## Form **990-PF**

## Return of Private Foundation

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

OMB No. 1545-0047 2019

Department of the Treasury Internal Revenue Scrvice

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

Open to Public Inspection ▶ Qo to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2019 or tax year beginning . 2019, and ending . 20 A Employer identification number Name of foundation Homasote Foundation 21-6018542 Number and street (or P.O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (609)883-3300 932 Lower Ferry Road City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here West Trenton NJ 08628 G Check all that apply: 
initial return Initial return of a former public charity D 1. Foreign organizations, check here ☐ Final return Amended return 2. Foreign organizations meeting the 85% test. ☐ Address change □ Name change check here and attach computation H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here . . . Section 4947(a)(1) nonexempt charitable trust 

Other taxable private foundation Fair market value of all assets at J Accounting method: ☐ Cash 🗵 Accrual F If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here (Part I, column (d), must be on cash basis.) line 16) ► \$ 318,674. Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income income purposes (cash basis only) the amounts in column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► X if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 9,701. Dividends and interest from securities . . . . 9,701 b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 21,621. Gross sales price for all assets on line 6a L-6a Stmt 307,162. Capital gain net income (from Part IV, line 2) . . 21,621. Net short-term capital gain . . . . . . . . . . 9 Income modifications 10a Gross sales less returns and allowances h Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . . . . 11 Other income (attach schedule) . . . . . 12 Total. Add lines 1 through 11 . . 31,322. 31,322 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) Other professional fees (attach schedule) . . . C 17 70. 18 Taxes (attach schedule) (see instructions) See. Stmt 19 Depreciation (attach schedule) and depletion . . 20 21 Travel, conferences, and meetings 22 Printing and publications . . . . . 23 Other expenses (attach schedule) See. Stmt. 3,971. 3,896. Total operating and administrative expenses. 24 4,041 Add lines 13 through 23 . . . . . . . . . 3,896. 25 Contributions, gifts, grants paid . . . . . 20,500. 20,500. 26 Total expenses and disbursements. Add lines 24 and 25 24,541. 3,896. 20,500. 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 6,781 Net investment income (if negative, enter -0-) . 27,426.

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-)

SCANNED MAY 20 2021

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		f year
		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	509.	880.	880.
	2	Savings and temporary cash investments	11,029.	6,848.	6,848.
	3	Accounts receivable ▶		_	
		Less: allowance for doubtful accounts ▶			
	4	Pledues receivable ▶			
i		Pledues receivable ► Less: allowance for doubtful accounts ►			
	5	Grants receivable		<del> </del>	· ·
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
	•	Less: allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
et	9	Prepaid expenses and deferred charges			
Assets	-	Investments—U.S. and state government obligations (attach schedule)			
•	10a	Investments—corporate stock (attach schedule) L-10b Stmt	007 000	007.070	210 046
	b		287,288.	297,879.	310,946.
	C	Investments—corporate bonds (attach schedule)		<del></del>	<del></del>
	11	Investments—land, buildings, and equipment: basis ▶			<del></del>
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶	<u> </u>		
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers-see the			
		ınstructions. Also, see page 1, item l)	298,826.	305,607.	318,674.
	17	Accounts payable and accrued expenses			) 
s	18	Grants payable			
ţį	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		, , ,	l
<u>ia</u>	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)			!
S		Foundations that follow FASB ASC 958, check here			
2		and complete lines 24, 25, 29, and 30.			
a	24	Net assets without donor restrictions			
Bal	25	Net assets with donor restrictions			!
<u></u>		Foundations that do not follow FASB ASC 958, check here ▶ 🗵		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
5		and complete lines 26 through 30.		;	
<u>.</u>	26	Capital stock, trust principal, or current funds	298,826.	305,607.	
0	27	Paid-in or capital surplus, or land, bldg., and equipment fund	230,020.	303,007.	
딺	28	Retained earnings, accumulated income, endowment, or other funds			<del></del>
SS		Total net assets or fund balances (see instructions)	200 026	305,607.	· · · · · · · · · · · · · · · · · · ·
Net Assets or Fund Balances	29 30	Total liabilities and net assets/fund balances (see	298,826.	303,607.	·
او	30	Instructions)	200 026	305,607.	
	rt III	Analysis of Changes in Net Assets or Fund Balances	298,826.	303,607.	
			(-) 11 22 (		
1		al net assets or fund balances at beginning of year—Part II, colu			200 026
_		-of-year figure reported on prior year's return)			298,826.
_		er amount from Part I, line 27a		1	6,781.
3					
4		lines 1, 2, and 3		4	305,607.
5	Dec	reases not included in line 2 (itemize) ►  Il net assets or fund balances at end of year (line 4 minus line 5)—F		5	·····
6	Tota	Inet assets or fund balances at end of year (line 4 minus line 5)—f	art II, column (b), lin	e 29   6	305,607.

