Form **990-PF**

(10,0)

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.

1912

2019

► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2019 or tax year beginning and ending Name of foundation A Employer identification number EDISON PROPERTIES NEWARK FOUNDATION 22-6872667 Number and street (or P O box number if mail is not delivered to street address) Room/sulte B Telephone number 110 EDISON PLACE, SUITE 300 (973)643-7700 City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here NEWARK, NJ 07102 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, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination, (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 6,845,929. (Part I, column (d), must be on cash basis.) Analysis of Revenue and Expenses Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books Contributions, gifts, grants, etc., received 2 Check \(\bigcap \bi Interest on savings and temporary cash investments SCANNED AUG 1 9 2021 12,014. 12,014. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 78,583. 62 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 439,054. 78,583. 7 Capital gain net Income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 7,173. 7,173. 0.STATEMENT 2 11 Other income 97,770. 97,770. 0. Total. Add lines 1 through 11 0. Ο. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 0 0. 0. STMT 3 3,638 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest STMT 4 552 Ō. 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications O. 12. STMT 5 12. 0 23 Other expenses 24 Total operating and administrative 4,202. 12 0 0. expenses. Add lines 13 through 23 321,211. 321,211. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 12 325,413 0. 321,211. Add lines 24 and 25 27 Subtract line 26 from line 12: <227,643.b 8 Excess of revenue over expenses and disbursements 97,758 b Net investment income (if negative, enter -0-)

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

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

Form **990-PF** (2019)



0.

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	509,878.	659,741.	659,741.
	3	Accounts receivable ► 360 .			
		Less; allowance for doubtful accounts	<u>_</u>	360.	360.
	4	Pledges receivable			
	1	Less: allowance for doubtful accounts ▶	_		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			•
	ł	disqualified persons			
	7	Other notes and loans receivable	· · · · · · · · · · · · · · · · · · ·		5.4
		Less: allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis		<u>, , , , , , , , , , , , , , , , , , , </u>	
	1	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	6,840,341.	6,462,475.	6,185,828.
	14	Land, buildings, and equipment: basis	-		
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	[
_	<u> </u>	instructions. Also, see page 1, item I)	7,350,219.	7,122,576.	6,845,929.
	17	Accounts payable and accrued expenses			·
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ja j	21	Mortgages and other notes payable			<u>'</u>
-	22	Other liabilities (describe			
				ا م	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			,
Ses	l	and complete lines 24, 25, 29, and 30.			1
Fund Balances	24	Net assets without donor restrictions			
Ba	25	Net assets with donor restrictions			
Ē	l	Foundations that do not follow FASB ASC 958, check here	1	}	
Ţ		and complete lines 26 through 30.	0.	0.	". [
ō	26	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or	27	Paid-in or capital surplus, or land, bldg., and equipment fund	7,350,219.	7,122,576.	
As	28	Retained earnings, accumulated income, endowment, or other funds	7,350,219.	7,122,576.	
Net	29	Total net assets or fund balances	1,330,213.	1,122,370	
		Tatal Bakillaha and nat accept the distance	7,350,219.	7,122,576.	: 1
_	30	Total liabilities and net assets/fund balances		7,122,570.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29	I	
		t agree with end-of-year figure reported on prior year's return)		1	7,350,219.
		amount from Part I, line 27a	•	2	<227,643.>
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	7,122,576.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h), line 29	6	7,122,576.

