments: a 2019 estimated tax payments and 2018 overpayment credited to 2019 b Exempt foreign organizations - tax withheld at source Tax pad with application for extension of time to the (Form 8868) d Backup withholding erroneously withheld Total credits and payments. Add lines as through 60 8 Enter any genalty for underpayment of estimated tax. Check here	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				
6 Credite/Payments: a 2019 estimated tax payments and 2018 overpayment credited to 2019 b Exempt forceign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 0. 6 0. 6 0. 6 0. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 9 Tax due if the total of lines 5 and 8 is more than file 10, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 9 Tax due if the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Total 10 Total 11 Total 12 Total 11 Total 1	5		1	0,1	16.	_
a 2019 estimated tax payments and 2018 overpayment credited to 2019 b Exempt foreign organizations - Tax withheld at source 1 Tax paid with application for extension of time to file (Form 8968) d Backup withholding arroneously withheld 1 Total profits and payments. Add limes 6a through 6d 8 Enter any genalty for underpayment of estimated tax. Chock here X if Form 2220 is attached 9 Tax due If the total of hines 5 and 8 is more than line 7, enter a mount ower 10 Overpayment. Hine 7 is more than the total of himse 5 and 8, enter the amount ower and 10 to be; Credited to 2020 estimated tax ➤ 16 , 132 . Refunded ➤ 11 10 Part VII-A 1 Statements Regarding Activities 11 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? 13 During the tax year, did the foundation in connection with the activities. 14 During the tax year, did the foundation in connection with the activities. 15 During the tax year, did the foundation in connection with the activities. 16 Did it is gend more than \$100 during the year (either directly) for political purposes? See the instructions for the definition life form 1120-POL for this year? 2 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 2 In Year, a flating the production of the activities. 2 In Year and the foundation in connection with the activities. 3 As the foundation in during the year for political expenditure tax imposed on foundation managers. ➤ \$	6	Credits/Payments:				
b Exempt foreign organizations - fax withhold at source 0 Tax paid with application for extension of time to file (Form 8868) 6 Backup withholding erroneously withhold 7 Total credits and payments. Add lines 8 bit through 6d 8 Chief any penalty for underspayment of estimated tax. Check here [X] if Form 2220 is attached 8 2. 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax. ► 16 1, 13.2 . Refunded 11 to 0. Part VII-A Statements Regarding Activities 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inflerior any political campagn? bid it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the activities. 1 bid it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition distributed by the foundation in connection with the activities. 1 c Out the toundation in Form 112-POIL for this year? 2 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► S O. (2) On foundation managers. ► S O. See his intermediated description of the activities. 1 to X 1 Has the foundation engaged in any activities that have not previously been reported to the IRS? If Yes, attach a detailed description of the activities. 1 Has the foundation engaged in any activities that have not previously been reported to the IRS? If Yes, attach ha detailed description of the activities. 1 Has the foundation engaged in any activities that have not previously been reported to the IRS? If Yes, attach ha betailed description of the activities. 1 Has the foundation engaged in any activities that have not previously been reported to the IRS? If Yes,	a					
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroreously withhold 7 Total (redists and payments. Add lines Se through 6d 8 Enter any penalty for underpayment of estimated tax. Check here 【X if Form 2220 is attached 9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter that amount ower line 10 to be; Gredified to 2200 estimated tax 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be; Gredified to 2200 estimated tax 12						
d Backup withholding erroneously withhold 7 Total redits and payments. Add hins 6a through 60 8 Enter any penalty for undergayment of estimated tax. Check here □ I inferred 220 is attached 9 Tax due If the total of lines 5 and 8 is more than hine 7, enter amount owed 10 Overpayment. If fine 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be; Gredited to 2020 setimated tax 11 Enter the amount of line 10 to be; Gredited to 2020 setimated tax 12 In Enter the amount of line 10 to be; Gredited to 2020 setimated tax 13 During the tax year, of the foundation attempt to influence any national, state, or local legislation or did it participate or untervene in any political campaign? 1a During the tax year, of the foundation more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 2 Did the foundation file Farm 1128-POL for this year? 3 Has the foundation file Farm 1128-POL for this year? 4 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 4 The amount (if any) of tax on political expenditure (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ O. 2 4 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 11 "Yes," attach the statement required by <i>General Instruction T</i> 5 Ar the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 9 By anguage in the governing instrument, or substantial contraction during the year? 11 "Yes," attach the states to which the foundation furnished a copy of form 999-PF to						
7 Total credits and payments. Add lines 6 attrough 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☑ if Form 2220 is attached 9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 16 , 132 . Refunded ▶ 11 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 16 , 132 . Refunded ▶ 11 12 During the tax year, dot the foundation attempt to influence any national, state, or local legislation or did it participate or untervene in any political campaign? 1a During the tax year, dot the foundation attempt to influence any national, state, or local legislation or did it participate or untervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities. 1c Did the foundation file Form 1120-POL for this year? 2 de finite the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 1 (1) On the foundation. Ne S O. (2) On foundation managers. ► S O. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 1 If "Yes," attach a detailed description of the activities. 3 Has the foundation engaged in any activities that have not previously been reported to the IRS? 1 If "Yes," attach a detailed description of the activities. 3 Has the foundation engaged in any activities that have not previously been reported to the IRS? 1 If "Yes," attach the statement required by General Instruction T or bylaws, or order samilar instruments? If "Yes, attach a conformed dony of the changes 4 If "Yes," has if filed a tax return on Form 990-T for this year? 5 Was there a liquidation, ferrimation, dissolution, or substantial contribution, or substantial con						
8 Enter any penalty for underpayment of estimated tax. Check here \(\textbf{X} \) if Form 2220 is attached \(\textbf{y} \) 9 13 at due if the total of lines 5 and 8 is more than line 7, enter amount owned \(\textbf{y} \) 10 16,132. \(\textbf{y} \) 10 16,132. \(\textbf{y} \) 10 16,132. \(\textbf{y} \) 11 Enter the amount of line 10 to be; Circelfied to 2020 estimated tax \(\textbf{y} \) 16 17,132. \(\textbf{y} \) 11 Enter the amount of line 10 to be; Circelfied to 2020 estimated tax \(\textbf{y} \) 16 18,132. \(\textbf{Refunded} \) 11 0. \(\textbf{Part VII-A} \) Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly) for political purposes? See the instructions for the definition if it is a X to 15 and			2	6,2	50.	_
Solid Tax due If the total of lines 5 and 8 is more than the 10 at lotines 5 and 8, enter the amount overpaid 10 16, 132. 10 10 16, 132. 10 10 10 10 10 10 10 1						_
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b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X						
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of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X						
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year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	_		QD.	Λ		- /
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	9				v	
10 Bid any persona become substantial contributors contriguing the tax year in 163, attach a sociedate tering their flattice and additional	40		-		Y	. –
	10)-PF	(2019	- \