	s) of property sold (for example, real esta or common stock, 200 shs. MLC Co)	ate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr )
<b>1a</b> See attached schedul	_e		P	Various	Various
<u>b</u>	· · · · · · · · · · · · · · · · · · ·		ļ		<del> </del>
<u>C</u>					
<u>d</u>		<del> </del>	<del> </del>		<del> </del>
<u>e</u>	40 Decreased and allowed	(=) C==t==		#\ O-	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis onse of sale		in or (loss) (f) minus (g))
<b>a</b> 307,162. <b>b</b>			285,541.		21,62
C					
d					
<u>e</u>				<u> </u>	
Complete only for assets showi	ng gain in column (h) and owned by				ol. (h) gain minus
(I) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i) . (j), if any		ot less than -0-) <b>or</b> from col. (h))
<b>a</b> 0.	0.		0.		21,62
b					···
C		<del></del>			·····
d					<del></del>
9	( If goin of	oo ontor in Do	unt Line 7		<del></del>
Capital gain net income or (income)	IBI CAONALIOSSI 7	so enter in Pa enter -0- in Pa		2	21,62
Part I, line 8					
art V Qualification Under r optional use by domestic priva ection 4940(d)(2) applies, leave t	Section 4940(e) for Reducte foundations subject to the sethis part blank.	ed Tax on Nection 4940(a)	let Investment tax on net invest	ment income.)	
art V Qualification Under roptional use by domestic prival ection 4940(d)(2) applies, leave the foundation liable for the second	Section 4940(e) for Reducte foundations subject to the se his part blank.  ction 4942 tax on the distributal	ed Tax on Nection 4940(a)	let Investment tax on net invest fany year in the t	income ment income.)	☐ Yes ⊠ N
ection 4940(d)(2) applies, leave to sthe foundation liable for the series," the foundation doesn't qualifier the appropriate amount	Section 4940(e) for Reducte foundations subject to the se his part blank.  ction 4942 tax on the distributal	ed Tax on Nection 4940(a) ble amount of oot complete t	let Investment tax on net invest f any year in the I his part.	income ment income.) pase period?	☐ Yes ⊠ N
ert V Qualification Under r optional use by domestic prival ection 4940(d)(2) applies, leave the set of the se	TSection 4940(e) for Reducte foundations subject to the se his part blank.  Section 4942 tax on the distributal alify under section 4940(e). Do n	ction 4940(a) ble amount of ot complete to see the instru	let Investment tax on net invest f any year in the I his part.	income ment income.)  pase period?  aking any entries.	(d) tribution ratio divided by col (c))
ection 4940(d)(2) applies, leave to sthe foundation liable for the set yes," the foundation doesn't quater the appropriate amount (a)  Base penod years	te foundations subject to the se his part blank.  action 4942 tax on the distributal slify under section 4940(e). Do not in each column for each year;	ble amount of oct complete to see the instru	tax on net invest f any year in the this part. uctions before m	income ment income.)  pase period?  aking any entries.  pasets  (col. (b)	(d) tribution ratio divided by col (c))
ection 4940(d)(2) applies, leave to section 4940(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(	r Section 4940(e) for Reducte foundations subject to the set his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20,431 18,273	ble amount of oct complete to see the instru	tax on net invest f any year in the this part. uctions before many f nonchantable-use a 305, 4 282, 6	income ment income.)  pase period?  aking any entries.  ssets (col. (b))  82.  37.	(d) tribution ratio divided by col. (c)) 0.0668 0.0646
ection 4940(d)(2) applies, leave to section 4940(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(	r Section 4940(e) for Reducte foundations subject to the set his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431 18, 273	ble amount of oct complete to see the instru	f any year in the his part.  uctions before many fronchantable-use at 282, 6	pase period?  aking any entries.  Seets (col. (b)  82.  37.  02.	(d) tribution ratio divided by col (c))  0.0668  0.0652
ection 4940(d)(2) applies, leave to sthe foundation liable for the server, the foundation doesn't quater the appropriate amount (a)  Base penod years calendar year (or tax year beginning in)  2018  2017  2016  2015	r Section 4940(e) for Reducte foundations subject to the set his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431 18, 273 17, 474	ble amount of oct complete to see the instruction.  Net value of the complete	f any year in the his part.  (c) f noncharitable-use at 305, 4 282, 6 267, 6 307, 6	pase period?  aking any entries.  (col. (b) 82. 37. 02. 26.	(d) tribution ratio divided by col (c))  0.0668  0.0652 0.0619
art V Qualification Under roptional use by domestic prival ection 4940(d)(2) applies, leave the street of the foundation liable for the serves," the foundation doesn't qualifier the appropriate amount (a)  Base period years calendar year (or tax year beginning in)  2018  2017  2016	r Section 4940(e) for Reducte foundations subject to the set his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431 18, 273	ble amount of oct complete to see the instruction.  Net value of the complete	f any year in the his part.  uctions before many fronchantable-use at 282, 6	pase period?  aking any entries.  (col. (b) 82. 37. 02. 26.	(d) tribution ratio divided by col (c))  0.0668  0.0652 0.0619
art V Qualification Under roptional use by domestic prival ection 4940(d)(2) applies, leave the state of the serves," the foundation doesn't qualifier the appropriate amount (a)  Base penod years Calendar year (or tax year beginning in)  2018 2017 2016 2015 2014	r Section 4940(e) for Reducte foundations subject to the set his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431  18, 273  17, 474  19, 057	ble amount of ot complete to see the instruction.  Net value of the complete to see the instruction.	tax on net investment tax on net invest f any year in the this part. uctions before many f noncharitable-use at 305, 4 282, 6 267, 6 307, 6 322, 4	income ment income.)  pase period?  aking any entries.  ssets (col. (b)  82.  37.  02.  26.  56.	(d) tribution ratio divided by col. (c))  0.0668 0.0646 0.0652 0.0619 0.0579
art V Qualification Under roptional use by domestic prival ection 4940(d)(2) applies, leave the state of the serves," the foundation liable for the serves," the foundation doesn't qualified Enter the appropriate amount (e)  Base penod years Calendar year (or tax year beginning in)  2018  2017  2016  2015  2014  Total of line 1, column (d)	te foundations subject to the se his part blank. Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431  18, 273  17, 474  19, 057	ble amount of oct complete to see the instruction.  Net value of the complete to see the instruction.	tax on net investment tax on net invest f any year in the this part. uctions before many f nonchantable-use at 305, 4 282, 6 267, 6 307, 6 322, 4	income ment income.)  pase period?  aking any entries.  ssets (col. (b)  82.  37.  02.  26.  56.	(d) tribution ratio divided by col (c))  0.0668 0.0646 0.0652 0.0619 0.0579