Part IV	Capital Gains a	and Losses for Tax on Ir	nvestmen	t Income					
	(a) List and describe to 2-story brick wa	the kind(s) of property sold (for exa rehouse; or common stock, 200 sh	mple, real esta s. MLC Co.)	ite,	ΙP	low ac - Purc - Dona	ation	(c) Date acquired (mo., day, yr.)	(mo., day, yr.)
1a TIFF	MULTI-ASS	ET FUND 20254					P	02/22/11	06/14/19
b TIFF	PRIVATE E	QUITY PARTNERS 2	005 LL	C			P	VARIOUS	12/31/19
C									
_d		-	· 		└				
<u>e</u>					<u> </u>				<u> </u>
(e) G	ross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (lo: ((e) plus (f) minu	s (g))
<u>a</u>	313,999.			360,47	1.				<46,472.
<u>b</u>	125,055.		ļ						125,055.
<u>c</u>					_				
<u>d</u>									
Complet	a ank for accets chause	g gain in column (h) and owned by	the foundation	12/21/60			<i>"</i>	C-i (O-1 (b)	
Complete	e only for assets snowing		,					Gains (Col. (h) ga (k), but not less th	
(i) FM	V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any	- 1			Losses (from col	l. (h))
	——— -	43 07 120 1700	-						<46,472.
<u>a</u> b			 		-				125,055.
								·- <u>-</u>	123,033.
<u>c</u>					+				
e			 					 	
			L		$\overline{}$				
2 Canital na	in net income or (net cap	pital loss) $\begin{cases} If \text{ gain, also enter} \\ If (loss), \text{ enter } -0 \end{cases}$	r in Part I, line - in Part I, line	7	١١	2			78,583.
, ,	, ,			,	ノト	-			,
	-term capital gain or (los: so enter in Part I, line 8, d	s) as defined in sections 1222(5) an	10 (6):		٦١	1			
	enter -0- in Part I, line 8	column (c).			PI	3			0.
Part V	Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inve	estm	ent Inco	ome	
(For optional	use by domestic private	foundations subject to the section 4	4940(a) tax on	net investment in	come.	.)			
			• •			•			
if section 494	10(d)(2) applies, leave th	is part blank.							
Was the foun	dation liable for the secti	ion 4942 tax on the distributable am	ount of any ye	ear in the base peri	od?				🔲 Yes 🛣 No
If "Yes," the fo	oundation doesn't qualify	under section 4940(e). Do not com	nplete this par	t					
1 Enter the	appropriate amount in e	ach column for each year; see the ir	nstructions be	fore making any er	ntries.				
	(a) Base period years	(b)			(c)			Dist	(d) ribution ratio
Calendar y	ear (or tax year beginnin			Net value of no				(col. (b) c	divided by col. (c))
	2018		7,974.				1,351		.045820
	2017		5,418.				0,575		.046767
	2016	<u>+.</u>	9,755.				0,745		.051818
	2015		1,959.				2,526		.051792
	2014		0,732.		6,	<u>, 93</u>	4,299.		.040485
								1 1	006600
	ne 1, column (d)							2	.236682
-		-year base period - divide the total o	on line 2 by 5.0	D, or by the numbe	er of y	ears		1 1	
the founda	ation has been in existen	ce if less than 5 years						3	.047336
								1 1	
4 Enter the r	net value of noncharitabl	e-use assets for 2019 from Part X, I	line 5					4	6,548,877.
								1 1	
5 Multiply lii	ne 4 by line 3	••						5	309,998.
								1 1	
6 Enter 1%	of net investment incom	e (1% of Part I, line 27b)						6	978.
									040 0
7 Add lines	5 and 6							7	310,976.
								{	204 211
8 Enter qual	ifying distributions from	Part XII, line 4							321,211.
	equal to or greater than art VI instructions.	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	6 tax r	ate.		

Form 990-PF (2019) EDISON PROPERTIES NEWARK FOUN		22-687		Page 4
Part VI Excise Tax Based on Investment Income (Section 494	10(a), 4940(b), 4940(e), or 4	1948 - see	instructio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and	enter "N/A" on line 1.			J
Date of ruling or determination letter: (attach copy of letter if ne				j
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ X and enter 1%	1	9	78.
of Part I, line 27b	1			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4	% of Part I, line 12, col. (b)	'	•	1
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; of	· ·	2		0.
3 Add lines 1 and 2	,	3	9	78.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only;	others, enter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5	9	78.
6 Credits/Payments:				
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 8,253.			İ
b Exempt foreign organizations - tax withheld at source	6b 0.	1 .		
c Tax paid with application for extension of time to file (Form 8868)	6c 0.	1 1		.
d Backup withholding erroneously withheld	6d 0.	<u>'</u>		
7 Total credits and payments. Add lines 6a through 6d	<u> </u>	7	8.2	53.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is atta	ached	8		0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	7.2	75.
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	7,275. Refunded	11	.,,-	0.
Part VII-A Statements Regarding Activities	7 / 2 / 3 C Netunada	<u></u>	·	<u>`</u>
1a During the tax year, did the foundation attempt to influence any national, state, or local legit	slation or did it participate or intervene	ın	Yes	No
any political campaign?	olation of old it participate of into vone		1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses? See the instructions for the defin	ition	16	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies		14011	-"- 	
distributed by the foundation in connection with the activities.	or any materials published of			1
c Did the foundation file Form 1120-POL for this year?			1c	X
·	o vear		1-10-	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the (1) On the foundation. ▶ \$ 0 • (2) On foundation managers				1 }
(1) On the foundation. ► \$ U • (2) On foundation managers e Enter the reimbursement (if any) paid by the foundation during the year for political expend	· · · 	•		
	inture tax imposed on foundation		1 1	j j
	DC2			X
2 Has the foundation engaged in any activities that have not previously been reported to the I	no r			<u> </u>
If "Yes," attach a detailed description of the activities.	unatrument articles of incorporation of	.=	1 1	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of incorporation, c	ır	3	X
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	~~?	•	4a	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	di ,	N/Ą	4b	<u> </u>
b If "Yes," has it filed a tax return on Form 990-T for this year?	2	14 \ \tau	5	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year'	•			 ^
If "Yes," attach the statement required by General Instruction T.	uthors		1 1	
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	illier.		1	
By language in the governing instrument, or			1 1.	1 1
By state legislation that effectively amends the governing instrument so that no mandator	ry directions that conflict with the state	aw	$\left \frac{}{6} \right = X$	
remain in the governing instrument?	1 to Do all 1 (a) 1 Do about			
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	plete Part II, col. (c), and Part XV		7 X	
On False the above to subject the foundation which the foundation with subject to the second Comments and Com	🟲		1	
8a Enter the states to which the foundation reports or with which it is registered. See instruction	ons.			
NJ	Attorney Congrel (or decisests)			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	acciney General (or designate)		8b X	
of each state as required by General Instruction G? If "No," attach explanation	40.40(1/0)		8b X	├ ─∹ .
9 Is the foundation claiming status as a private operating foundation within the meaning of se		ndar		ر لـــار
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," con		•	9	
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ule listing their names and addresses		10	<u>A</u>
		Fr	orm 990-PF	(2019)