Form 990-PF (2019)

Х

3b

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Schedule C, to determine if the foundation had excess business holdings in 2019.)

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 990-PF (2019) MARY OWEN BORDEN MEMORIA	L FUND	Domitod (13-61371	37_	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4/20 May be i	required (continu	uea)	Ye	s No
 5a During the year, did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section) (2) Influence the outcome of any specific public election (see section 4955); or 			s X No	10	3 110
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio 4945(d)(4)(A)? See instructions	n described in section	Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or t	for Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	in Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?	Ŋ	I/A	s Mo		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				:
a personal benefit contract?		Ye	s X No		
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		Ye	s X No	71	
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 \$	61,000,000 in remuneration o	r 	s X No		
excess parachute payment(s) during the year? Part VIII Information About Officers. Directors. Trust	aca Foundation Ma				
Paid Employees, and Contractors		magers, migni	/ 		
1 List all officers, directors, trustees, and foundation managers and t		(c) Compensation	(d) Contributions to	(a) F	xpense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uooou	nt, other vances
SEE STATEMENT 9		65,000.	0.		0.
				•	
			-		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) F	Ynenco
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	accou	xpense nt, other vances
NONE					
			<u> </u>	<u> </u>	
					· ·
Total number of other employees paid over \$50,000			Forn	990-P	<u>0</u> F (2019)

Form 990-PF (2019) MARY OWEN BORDEN MEMORIAL FU		5137137 Page 7
Part VIII Information About Officers, Directors, Trustees, F Paid Employees, and Contractors (continued)	oundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If no	ne, enter "NONE."	•
. (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relev	ant statistical information such as the	<u> </u>
number of organizations and other beneficiaries served, conferences convened, research pa	pers produced, etc.	Expenses
1 N/A		
2		
·		
3		•
		•
		-
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the ta	year on lines 1 and 2.	Amount
1 <u>N/A</u>		• •
		4
2		
All other program related investments. Can instructions		
All other program-related investments. See instructions.		
·		
Fotal Add lines 1 through 3		