art V Qualification Under roptional use by domestic prival ection 4940(d)(2) applies, leave the state of state of the serves," the foundation doesn't qualifier the appropriate amount (e)  Base period years Calendar year (or tax year beginning in)  2018 2017 2016 2015 2014  Total of line 1, column (d) Average distribution ratio fo	r Section 4940(e) for Reducte foundations subject to the set his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431  18, 273  17, 474  19, 057	ble amount of oct complete to see the instruction.  Net value of the complete	tax on net investment tax on net invest tax on net investment tax on net	income ment income.)  pase period?  aking any entries.  ssets (col. (b)  82.  37.  02.  26.  56.	(d) tribution ratio divided by col (c))  0.0668 0.0652 0.0619 0.0579
Qualification Under roptional use by domestic prival ection 4940(d)(2) applies, leave the street of the foundation liable for the series," the foundation doesn't qualifier the appropriate amour (a)  Base penod years calendar year (or tax year beginning in)  2018  2017  2016  2015  2014  Total of line 1, column (d)  Average distribution ratio for the number of years the four	te foundations subject to the se his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431  18, 273  17, 474  19, 057	ble amount of ot complete to see the instruction.  Net value of the complete to see the instruction.  Net value of the complete to see the instruction.	tax on net investment tax on net invest fany year in the this part.  uctions before many fanorchantable-use and 105, 4 282, 6 267, 6 307, 6 322, 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	pase period?  aking any entries.  bissets (col. (b) 82. 37. 02. 26. 56. 2	(d) tribution ratio divided by col (c))  0.0668 0.0652 0.0619 0.0579 0.3166
Qualification Under roptional use by domestic prival ection 4940(d)(2) applies, leave the strong transfer of the serves," the foundation liable for the serves," the foundation doesn't qualifier the appropriate amount (a)  Base penod years Calendar year (or tax year beginning in)  2018  2017  2016  2015  2014  Total of line 1, column (d) Average distribution ratio for the number of years the four serves.	r Section 4940(e) for Reducte foundations subject to the set his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431  18, 273  17, 474  19, 057  18, 676  The 5-year base period—divided addition has been in existence if	ble amount of ot complete to see the instruction.  Net value of the complete to see the instruction.  Net value of the complete to see the instruction.  Net value of the complete to see the instruction.  Be the total on less than 5 years.	tax on net investment tax on net invest f any year in the this part. uctions before many f noncharitable-use at 305, 4 282, 6 267, 6 307, 6 322, 4 I line 2 by 5.0, or ears	income ment income.)  pase period?  aking any entries.  ssets (col. (b) 82. 37. 02. 26. 56.  2 by 3 4	(d) tribution ratio divided by col (c))  0.0668 0.0646 0.0652 0.0619 0.0579 0.3166 0.0633
art V Qualification Under optional use by domestic prival ection 4940(d)(2) applies, leave the state of the foundation liable for the serves," the foundation doesn't qualifier the appropriate amound (e)  Base period years Calendar year (or tax year beginning in)  2018  2017  2016  2015  2014  Total of line 1, column (d)  A verage distribution ratio for the number of years the four  Enter the net value of nonch  Multiply line 4 by line 3	te foundations subject to the se his part blank. Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431  18, 273  17, 474  19, 057  18, 676  The 5-year base period—divided a dation has been in existence if aritable-use assets for 2019 from	ble amount of ot complete to see the instruction of the complete to see	tax on net invest f any year in the this part. Luctions before many services and services are services and services are services and services and services and services are services and services are services and se	income ment income.)  pase period?  aking any entries.  ssets (col. (b) 82. 37. 02. 26. 56.  2 by 4 5	(d) tribution ratio divided by col. (c)) 0.0668 0.0646
art V Qualification Under roptional use by domestic prival ection 4940(d)(2) applies, leave the state of the serves," the foundation doesn't qualifier the appropriate amount (e)  Base period years Calendar year (or tax year beginning in)  2018 2017 2016 2015 2014  Total of line 1, column (d)  Average distribution ratio for the number of years the four the number of years the number of years the four the number of years the numbe	r Section 4940(e) for Reducte foundations subject to the set his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431  18, 273  17, 474  19, 057  18, 676  The 5-year base period—divided a dation has been in existence if aritable-use assets for 2019 from	ble amount of ot complete to see the instruction of the complete to see	tax on net investment tax on net invest fany year in the this part.  uctions before many fanorchantable-use and 105, 4 282, 6 267, 6 307, 6 322, 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	income ment income.)  pase period?  aking any entries.  ssets (col. (b)  82.  37.  02.  26.  56.  2  by  4  5  6	(d) tribution ratio divided by col. (c))  0.0668 0.0646 0.0652 0.0619 0.0579 0.3166 0.0633 299,48
art V Qualification Under or optional use by domestic private proportional use by domestic private proportional use by domestic private proportion of the set of the	r Section 4940(e) for Reducte foundations subject to the set his part blank.  Inction 4942 tax on the distributal alify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  20, 431  18, 273  17, 474  19, 057  18, 676  The 5-year base period—divided and attion has been in existence if arritable-use assets for 2019 from the company of the company o	ble amount of ot complete to see the instruction of	tax on net investment tax on net invest fany year in the this part.  uctions before many (c) from the this part.  282, 6 267, 6 307, 6 322, 4  thine 2 by 5.0, or ears  5	income ment income.)  pase period?  aking any entries.  ssets (col. (b) 82. 37. 02. 26. 56.  2 y 4 5 6 7	(d) tribution ratio divided by col (c))  0.0668 0.0652 0.0619 0.0579 0.3166 0.0633 299,48

