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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491321029010

OMB No. 1545-0052

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

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

2019

Open to Public Inspection

							•
or	caler	ndar year 2019, or tax year beginning 01-01-20	)19 , ar	ıd er	nding 12-31-	2019	
		ındation amily Charitable Trust			A Employer id	entification numbe	r
		NCE R LAURENTI JR			22-3697005		
Num	ber and	d street (or P.O. box number if mail is not delivered to street address) ehorse Avenue Suite Suite 1	Room/suite		<b>B</b> Telephone nu	mber (see instructio	ns)
Ī					(609) 581-2100	)	
		n, state or province, country, and ZIP or foreign postal code J 08610			C If exemption	application is pendin	g, check here
							▶ ∟
G Cł	neck al		former public charity			ganizations, check h	▶ ∟
		☐ Final return ☐ Amended return ☐ Address change ☐ Name change				ganizations meeting k here and attach co	
<b>1</b> Ch	neck tv	pe of organization: ✓ Section 501(c)(3) exempt private	foundation			undation status was	
_			e private foundation		under sectio	n 507(b)(1)(A), ched	ck nere
		(et value of all assets at end	☑ Cash ☐ Accru	al		ation is in a 60-mont	
		rom Part II, col. (c), ▶\$ 973,738 ☐ Other (specify) _			under sectio	n 507(b)(1)(B), ched	k here ▶ ∟
		(Part I, column (d) must	be on cash basis.)				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	(h)	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(5)	income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach					(Cash basis offiy)
	_	schedule)	0				
	2	Check ► ✓ if the foundation is <b>not</b> required to attach					
	3	Sch. B Interest on savings and temporary cash investments					
Revenue	4	Dividends and interest from securities	37,805		37,805		
	5a	Gross rents					
	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10	-629				
	b	Gross sales price for all assets on line 6a 165,047			_		
ž	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain					
	10a	Gross sales less returns and allowances					
	ь	Less: Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	37,176		37,805		
	13	Compensation of officers, directors, trustees, etc.	0				
	14	Other employee salaries and wages					
ses	15 16a	Pension plans, employee benefits					
E E	b	Accounting fees (attach schedule)					
Ä	°	Other professional fees (attach schedule)	4,810		4,780		
ΙΛe	17	Interest					
E a	18	Taxes (attach schedule) (see instructions)	1,317		277		
III S	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
D A	21	Travel, conferences, and meetings					
e	22	Printing and publications					
Operating and Administrative Expenses	23	Other expenses (attach schedule)	225				225
erat	24	Total operating and administrative expenses.	( 353		F 0F7		227
<u>ă</u>	25	Add lines 13 through 23	6,352 50,000		5,057		50,000
	26	Total expenses and disbursements. Add lines 24 and	30,000				30,000
		25	56,352		5,057		50,225
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	-19,176				
	ь	Net investment income (if negative, enter -0-)			32,748		
	c	Adjusted net income (if negative, enter -0-)					

Attached schedules and amounts in the description column

Beginning of year

953,227

953,227

934,051

934,051

953,227

-19,176

934,051

934,051 Form **990-PF** (2019)

1

2

3

4

5

6

Page 2

End of year

Form 990-PF (2019)

Part II

Net Assets or

26

27

28

29

30

Part III

1

2

3

4

5

Capital stock, trust principal, or current funds .

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

Paid-in or capital surplus, or land, bldg., and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Analysis of Changes in Net Assets or Fund Balances

	_	3 ,	1	· '	· · · · · · · · · · · · · · · · · · ·
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶		'	
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶		'	
	5	Grants receivable			
	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			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	469,945	563,249	649,782
	C	Investments—corporate bonds (attach schedule)	46,398	46,398	840
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶		'	
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	405,694	281,344	280,056
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶		'	
	15	Other assets (describe )	196	530	530
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	953,227	934,051	973,738
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
<u> </u>	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe )			
	23	Total liabilities(add lines 17 through 22)	0	0	
ses		Foundations that follow FASB ASC 958, check here			
anc		and complete lines 24, 25, 29 and 30.			
Sa k	24	Net assets without donor restrictions	953,227	934,051	
ΔĒ	25	Net assets with donor restrictions			
r Fund Balances		Foundations that do not follow FASB ASC 958, check here ▶ □ and complete lines 26 through 30.			