4940(e) reduction of tax in those years.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	indations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	14,634,690.
Ь	Average of monthly cash balances	1b	28,605.
C	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	14,663,295.
	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	0.
3	Subtract line 2 from line 1d	3	14,663,295.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	219,949.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,443,346.
6	Minimum investment return. Enter 5% of line 5	6	722,167.
_	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
	foreign organizations, check here 🕨 🔛 and do not complete this part.)	,	
1	Minimum investment return from Part X, line 6	1	722,167.
2a	Tax on investment income for 2019 from Part VI, line 5	<u>.</u>]	
b	Income tax for 2019. (This does not include the tax from Part VI.)	↓ .	
C	Add lines 2a and 2b	2c	10,116.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	712,051.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	712,051.
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	712,051.
P	art 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	740,883.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	740,883.
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	<u> </u>
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	740,883.
	Nets: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	qualifies fo	r the section

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
Distributable amount for 2019 from Part XI, line 7				712,051.
·				, 12,0011
2 Undistributed income, if any, as of the end of 2019			0.	
a Enter amount for 2018 only b Total for prior years:				
g rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014 155, 257.				
b From 2015 169,910.				
c From 2016 112,312.				
d From 2017 715,377.				
e From 2018 109,672.				
f Total of lines 3a through e	1,262,528.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 740,883.			_	
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			1	
(Election required - see instructions)	0.			710 051
d Applied to 2019 distributable amount				712,051,
e Remaining amount distributed out of corpus	28,832.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				,
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,291,360.			<u> </u>
b Prior years' undistributed income. Subtract				' 3
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must	,			•
be 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)	0.			
8 Excess distributions carryover from 2014	455 055			
not applied on line 5 or line 7	155,257.			
9 Excess distributions carryover to 2020.	1 126 102			
Subtract lines 7 and 8 from line 6a	1,136,103.			
0 Analysis of line 9:				
a Excess from 2015 169,910.				
b Excess from 2016 112, 312.				
c Excess from 2017 715,377.				
d Excess from 2018 109,672.			}	
e Excess from 2019 28,832.				F 000 PE (0010)

		EMORIAL FUN		13-61	37137 Page 10
Part XIV Private Operating F		. ,	A, question 9)	N/A	
1 a If the foundation has received a ruling o		· · · · · · · · · · · · · · · · · · ·			
foundation, and the ruling is effective fo			▶ └	, , , , , , , , , , , , , , , , , , ,	
b Check box to indicate whether the found	lation is a private operatin	g foundation described in		4942(J)(3) or49	(42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	7,0040	
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					,
b 85% of line 2a		· · · · · · · · · · · · · · · · · · ·			
c Qualifying distributions from Part XII,		1			
line 4, for each year listed					
d Amounts included in line 2c not					,
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c		`\			
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets			`\		
, ,					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter			`		,
2/3 of minimum investment return					
shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					···
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	······································				
an exempt organization	ļ				
(4) Gross investment income	<u> </u>		-		
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	ore in assets
at any time during t					
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	-	than 2% of the total cont	ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed n			•		
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (or an equally large port	on of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gıft, Loan,	Scholarship, etc., Pr	ograms:		
Check here 🕨 🔙 if the foundation of	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited requ	iests for funds. If
the foundation makes gifts, grants, etc.,	, to individuals or organiza	ations under other condit	ons, complete items 2a	, b, c, and d.	
a The name, address, and telephone num	ber or email address of th	ne person to whom applic	ations should be addres	ssed:	
QUINCY A.S. MCKEAN,	III, 732-74	1-4645			
4 BLACKPOINT HORSESH					
b The form in which applications should t			rould include:		
PLEASE CONTACT THE P				TIONAL INFOR	MATION
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	
GRANTS ARE PRIMARILY					D MERCER
COUNTIES OF NEW JERS					
923601 12-17-19					Form 990-PF (2019)

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	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	 	
a Paid during the year				
CHEDULE ATTACHED	NONE	PUBLIC CHARITY	FOR OPERATIONS	
BLACKPOINT HORSESHOE				
UMSON, NJ 07760				665,852,
		 		
•				
		· · · · · · · · · · · · · · · · · · ·		
		<u> </u>	<u> </u>	
Total			▶ 3a	665,852
b Approved for future payment				
NONE				
· · · · · · · · · · · · · · · · · · ·				·
· · · · · · · · · · · · · · · · · · ·				
		<u> </u>		
Total	-		▶ 3b	0 orm 990-PF (2019