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Part	<b>W</b> Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	Instr	uctio	ns)	
1a					Ī
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				]
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2	74.	_
	here ► 🗵 and enter 1% of Part I, line 27b				1
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)		<del></del>		]
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			Ο.	
3	Add lines 1 and 2		2	74.	-
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.	_
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		2	74.	-
6	Credits/Payments:				1
а	2019 estimated tax payments and 2018 overpayment credited to 2019   6a   7.				
b	Exempt foreign organizations—tax withheld at source				ŀ
C	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d			7.	•
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached 8				•
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2	67.	•
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 ▶ Refunded ▶ 11				•
Part	VII-A Statements Regarding Activities				_
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No	_
	participate or intervene in any political campaign?	1a		×	_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		×	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		<del> </del>		[
	published or distributed by the foundation in connection with the activities.	l			l
С	Did the foundation file Form 1120-POL for this year?	1c		×	ı
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				[
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$		}		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. ▶ \$	ľ			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		×	•
	If "Yes," attach a detailed description of the activities.				ĺ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				ŀ
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		×	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		×	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b			_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		×	
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				1
	By language in the governing instrument, or	}			ĺ
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	6	×		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	×		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ► NJ	ţ			
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 <i>General Instruction G?</i> If "No," attach explanation	8b	×		]
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"				\ \(\cappa\)
	complete Part XIV	9	<b>  </b>	×	Û
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	1			