Capital Gains	and Losses for Tax on Invest	ment Income			
	e the kind(s) of property sold (e.g., irehouse; or common stock, 200 shs		(b) How acquired P—Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
4 - CER CHC FIRELITY DIVIE	AFNE DONG		D—Donation	, , ,, ,	, , , , ,
1 a 652 SHS FIDELITY DIVIE			P P	2018-06-18	2019-11-20
b 900 SHS INVESCO VARIA			P	2015-12-22	2019-11-20 2019-11-20
c 8,045 SHS PIMCO INCM			P	2015-04-02	
d 2,860 SHS VIRTUS SEIX			P P	2017-06-14	2019-11-20
e CAPITAL GAIN DIVIDEN			<u> </u>	<del>                                     </del>	L. X
(e) Gross sales price	<b>(f)</b> Depreciation allowed		(g) other basis	Gain ò	<b>h)</b> r (loss)
Gross sales price	(or allowable)	plus exp	ense of sale	(e) plus (f	) minus (g)
a 2	1,075		19,334	H	1,741
<b>b</b> 2	3,064		21,555	5	1,509
<b>c</b> 9	6,380		99,350		-2,970
<b>d</b> 2	3,885		25,000	)	-1,115
e					643
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(	1)
(i) F.M.V. as of 12/31/69	(j)	Excess	( <b>k)</b> of col. (i) . (j), if any	Gains (Col. ( col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))
a					1,741
b					1,509
С					-2,970
d					-1,115
e					· · · · · · · · · · · · · · · · · · ·
•	gain or (loss) { gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi		Part İ, line 7	3	-192
-	Jnder Section 4940(e) for Re				
For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incon	ne.)	
f section 4940(d)(2) applies, le	eave this part blank.				
f "Yes," the foundation does no	e section 4942 tax on the distributa ot qualify under section 4940(e). Do	not complete this part.			es 🔽 No
	nount in each column for each year;	see instructions before	making any entrie		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rat (col. (b) divided by o	
2018	51,776		946,467		0.054704
2017	52,367		924,120		0.056667
2016	49,738		851,419		0.058418
2015	50,930		933,974		0.05453
2014	64,177		1,034,421		0.062041
2 Total of line 1, column (	d)		2		0.28636
number of years the four 4 Enter the net value of no	o for the 5-year base period—divide adation has been in existence if less ncharitable-use assets for 2019 fron	than 5 years . ´.	3		0.057272 945,703
<b>5</b> Multiply line 4 by line 3			5		54,162
<b>6</b> Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		327
			7		54,489
	ons from Part XII, line 4 , eater than line 7, check the box in Pa		<u>8</u> pplete that part usin	 ng a 1% tax rate. Se	50,225 e the Part VI
					rm 000-PE (2010)