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ided by section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a		, i			
b				, , , , , , , , , , , , , , , , , , , ,	
c					
d					,
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					· · · · · · · · · · · · · · · · · · ·
investments	1		14	63,727.	
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:		· · · · · · · · · · · · · · · · · · ·			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other				-	
than inventory			18	342,536.	
9 Net income or (loss) from special events				312,3333	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
С					
d		,			
e	<u> </u>				
12 Subtotal. Add columns (b), (d), and (e)		0.		615,598.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	615,598.
(See worksheet in line 13 instructions to verify calculations.)					
	a the Ass	ammiliah maant of Ev		4 Durmages	
Part XVI-B Relationship of Activities t	to the Acc	omplishment of Ex	emp	t Purposes	
Line No Explain below how each activity for which inco	me is reported	ın column (e) of Part XVI-A	contrib	outed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than					•
				·	

Form 990-PF (2019) MARY OWEN BORDEN MEMORIAL FUND 13-6137137 Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did	the or	ganization directly or indir	ectly engage in any	of the followin	ig with any other organizat	ion described in sect	ion 501(c)	i	Yes	No
(otl	ner tha	n section 501(c)(3) organ	izations) or in sectio	n 527, relating	g to political organizations?	?				
a Tra	nsfers	from the reporting founda	ation to a noncharital	ble exempt or	ganization of:					
(1)	Cash							1a(1)		X
(2) Other assets										X
b Oth	er tran	sactions:								
(1) Sales of assets to a noncharitable exempt organization										_X
(2) Purchases of assets from a noncharitable exempt organization										X
(3) Rental of facilities, equipment, or other assets										_X
(4)	Reiml	bursement arrangements						1b(4)		X
(5)	Loans	s or loan guarantees						1b(5)		X
(6)	Perfo	rmance of services or mei	mbership or fundrais	sing solicitatio	ns			1b(6)		_X
c Sha	aring of	f facilities, equipment, mai	ılıng lısts, other asse	ts, or paid em	ployees			1c		_X
d If th	ne ansv	ver to any of the above is '	"Yes," complete the f	following sche	dule. Column (b) should a	lways show the fair n	narket value of the goods,	other ass	ets,	
or s	services	s given by the reporting fo	oundation. If the four	ndation receive	ed less than fair market val	lue in any transaction	or sharing arrangement,	show in		
col	umn (d) the value of the goods, o	other assets, or serv	ices received.						
a) Line n	0	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	of transfers, transactions, and	sharing ar	angeme	nts
				N/A						
				_						
			-							
						_				
,						<u></u>				
				-						
2a Isti	ne foun	idation directly or indirect	ly affiliated with, or r	elated to, one	or more tax-exempt organ	izations described				
		501(c) (other than section					[Yes	X] No
b If "Y	'es," co	mplete the following sche	edule.							
(a) Name of organization (b) Type of organization							(c) Description of relations	ship		
		N/A								
	Under	penalties of perjury, I declare to	hat I have examined this	return, includin	g accompanying schedules and	statements, and to the	best of my knowledge	ay the IRS o	iscuss th	his
Sign	and be	lief, it is true, correct, and com	plete Declaration of pre	parer (other than	taxpayer) is based on all inform	EXECUT	ret	urn with the	prepare	er
Here		ري وي	Wylean	L.	16/27/2020	DIRECT		X Yes		No
	Sign	ature of officer or trustee			Date	Title				
		Print/Type preparer's nai	me	Preparer's si		Date	Check If PTIN		_	
						1	self- employed			
Paid Preparer		DAN A. DIERS		1 da _ 1		10/20/20	LO/20/20 PO		543	
		Firm's name ASH & PARSON				Firm's EIN ▶ 13-1		0110543		
Use C		Tamonano P ADII	" THIDON	- 11115]	J J J 4	- 4	
		Firm's address ► 1 2 '	2 ፑልሮጥ / 21	משם כווא	EET, SUITE 1	507	 			
						.507	Phone no 212 0	52_1	250	
	_	<u> NEV</u>	W YORK, N	T TOTO	0-1333		Phone no. 212-9	orm 990		2040
							F	いいこうさん	,~FT (ZU (9)

FORM 990-PF INTERE	ST ON S	SAVINGS	AND TEM	PORARY	CASH I	NVESTMENTS	STATEMENT	1
SOURCE			(A) REVENUE PER BOOKS			(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME	
LESS: ACCRUED INTER LESS: AMORTIZATION PREMIUM STATE STREET	-5,927. -19,533. 89,187. 63,727.		-5,927. -19,533. 89,187. 63,727.					
TOTAL TO PART I, LI						<u> </u>		
FORM 990-PF	DIVII	DENDS A	ND INTER	EST FR	OM SECU	RITIES	STATEMENT	
SOURCE	GROS AMOU		CAPITAL GAINS DIVIDEND	R.	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
STATE STREET	209	,496.	16	209,335.		207,58	18.	
TO PART I, LINE 4 209,496.		161.		209,335	207,58			
FORM 990-PF		ACCOUNTI	NG FEE	S		STATEMENT	3	
DESCRIPTION			(A) PENSES R BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
ACCOUNTING FEES			7,500.		0.		7,50	0.
TO FORM 990-PF, PG	1. LN 1		7,500.		0.		7,50	0.