Par	VIEA 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		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ► N/A			
14	The books are in care of ▶ James M. Reiser Telephone no. ▶ (609)	183-	3300	
46	Located at ▶ 932 Lower Ferry Rd West Trenton NJ ZIP+4 ▶ 08638			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here and enter the amount of tax-exempt interest received or accrued during the year <b>\Delta 15</b>	• •	•	
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		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		<u> </u>
	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? Yes (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? $\Box$ Yes $\boxtimes$ No			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
2	were not corrected before the first day of the tax year beginning in 2019?	1c		×
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?			
ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20 , 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes." did it have excess business holdings in 2019 as a result of (1) any purchaso 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		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		×
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?	4h		×

	VII-B Statements Regarding Activities	s for Which Form	4720 May Be	Require	ed (contin	nued)			
5a	During the year, did the foundation pay or incur	any amount to:						Yes	No
	(1) Carry on propaganda, or otherwise attempt					⊠ No			
	(2) Influence the outcome of any specific public		ion 4955); or to	carry on	,				
	directly or indirectly, any voter registration di	rive?			Yes	⊠ No	- [		
	(3) Provide a grant to an individual for travel, stu				☐ Yes	<b>⊠</b> No	. [		
	(4) Provide a grant to an organization other than				1				
	section 4945(d)(4)(A)? See instructions				☐ Yes	<b>⊠</b> No			
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to					⊠ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the	ne transactions fail t	o qualify under t	he exce	ptions des				
	in Regulations section 53.4945 or in a current no						5b		<u></u>
	Organizations relying on a current notice regardi	ing disaster assistan	ice, check here			▶□			
C	If the answer is "Yes" to question 5a(4), does to						Ĺ		
	because it maintained expenditure responsibility	for the grant?			☐ Yes	☐ No	ļ		
	If "Yes," attach the statement required by Regul	ations section 53.49	45-5(d).						
6a	Did the foundation, during the year, receive any	funds, directly or in-	directly, to pay p	remiums	3				
	•	· · · · · · ·				⊠ No			
b	Did the foundation, during the year, pay premiur	ns, directly or indire	ctly, on a person	al benefi	t contract?	? .	6b		×
_	If "Yes" to 6b, file Form 8870.					ET			
7a	At any time during the tax year, was the foundation						_		
ь	If "Yes," did the foundation receive any proceed is the foundation subject to the section 4960 ta					γ.	7b		
8	remuneration or excess parachute payment(s) di	x on payment(s) or i	more man \$1,00	10,000 ii	 				
Part	VIII Information About Officers, Direct					U No		998	!
, di	and Contractors	icis, musices, r	ouridation ival	iagei 3,	riigiliy F	alu L	проу	ees,	
1	List all officers, directors, trustees, and found	lation managers ar	nd their compen	sation.	See instru	ctions			
		(b) Title, and average	(c) Compensation	· · · · · · · · · · · · · · · · · · ·	Contributions				
	(a) Nama and address						(e) Expe	nse acc	count.
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	emple	oyee benefit perred comper	plans	(e) Expe other a	nse aco allowan	
	(a) Name and address  Ten Flicker	hours per week	(If not paid,	emple	oyee benefit p	plans			
		hours per week devoted to position  President  0.50	(If not paid, enter -0-)	emple and def	oyee benefit p	plans			
932	cen Flicker	hours per week devoted to position  President	(If not paid, enter -0-)	emple and def	oyee benefit p	olans nsation			ces
932 Norm	ten Flicker Lower Ferry Road West Trenton NJ 08628	hours per week devoted to position  President 0.50  Vice President 0.50	(If not paid, enter -0-)	emple and def	oyee benefit p	olans nsation			ces
932 Norm 932 Jame	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser	hours per week devoted to position  President  0.50  Vice President  0.50  Treasurer	(If not paid, enter -0-)	emple and def	oyee benefit p	olans nsation 0.			0. 0.
932 Norm 932 Jame	cen Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628	hours per week devoted to position  President  0.50  Vice President  0.50  Treasurer  0.50	(If not paid, enter -0-)	emple and def	oyee benefit p	olans nsation 0.			0.
932 Norm 932 Jame 932 Jenr	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary	(if not paid, enter -0-)	emple and def	oyee benefit p	0.			0. 0.
932 Norm 932 Jame 932 Jenr	Ten Flicker Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628	hours per week devoted to position  President  0.50  Vice President  0.50  Treasurer  0.50  Secretary  0.50	(if not paid, enter -0-)  0.	emple and def	oyee benefit perred comper	0 . 0 . 0 .	other a	allowan	0. 0. 0.
932 Norm 932 Jame 932 Jenr	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich	hours per week devoted to position  President  0.50  Vice President  0.50  Treasurer  0.50  Secretary  0.50	(if not paid, enter -0-)  0.	emple and def	oyee benefit perred comper	0 . 0 . 0 .	other a	allowan	0. 0. 0.
932 Norm 932 Jame 932 Jenr	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employed	hours per week devoted to position  President  0.50  Vice President  0.50  Treasurer  0.50  Secretary  0.50  se (other than those	(If not paid, enter -0-)  0.  0.  se included on	emple and def	oyee benefit perred comper	O. O. O.	other a	allowan	0. 0. 0.
932 Norm 932 Jame 932 Jenr 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employed	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru	O. O. o. o. tions to	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenr 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628 man Sharlin Lower Ferry Road West Trenton NJ 08628  Compensation of five highest-paid employed "NONE."	hours per week devoted to position  President  0.50  Vice President  0.50  Treasurer  0.50  Secretary  0.50  se (other than those)	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenr 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru  (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenn 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru  (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenn 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru  (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenn 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru  (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenn 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru  (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenn 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru  (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenn 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru  (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenn 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru  (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenn 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru  (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter
932 Norm 932 Jame 932 Jenr 932 2	Ten Flicker Lower Ferry Road West Trenton NJ 08628 nan Sharlin Lower Ferry Road West Trenton NJ 08628 es M. Reiser Lower Ferry Road West Trenton NJ 08628 nifer Bartkovich Lower Ferry Road West Trenton NJ 08628 Compensation of five highest-paid employee "NONE."	hours per week devoted to position President 0.50 Vice President 0.50 Treasurer 0.50 Secretary 0.50 es (other than those) (b) Title, and a hours per week devoted to position	(If not paid, enter -0-)  0.  0.  se included on	emple and def	see instru (d) Contribut employee b plans and de	O. O. O. strions	other a	one, (	0. 0. 0. enter