orm	990-PF (2019)						P	age <b>6</b>
Pa	rt VIII-B Statements Regard	ling Activities for Which	Form 4720 May Be	Required (continued)				
ā	During the year did the foundation p						Yes	No
	(1) Carry on propaganda, or otherw		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	🗌 Yes 🗸	No			
	(2) Influence the outcome of any sp	•	•					
	on, directly or indirectly, any vo	-		· · 🔲 Yes 🛂	No			
	• •		or travel, study, or other similar purposes? Yes V No					
	(4) Provide a grant to an organizati		· -					
	in section 4945(d)(4)(A)? See ir (5) Provide for any purpose other t			· ·	No			
	educational purposes, or for the	- ·			ı			
b	If any answer is "Yes" to $5a(1)$ – $(5)$ ,	·		∟ Yes 💌	No			
	Regulations section 53.4945 or in a	current notice regarding disas	ter assistance? See instr	uctions		5b		
	Organizations relying on a current n	otice regarding disaster assist	ance check here	▶ ┌	1			
С	If the answer is "Yes" to question 5a	a(4), does the foundation clair	n exemption from the		•			
	tax because it maintained expenditu	· · · · · · · · ·		· · □ Yes □	No			
	If "Yes," attach the statement requi	red by Regulations section 53.	4945-5(d).					
5a	Did the foundation, during the year,	, , ,		ums on				
	a personal benefit contract?			· 🗌 Yes 🗸	No			
b	Did the foundation, during the year,	, pay premiums, directly or inc	lirectly, on a personal be	nefit contract?		6b		No
_	If "Yes" to 6b, file Form 8870.							
7a	At any time during the tax year, wa			∟ Yes 💌	No	l		
b	If "Yes", did the foundation receive					7b		No
•	Is the foundation subject to the sect excess parachute payment during the				1			
		•		Yes ∟_	No			
Pa	and Contractors	Officers, Directors, Trust	tees, Foundation Ma	anagers, Hignly Pald E	mpic	yees,		
1	List all officers, directors, truste	es, foundation managers ar	nd their compensation	. See instructions				
	(-) Name and address	(b) Title, and average	(c) Compensation (If		. (e)	) Expen	se acc	ount,
	(a) Name and address	hours per week devoted to position	not paid, enter -0-)	employee benefit plans and deferred compensation	1 6	ther al	lowand	es
AUR	ENCE R LAURENTI JR	TRUSTEE	0	<u>'</u>	ol			0
	Whitehorse Avenue Iton, NJ 08610	0						
RIAI	N LAURENTI	TRUSTEE	0		0			0
	Whitehorse Avenue Iton, NJ 08610	0						
	Commence of five bink of the	:	 				NONE	71

<b>b</b> If "Yes", did the foundation receive	any p	roceeds or have any net	income attributable to th	e transaction?	7b	No
8 Is the foundation subject to the sect	ion 4	960 tax on payment(s) o	f more than \$1,000,000	in remuneration or		
excess parachute payment during th	ne yea	ar?		· ·     Ves	No	
and Contractors			•	nagers, Highly Paid En		
(a) Name and address	(	b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		
LAURENCE R LAURENTI JR	TRUS	TEE	0	0		C
941 Whitehorse Avenue Hamilton, NJ 08610	0					
BRIAN LAURENTI	TRUS	TEE	0	0		
941 Whitehorse Avenue Hamilton, NJ 08610	n, NJ 08610			pensation. See instructions sation (If employee benefit plans and deferred compensation)  0  0  0  0  0  0  0  0  0  0  0  0  0		
2 Compensation of five highest-pa	id em	ployees (other than th	nose included on line 1	—see instructions). If nor	ne, enter "	NONE."
(a) Name and address of each employee more than \$50,000	paid	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred		
Total number of other employees paid ov	er \$5	0,000		· <b>•</b>		

Form 990-PF (2019)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Founda and Contractors (continued)	tion Managers, Highly Paid Er	nployees,
3 Five highest-paid independent contractors for professional services (see i	instructions). If none, enter "NON	IE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis organizations and other beneficiaries served, conferences convened, research papers produced, etc.	tical information such as the number of	Expenses
1 TRENTON CATHOLIC ACADEMY - COMMITTED TO EDUCATING A CULTURALLY AND A STUDENT BODY TO BE RESPONSIBLE CITIZENS OF A GLOBAL COMMUNITY.	ACADEMICALLY DIVERSE	5,800
2 ST. LAWRENCE REHABILITATION CENTER - COMMITTED TO MAXIMIZING THE QUAI PROVIDING COMPREHENSIVE PHYSICAL REHABILITATION AND RELATED PROGRAM		5,000
3 MCCC FOUNDATION - COMMITTED TO MAKING HIGH-QUALITY EDUCATION AVAILA A DESERVING COMMMUNITY.	BLE TO DESERVING STUDENTS IN	5,000
<b>4</b> THE RANGE OF MOTION PROJECT - TO PROVIDE HIGH QUALITY PROSTHETIC CARE WHICH ENHANCES MOBILITY AND UNLOCKS HUMAN POTENTIAL	IN UNDERSERVED POPULATIONS,	3,500
Part IX-B Summary of Program-Related Investments (see instruction	ons)	_
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 NONE		0
2 NONE		0
All other program-related investments. See instructions.		0
Total. Add lines 1 through 3		0
		Form <b>990-PF</b> (2019)

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2a |

2b

655

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

organizations check here 

and do not complete this part.)