FORM 990-PF	OTHER PROFES	SIONAL FEES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
INVESTMENT COUNSEL FEES	96,364.	96,364.		0.		
TO FORM 990-PF, PG 1, LN 16C	96,364.	96,364.		0.		
FORM 990-PF	TAX	ES	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PAYROLL TAXES FOREIGN TAX FEDERAL EXCISE TAX	5,144. 4,381. 29,017.	4,381.		4,630.		
TO FORM 990-PF, PG 1, LN 18	38,542.	4,895.		4,630.		
FORM 990-PF	OTHER E	XPENSES	S	ratement 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PAYROLL PROCESSING FEE OFFICE EXPENSE FILING FEE DUES AND SUBSCRIPTIONS	1,905. 1,153. 9. 1,640.	191. 115. 0. 0.		1,714. 1,038. 9. 1,640.		
TO FORM 990-PF, PG 1, LN 23	4,707.	306.		4,401.		

FORM 990-PF	CORPORATE STOCK		STAT	EMENT	7
DESCRIPTION		BOOK VALUE		MARKET ALUE	,
SCHEDULES ATTACHED		7,955,03	18. 12	,555,47	4.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	7,955,03	18. 12	,555,47	4.
FORM 990-PF	CORPORATE BONDS		STAT	EMENT	 8
DESCRIPTION		BOOK VALUE		MARKET ALUE	!
SCHEDULES ATTACHED		1,668,55	57. 1	,725,43	7.
TOTAL TO FORM 990-PF, PART II,	LINE 10C	1,668,55	57. 1	1,725,437.	
	LIST OF OFFICERS, D AND FOUNDATION MANA		STAT	EMENT	9
TRUSTEES A	AND FOUNDATION MANA TITLE AND	COMPEN-	EMPLOYEE BEN PLAN	EXPENS	 SE .
NAME AND ADDRESS LINDA B MCKEAN P.O. BOX 313	AND FOUNDATION MANA	GERS	EMPLOYEE	EXPENS ACCOUN	 SE .
	TITLE AND AVRG HRS/WK PRESIDENT	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENS ACCOUN	SE . IT
NAME AND ADDRESS LINDA B MCKEAN P.O. BOX 313 RUMSON, NJ 07760 VINCE MYERS 11 MANSION HILL DRIVE	TITLE AND AVRG HRS/WK PRESIDENT 0.50 TRUSTEE	COMPEN- SATION 0.	EMPLOYEE BEN PLAN CONTRIB	EXPENS ACCOUN	SE . IT
NAME AND ADDRESS LINDA B MCKEAN P.O. BOX 313 RUMSON, NJ 07760 VINCE MYERS 11 MANSION HILL DRIVE EWING, NJ 08628 QUINCY A.S. MCKEAN III 4 BLACKPOINT HORSESHOE	TITLE AND AVRG HRS/WK PRESIDENT 0.50 TRUSTEE 0.50 EXECUTIVE DIRE	COMPEN-SATION 0. CTOR	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENS	SE. IT
NAME AND ADDRESS LINDA B MCKEAN P.O. BOX 313 RUMSON, NJ 07760 VINCE MYERS 11 MANSION HILL DRIVE EWING, NJ 08628 QUINCY A.S. MCKEAN III 4 BLACKPOINT HORSESHOE RUMSON, NJ 07760 JULIE KENNEDY 84 PINE CREEK AVENUE	TITLE AND AVRG HRS/WK PRESIDENT 0.50 TRUSTEE 0.50 EXECUTIVE DIRE 7.00	COMPEN- SATION 0. CTOR 65,000.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENS	0. 0.

MARY OWEN BORDEN MEMORIAL FUND			13-6	5137137
ZOE BUNNELL 166 EAST 61ST STREET, APT 8-N NEW YORK, NY 10065	TRUSTEE 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	65,000.	0.	0.