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NOI	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
<b>T</b> -1-1		
Part IX-A	er of others receiving over \$50,000 for professional services	
	indation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
	ns and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 FIN	ANCIAL ASSISTANCE TO OTHER CHARITABLE ORGANIZATIONS	
		20,500.
2		
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	Д
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 Non		
		0.
2		
All other pr	ogram-related investments See instructions.	<del> </del>
3 None		
		0.
Total. Add	lines 1 through 3	0.
2 A A	DEV 04/21/20 PRO	Form <b>990-PF</b> (2019

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fol	indations,
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	294,414.
ь	Average of monthly cash balances	1b	9,633.
С	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	304,047.
е	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	304,047.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	4,561.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	299,486.
6	Minimum investment return. Enter 5% of line 5	6	14,974.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ▶ ☐ and do not complete this part.)	ounda	itions
1	Minimum investment return from Part X, line 6	1	14,974.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	274.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,700.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	14,700.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	14,700.
Par	XII Qualifying Distributions (see instructions)	11	<del></del>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	20,500.
b	Program-related investments—total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	<del></del>
b	Cash distribution test (attach the required schedule)	3b	00.500
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	20,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	274
e	Enter 1% of Part I, line 27b. See instructions	5 6	274.
6	regarded qualifying distributions can also more more in the contract of the co		<del></del>
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	y wnet	ner the roundation
	qualified for the decident vertice, reduction of tax in those years.		5 000 PE (040)

Part	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				14,700.
2	Undistributed income, if any, as of the end of 2019:				
a	Enter amount for 2018 only			0.	
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015				
c d	From 2016				
e	From 2018				
f	Total of lines 3a through e	22,329.			
4	Qualifying distributions for 2019 from Part XII, line 4: > \$ 20,500.				
а	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
đ	Applied to 2019 distributable amount				14,700.
e	Remaining amount distributed out of corpus	5,8 <u>0</u> 0.			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	28,129.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			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)				
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	4,115.			,
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	24,014.			
10	Analysis of line 9:				
a	Excess from 2015 3,828.				
b	Excess from 2016 4,196.	] [		İ	
C	Excess from 2017 4,495.				
d	Excess from 2018 5, 695.				
е	Excess from 2019 5,800.	1	i	1	