Tax on investment income for 2019 from Part VI, line 5. . . . . .

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Page 8

47,285

655

46,630

46.630

46.630

50,225

50,225

50,225

Form 990-PF (2019)

Form 990-PF (2019)

Part XI

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

Page 9

46,630

Form **990-PF** (2019)

1	_	_	•	•	٠,-	
ĺ	E	X		П	ī	

Par

)-PF	(2	01	9	)	

-PF (20	019)	
Ш	Undistributed Income	(see instructions)

a From 2014. . . . .

**b** From 2015. . . . .

e From 2018. . . . .

c From 2016. . . d From 2017. . . . .

1 Distributable amount for 2019 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2019: a Enter amount for 2018 only. . . . . . **b** Total for prior years: 2017, 2016, 2015 Excess distributions carryover, if any, to 2019:

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2019 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015. .

**b** Excess from 2016. .

c Excess from 2017. . . .

d Excess from 2018. . .

e Excess from 2019. . .

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract 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. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . . . . e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 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

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . . (a)

Corpus

38.590

3.595

42,185

13.156

29,029

13.156 5,372

7,605

6.969 5,488

5.372 7,605

6.969

5.488

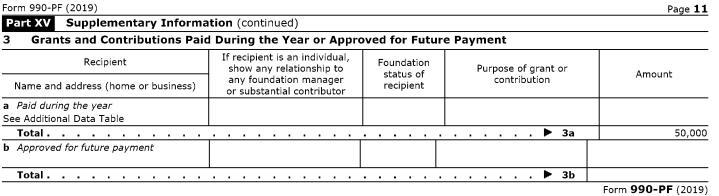
3.595

(b)

Years prior to 2018

(c)

2018



ter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
a b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments Interest on savings and temporary cash investments					
Dividends and interest from securities			14	37,805	
Net rental income or (loss) from real estate:				,	
a Debt-financed property					
<b>b</b> Not debt-financed property					
Net rental income or (loss) from personal property Other investment income					
Gain or (loss) from sales of assets other than					
inventory			18	-629	
Net income or (loss) from special events:					
Gross profit or (loss) from sales of inventory					
Other revenue: a					
b					
d					
d					
e Subtotal. Add columns (b), (d), and (e).				37,176	
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)			13	37,176 <b>3</b>	
e Subtotal. Add columns (b), (d), and (e)	lations.)			•	
e Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	37,176
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second s	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second s	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second s	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second s	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second s	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second section of the accomplishment of the foundation's expenses.	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second s	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second s	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the second	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the second	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the second	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the second	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate XVI-B  Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the second	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second s	lations.)  e Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	

٠.	1111 330 11 (20			
		Information Regarding Transfers To and Transactions and Relationships With Noncharit	able	
ŀ	Part XVII	Exempt Organizations	.abic	
L		nization directly or indirectly engage in any of the following with any other organization described in section 501		v

		organization directly or in er than section 501(c)(3)						on 501	Yes No
`	, ,	rs from the reporting foun	,		,	-			
		sh						. 1a(1)	l No
ì	2) Oth	ner assets						. 1a(2)	No
_	-	ansactions:							
(	<b>1)</b> Sal	les of assets to a nonchari	itable exempt o	rganization.				1b(1)	No
-	-	rchases of assets from a r	•	-				1b(2)	No
-	-	ntal of facilities, equipmer						1b(3)	No
-	-	imbursement arrangemen	•					. 1b(4)	No
		ans or loan guarantees.						. 1b(5)	No
		formance of services or m						. 1b(6)	No
•	-	of facilities, equipment, n	·	-				. 1c	No
	_	nswer to any of the above		•			wavs show the fair r		
		oods, other assets, or ser ransaction or sharing arra							
(a) L	ine No.	(b) Amount involved	(c) Name of nor	ncharitable exe	mpt organization	(d) Description of	transfers, transactions	, and sharing arrai	ngements
<b>2</b> a I	s the fo	oundation directly or indire	ectly affiliated w	ith, or relate	d to, one or more t	tax-exempt organ	izations		
d	escribe	ed in section 501(c) (other	r than section 5	01(c)(3)) or i	in section 527? .		🗆 Y	es 🗹 No	
b I	f "Yes,"	complete the following s	chedule.						
		(a) Name of organization	on	(1	<b>b)</b> Type of organizatio	n	(c) Description	of relationship	
	of wl	nder penalties of perjury, my knowledge and belief hich preparer has any kno	, it is true, corre						
Sig		*****			2020-11-15	*****		May the IRS dia	scuss this
lei	re							with the prepar	er shown
		Signature of officer or t	rustee		Date	Title		below	a _
		orginature or officer or c	. 43000			11010		(see instr.) 🗹	] Yes □ No
		Print/Type preparer's	name Pr	eparer's Sigr	nature	Data		PTIN	
		Tring Type preparer s		eparer 3 Sign	latare	Date	Check if self-		
		DEDEGGA 1 MAGUIT					employed ▶ □	P00025	315
Pai	d	REBECCA J MACHI	NGA			2020-11-15			
	pare	Firm's name WIT	 HUM SMITH BRO	NAM DC		1			
	Onl		JOM SMITH BKC	JVVIN PC				Firm's EIN ►	
			6 CARNEGIE CE	NTER STE 40	00				
								Phone no. (609)	) 520-1188
		PR	INCETON, NJ (	085406243				(003	, , 1100

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

BRIAN LAURENTI

LAURENCE LAURENTI JR

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

TRENTON CATHOLIC ACADEMY 175 LEONARD AVENUE TRENTON, NJ 08619	NONE	PC	CHARITABLE CONTRIBUTION	5,800
SERV FOUNDATION20 SCOTCH ROAD EWING, NJ 08628	NONE	PC	CHARITABLE CONTRIBUTION	3,500

EWING, NJ 08628	NONE	PC	CHARITABLE CONTRIBUTION	3,500
VAN WEZEL FOUNDATION INC PO BOX 3434 SARASOTA, FL 34230	NONE	PC	CHARITABLE CONTRIBUTION	3,000

50,000

EWING, NJ 00020				1
VAN WEZEL FOUNDATION INC PO BOX 3434 SARASOTA, FL 34230	NONE	PC	CHARITABLE CONTRIBUTION	3,00
				í

VAN WEZEL FOUNDATION INC	NONE	PC	CHARITABLE CONTRIBUTION	3,
PO BOX 3434				
CADACOTA EL DADOS		1	l .	

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CENTER FOR EDUCATIONAL NONE PC CHARITABLE CONTRIBUTION 2,500

11 MINNEAKONING ROAD PENNINGTON, NJ 08822				
PLATINUM MINDS 95 WEST MAIN STREET CHESTER, NJ 07930	NONE	PC	CHARITABLE CONTRIBUTION	2,000

PLATINUM MINDS 95 WEST MAIN STREET CHESTER, NJ 07930	NONE	PC	CHARITABLE CONTRIBUTION	2,000
CHILDREN'S SCHOLARSHIP FUND 100 BROAD ST PHILADELPHIA, PA 19103	NONE	PC	CHARITABLE CONTRIBUTION	2,000

Total			▶ 3a	50,000
CHILDREN'S SCHOLARSHIP FUND 100 BROAD ST PHILADELPHIA, PA 19103	NONE	PC	CHARITABLE CONTRIBUTION	2,000
95 WEST MAIN STREET CHESTER, NJ 07930				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

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

NONE

RESCUE MISSION OF TRENTON

98 CARROLL ST TRENTONQ, NJ 08609				
ST LAWRENCE REHABILITATION CENTER 2281 LAWRENCEVILLE RD	NONE	PC	CHARITABLE CONTRIBUTION	5,000

PC

CHARITABLE CONTRIBUTION

CENTER 2281 LAWRENCEVILLE RD TRENTON, NJ 08648	NONE	<b>FC</b>	CHARTIABLE CONTRIBUTION	3,000
INTERFAITH CARE GIVERS 3635 QUAKERBRIDGE ROADD	NONE	PC	CHARITABLE CONTRIBUTION	2,500