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Part					3)	N/A
1a	If the foundation has received a ruling foundation, and the ruling is effective fo					
b	Check box to indicate whether the four	ndation is a private	operating founda	tion described in se	ection 🗌 4942	(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	``
	each year listed					
	85% of line 2a					
	Qualifying distributions from Part XII, line 4, for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	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:					
а	"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		<del> </del>			
C	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization		···			
	(4) Gross investment income			<u> </u>	1	<del> </del>
Part		•	•	ne toundation n	iad \$5,000 or i	more in assets at
	any time during the year-		S.)	<u>.,</u>		
1	Information Regarding Foundation List any managers of the foundation v		ted more than 20	6 of the total cont	ributions receive	nd by the foundation
а	before the close of any tax year (but o					
1	NONE			, , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	<b>,</b>
	List any managers of the foundation			•		large portion of the
l	ownership of a partnership or other er	ntity) of which the f	oundation has a	10% or greater int	erest.	
2	Information Regarding Contribution			-		
	Check here ► 🗵 if the foundation unsolicited requests for funds. If the focomplete items 2a, b, c, and d. See in	oundation makes (				
а	The name, address, and telephone nu		lress of the perso	n to whom applica	ations should be	addressed:
b	The form in which applications should	be submitted and	I information and	materials they sho	ould include:	
С	Any submission deadlines:	·····		<del></del>		
d	Any restrictions or limitations on aw factors:	vards, such as by	geographical a	reas, charitable fi	elds, kınds of ir	nstitutions, or other

Part XV Supplementary Information (con	tinued)		······································	
3 Grants and Contributions Paid During	the Year or Approv	ed for Fut	ture Payment	<del></del>
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
See Attached Schedule				
NJ 0				20,500
		•		
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	20,500.
<b>b</b> Approved for future payment				
NONE				

0.

3b

Total

		as amounts unless otherwise indicated.	Y	siness income	Excluded by section	on 512, 513, or 514	(e)
	D		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
7		ram service revenue:		<del></del>			<u>-</u>
	a _						
	b _						
	ď						
	e _			<del> </del>			
	÷ -		1	<del></del>			
	g F	ees and contracts from government agencies			<del> </del>	<del> </del>	<del> </del>
2	-	bership dues and assessments			<del> </del>		
3		est on savings and temporary cash investments			+		
4		dends and interest from securities			14	9,701.	
5		rental income or (loss) from real estate:		,	1	<u> </u>	- <del></del>
•		Debt-financed property	<del></del>		†		
		Not debt-financed property			<del> </del>		
6		rental income or (loss) from personal property			<del> </del>		
7		er investment income		<u></u>	<del> </del>		
8		or (loss) from sales of assets other than inventory			18	21,621.	
9		income or (loss) from special events			10	21,021.	· · · · · · · · · · · · · · · · · · ·
10		ss profit or (loss) from sales of inventory					
11						<del> </del>	
•••	b	<del></del>		· ·		<del></del>	
	c -			<del> </del>	-		
	ď –			<del> </del>	· · · · · · · · · · · · · · · · · · ·	<del> </del>	
	е _						
			<u> </u>		<u> </u>		
12	Subt	total Add columns (b) (d) and (e)				31.322	
		total. Add columns (b), (d), and (e)				31, 322.	31 322
13	Tota	II. Add line 12, columns (b), (d), and (e)				31,322. 13	31,322.
<b>13</b> (See	Tota work	II. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.)				31,322.
13 (See Par	Tota work	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Par Line	Tota work t XV	II. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	31, 322.
13 (See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	

	•	Organizati	ons									
1	Did 1	the organization of	directly or indirec	tly engage ir	any of the follo	wing with any	other orga	nization d	escribed		Yes	No
	in s	ection 501(c) (c	other than secti	ion 501(c)(3)	organizations)	or in section	on 527, re	lating to	political	1		
		nizations?										
а	Tran	sfers from the re	porting foundation	on to a nonch	naritable exempt	organization	of:					
	(1) (	Cash								1a(1)		X
	(2)	Other assets .								1a(2)		X
b	Othe	er transactions:										
	(1) S	Sales of assets to	a noncharitable	exempt orga	anization					1b(1)		×
	(2) F	Purchases of asse	ets from a nonch	aritable exen	npt organization					1b(2)		×
	(3) F	Rental of facilities	, equipment, or a	other assets						1b(3)		×
	(4) F	Reimbursement a	rrangements.							1b(4)		×
	(5) L	oans or loan gua	rantees							1b(5)		×
	(6) F	Performance of se								1b(6)		×
C	Shar	ring of facilities, e	quipment, mailir	ng lists, other	assets, or paid	employees .				1c		×
d	If the	e answer to any	of the above is	"Yes," comp	lete the followin	g schedule. C	Column (b)	should alv	ways show	v the	fair m	arket
	value	e of the goods, o	ther assets, or s	ervices giver	n by the reportin	g foundation.	If the found	dation rec	eived less	than	fair m	arket
	value	e in any transacti	on or sharing arr	angement, s	how in column (	d) the value of	the goods,	, other ass	ets, or se	rvices	receiv	ved.
(a) Line	no.	(b) Amount involved	(c) Name of r	nonchantable ex	empt organization	(d) Descri	ption of transfe	ers, transaction	ons, and sha	ring arra	angeme	nts
~												
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				<del></del>								
	+					<del></del>	<del></del>		<del></del>			
		····								<del></del>		
2a	Is th	e foundation dire	ectly or indirect	v affiliated v	vith, or related	o, one or mo	re tax-exe	mpt organ	nizations			
		cribed in section 5								☐ Ye	s 🗵	No
b		es," complete the										
		(a) Name of organ			(b) Type of organiza	tion		(c) Descripti	on of relation	nship		
		<del></del>					······	· · · · · · · · · · · · · · · · · · ·		<del>`</del>		
			<del></del>									
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  May the IRS								ge and t	elief, it	is true,	
Sign									S discu	sa this r	muter	
Here		James on Pain Treasurer						with the pr	eparer s	hown be	elow?	
	Signature of officer or trustee Date Title					See instruc	See instructions. Yes No					
	1-6	Print/Type preparer		Preparer	's signature	<del></del>	Date	Ob.	, [] , [F	PTIN		
Paid		7					}		ck [] if [ employed]			
rep			•						n's EIN ▶			
Jse (	Jnly	Firm's name	-			<del></del>		Phone no.				
BAA		I initia addition		· · · · · · · · · · · · · · · · · · ·				i none no.	Fr	rm <b>99</b> (	)-PF	(2019)
			<i>'-</i>									