TRENTON, NJ 08648				
INTERFAITH CARE GIVERS 3635 QUAKERBRIDGE ROADD HAMILTON, NJ 08619	NONE	PC	CHARITABLE CONTRIBUTION	2,500
Total			▶ 3a	50,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GROUNDS FOR SCULPTURE NONE PC CHARITABLE CONTRIBUTION 350

NONE	PC	CHARITABLE CONTRIBUTION	1,000
	NONE	NONE PC	NONE PC CHARITABLE CONTRIBUTION

PO BOX 145 HOPEWELL, NJ 08525	NONE		CHARTABLE CONTRIBUTION	1,000
HAMILTON BALLET315 SYLVAN AVE TRENTON, NJ 08619	NONE	PC	CHARITABLE CONTRIBUTION	1,000

Total . .

50,000

■ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

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

or substantial contributor

Name and address (home or business)

Total .

THE RANGE OF MOTION PROJECT PO BOX 100915 DENVER, CO 80250	NONE	PC	CHARITABLE CONTRIBUTION	3,500
a Paid during the year				

MEALS ON WHEELS 320 HOLLOWBROOK DR EWING, NJ 08638	NONE	PC	CHARITABLE CONTRIBUTION	1,500
DRESS FOR SUCCESS	NONE	PC	CHARITABLE CONTRIBUTION	1,500

EWING, NJ 08638				
DRESS FOR SUCCESS 3131 PRINCETON PIKE LAWRENCEVILLE, NJ 08648	NONE	PC	CHARITABLE CONTRIBUTION	1,500

LW1NG, NJ 08038				
DRESS FOR SUCCESS 3131 PRINCETON PIKE LAWRENCEVILLE, NJ 08648	NONE	PC	CHARITABLE CONTRIBUTION	1,5

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor.

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

a Paid during the year				
HOME FRONT1880 Princeton Ave LAWRENCEVILLE, NJ 08648	NONE	PC	CHARITABLE CONTRIBUTION	1,000

LAWRENCEVILLE, NJ 08648				
CAPITAL AREA YMCA 431 Pennington Ave TRENTON NJ 08618	NONE	PC	CHARITABLE CONTRIBUTION	1,000

CAPITAL AREA YMCA 431 Pennington Ave TRENTON, NJ 08618	NONE	PC	CHARITABLE CONTRIBUTION	1,000
Final Farewell93 Old York Rd 1	NONE	PC	CHARITABLE CONTRIBUTION	500

TRENTON, NJ 08618				
Final Farewell93 Old York Rd 1 JENKINTOWN, PA 19046	NONE	PC	CHARITABLE CONTRIBUTION	500

Final Farewell93 Old York Rd 1 JENKINTOWN, PA 19046	NONE	PC	CHARITABLE CONTRIBUTION	500

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Mercer County Bar Association NONE PC CHARITABLE CONTRIBUTION 600

1245 Whitehorse Mercerville Rd TRENTON, NJ 08619				
CHA FOUNDATION685 Kromer Ave BERWYN, PA 19312	NONE	PC	CHARITABLE CONTRIBUTION	250
Lutheran Social Ministries 3 Manhattan Dr BURLINGTON, NJ 08016	NONE	PC	CHARITABLE CONTRIBUTION	1,500

Total . .

50,000

■ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

a raid daring the year				
Mount Carmel Guild Trenton 73 N Clinton Ave TRENTON, NJ 08609	NONE	PC	CHARITABLE CONTRIBUTION	1,500
				ı

TREITTON, NS 00005				
PEI KIDS231 Lawrence Rd LAWRENCEVILLE, NJ 08648	NONE	PC	CHARITABLE CONTRIBUTION	1,000
MCCC FOUNDATION 1200 Old Trenton Rd	NONE	PC	CHARITABLE CONTRIBUTION	5,000

LAWRENCEVILLE, NJ 08648				,
MCCC FOUNDATION 1200 Old Trenton Rd TRENTON, NJ 08550	NONE	PC	CHARITABLE CONTRIBUTION	5,000
Total			▶ 3a	50,000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DL	.N: 934913210290	10
TY 2019 All Other Program Related Investments Schedule				
Name:	Laurenti Famil	y Charitable Trust		
EIN:	22-3697005			
	Category		Amount	
NONE				0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491321029010 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2019 Depreciation Schedule Name: Laurenti Family Charitable Trust

**EIN:** 22-3697005

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491321029010		
TY 2019 Investments Corporate Bonds Schedule					
Name: l	_aurenti Family C	haritable Trust			

name:	Laurenti Family Charitable Trust
EIN:	22-3697005

Name of Rend	End of Voor Book	End of Voor Enir	i	
Investments Corporate Bonds Schedule				
<b>EIN:</b> 22-369/005				

Name of Bond	End of Year Book Value	End of Year Fair Market Value
LEHMAN BROS HLDINGS 7.2%	46,398	840

efile GRAPHIC	print - DO NOT PROCESS	As Filed Data -

## DLN: 93491321029010

## **TY 2019 Investments Corporate Stock Schedule**

Name: Laurenti Family Charitable Trust

**EIN:** 22-3697005

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
ALPS INTL SECTOR DIVIDEND	20,827	20,603		
ISHARES IBOXX INVESTOP	92,223	102,368		
ISHARES TRUST S&P 500	13,076	32,324		
SPDR S&P DIVIDEND ETF	17,856	32,271		
ISHARES US PFD	71,926	67,662		
INVESCO VARIABLEVRATE	0	0		
FIRST TR NASDAQ TECH DIV	27,511	38,808		
CHEVRON CORPORATION	10,356	12,051		
CISCO SYSTEMS, INC.	13,986	14,868		
DIAGEO PLC	11,017	16,842		
GENERAL MOTORS CO	11,272	14,640		
METLIFE INC	10,590	15,291		
SONY CORPORATION	8,517	20,400		
INVESCO BULLETSHARES 2021	19,899	20,110		
ISHARES ASIA/PACIFIC	26,697	24,063		
ISHARES CORE HIGH DIVIDEND ETF	19,957	20,595		
ISHARES CORE MSCI EAFE	46,969	48,930		
PFIZER INCORPORATED	14,794	15,672		
FIDELITY DIVIDEND RSNG	0	0		
SPDR INTRMDT TRM CRPRATE BOND	50,281	50,317		
SPDR MSCI EAFE	15,051	17,365		
VANECK VECTORS PREFERRED	30,070	30,330		
VANGUARD EMERGING MARKETS	18,755	20,353		
VANGUARD REAL ESTATE	11,619	13,919		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491321029010			
TY 2019 Investments - Other Schedule					

Name: Laurenti Family Charitable Trust

**EIN:** 22-3697005

<b>EIN:</b> 22-309/003				
Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
BAIRD CORE PLUS BD INST	AT COST	25,376	26,381	
DOUBLELINE TOTAL RETURN	AT COST	100,000	96,112	
USAA INCOME FUND	AT COST	84,871	85,450	
DOUBLELINE EMRG MKTS	AT COST	20,447	20,768	
PIMCO INCM INST CL	AT COST	650	0	
VANGUARD HIGH YIELD CORP	AT COST	50,000	51,345	
VIRTUS SEIX FLOAT RATE	AT COST	0	0	

Name: Laurenti Family Charitable Trust

DIVIDENDS RECEIVABLE

Beginning of Year -

**Book Value** 

196

Other Assets Schedule

Description

**EIN:** 22-3697005

As Filed Data -

Value

DLN: 93491321029010

End of Year - Book

530

End of Year - Fair

530

Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491321029010	
TY 2019 Other Expenses Schedule					
Name:	Laurenti Family	Charitable Trust			
EIN:	22-3697005				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FILING FEE	225			225	

efile GRAPHIC print - DO NOT PROCE	ESS As Filed Data	-	DL	N: 93491321029010		
TY 2019 Other Professional Fees Schedule						
Name: Laurenti Family Charitable Trust						
EIN: 22-3697005						
Category	Amount	Net Investment	Adjusted Net	Disbursements		

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
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4,780

4,810

INVESTMENT MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN: 93491321029010				
TY 2019 Taxes Schedule							
Name: Laurenti Family Charitable Trust							
<b>EIN:</b> 22-3697005							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
FOREIGN TAXES	277	277					
FEDERAL INCOME TAX	1,040	0	1				