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

## **Net Gain or Loss From Sale of Assets** Form 990-PF

Part I, Line 6a

Name	Employer Identification No							
Homasote Foundation	21-6018542							
Asset Information:								
Description of Property Secu	rities							
Description of Property Securities  Business Code Exclusion Code								
Date Acquired Various How Acquired								
Date Sold Various Nam	ne of Buyer .							
Check Box, if Buyer is a Business								
	t or other basis (do not reduce by depreciat	ion). 285.541.						
Sales Evnense Va	luation Method	.0,						
Total Gain (Loss) 21 62	1. Accumulated Depreciation							
Business Code Exclusion C								
	Acquired							
	ne of Buyer							
Check Box, if Buyer is a Business								
•		ion)						
Sales Fince Cos	t or other basis (do not reduce by depreciat	1011)						
Sales Expense va	luation Method							
Possintan of Branch	Accumulated Depreciation	• • • •						
Description of Property								
Business Code Exclusion C								
Date Acquired How	Acquired .							
Date Sold Nam	ne of Buyer							
Check Box, if Buyer is a Business		•						
Sales Price Cos	or other basis (do not reduce by depreciat	ion)						
Sales Expense Va	luation Method							
Total Gain (Loss)	Accumulated Depreciation	· · · · · · · · · · · · · · · · · · ·						
Description of Property								
Business Code Exclusion C								
Date Acquired How	Acquired							
Date Sold Nan	ne of Buyer .							
Check Box, if Buyer is a Business								
Sales Price Cos	t or other basis (do not reduce by depreciat	ion)						
Sales Expense Va								
Total Gain (Loss)	Accumulated Depreciation							
Description of Property								
Business CodeExclusion C	ode							
Date Acquired How	Acquired							
Date Sold Nan	ne of Buyer							
Check Box, if Buyer is a Business								
Sales Price Cos	t or other basis (do not reduce by depreciat	ion)						
Sales Expense Va	luation Method							
Total Gain (Loss)	Accumulated Depreciation							
Totals:								
Total Gain (Loss) of all assets 21, 621.								
Gross Sales Price of all assets 307, 162.								
Unrelated Business Income	Business Code	_						
Excluded by section 512, 513, 514								
Related/Exempt Function Income		_						
QuickZoom here to Form 990-PF, Page 1.								
QuickZoom here to Form 990-PF, Page 12								
		<u> </u>						

Name Homasote Foundation	Employer Identification No 21-6018542					
Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	Obligations Obligations		End o ment ons lue	of Year US Government Obligations FMV	
Tot to Fm 990-PF, Pt II, Ln 10a						
Line 10b - Investme	End o Book Value		f Year Fair Market Value			
Various			297,879.		310,946.	
Totals to Form 990-PF, Part II, L	297,	297,879.				
Line 10c - Investme	End o Book Value		f Year Fair Market Value			
Totals to Form 990-PF, Part II, L	.ine 10c					
Line 12 - Investme	End o Book Value		f Year Fair Market Value			
Totals to Form 990-PF, Part II, L	ine 12					
Line 13 - Inve	estments - Other:		Book Value		f Year Fair Market Value	
Totals to Form 990-PF, Part II, L	ine 13					