923531 12-17-19

Form	1 990-PF (2019) EDISON PROPERTIES NEWARK FOUNDATION 22-687	2 <u>66</u> 7	'	Page !
Pa	art VII-A Statements Regarding Activities (continued)		15.0	T
	Many have describe to a debt of the feet of the control of the described of the control of the c	<u> </u>	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	 ''		<u> </u>
12	If "Yes," attach statement. See instructions SEE STATEMENT 8 SEE STATEMENT 9	12	x	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► RACHEL WARREN Telephone no. ► (973)	<u>543</u> -	770	0
	Located at ▶110 EDISON PLACE, SUITE 300, NEWARK, NJ ZIP+4 ▶0'			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	<u> </u>		
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	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?			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			l l
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	']]]
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	*		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	·		ĺ	H
	(6) Agree to pay money or property to a government official? (Exception, Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No		ļ	
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	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 were not corrected		,	,
•	before the first day of the tax year beginning in 2019?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		. 1
_	defined in section 4942(j)(3) or 4942(j)(5)):		j	
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?			1
	If "Yes," list the years > , , , ,			{
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	<u> </u>		
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		1	
	>			ĺĺ
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	1 1		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose]]		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			لــــا
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		ļ
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

Part VIII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Form 990-PF (2019) EDISON PROPERTIES NEWAR			22-68726	67	Page 6
(1) Carry on prospagands, or otherwise attempt to eritience legislations (section 4945(s))? (2) Influence the outcome of any sporfile public electron (see section 4955) for to carry on, directly or indirectly, any vater registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (3) Provide any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cruelly to children or animals? (5) Provide to any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cruelly to children or animals? (6) If any answers "x's to 56(1)-56, dut may for the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance, exhibit the section of the section of the section 53.4945 or in a current notice regarding disaster assistance, exhibit the control of the section of t		Form 4720 May Be	Required (contin	ued)	15.2	
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any other registration driver? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization offer than a charitable, etc., organization described in section 4945(6)(4)? See mistruction of carety to children or animals? (5) Provide for any purpose other than religious, charitable, etc., organization described in section 34945(6)/4)? See mistruction of carety to children or animals? (6) If any answer is "Vest to \$51(745), did any of the transactions fall to qualify under the exceptions described in Regulations section \$5.495 or in a current notice regarding desaster assistance, theck here of the assister river to question \$4945, does the foundation children cerebron from the tax because it maintained expenditure responsibility for the grant? (1) "Yes, study the subtraction required by Regulations section \$5.4945-5(d). 5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a genorate benefic contract? (a) If yes, did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? (b) If the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? (b) If the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? (c) If yes, did the foundation or receive any price codes or have any set income attributable to the transaction? (a) If the foundation of receive any price codes or have any set income attributable to the transaction? (b) If the foundation during the year? (c) Compensation (d) Remain and address of each employees and more than \$50,000 (e) The part of the transaction of the price of	• • • • • • • • • • • • • • • • • • • •		<u> </u>	[32]	Ye	S NO
any veter registration drive? (3) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(0)(4)(A)? See instructions (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(0)(4)(A)? See instructions (5) Provide to any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of creitly to children or animals? (5) Provide to any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of creitly to children or animals? (6) If any answer sives 156(1)(5) did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance, the charitage of the composition of the law assistance in the prevention of creitly to charitage and the composition of the lours and single and composition of the law assistance in the composition of the law assistance in the composition of the program of the law assistance in the composition of the law assistance in the composition of the law assistance in the law assistan	The state of the s			es 🔼 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, charitable, scendinc, interary, or educational purposes, or for the previous or careful to different or animals? (6) Provide for any purpose other than religious, charitable, scendinc, interary, or educational purposes, or for the previous or careful to different or animals? (7) If any answer is "set" to \$15(1)*-(5), old any of the transactions lat 10 quality under the exceptions described in Regulations section \$3.495 or in a current notice regarding desaster assistance, check here of the assistance reset on the set of the consideration of the statement required by Regulations section \$3.4945-5(0). 8a Od the foundation, during the year, recover any funds, directly or indirectly, to pay primitions of the foundation, during the year, recover any funds, directly or indirectly, to pay primitions on a personal benefit contract? 1) Yes 1 Sol, the Form 89.0. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? 9 In Yes, did the foundation recover any proceeds for have any set income attributable to the transaction? 10 If Yes, did the foundation recover any proceeds for have any set income attributable to the transaction? 11 If yes 1 and year the foundation of the set of the se		or to carry on, directly or indir		(V) No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of routily to children or animals? If any answers 'ves' to 54(1)(5), oit any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions Organizations religion on current notice regarding disaster assistance? See instructions Organizations religion on current notice regarding disaster assistance? See instructions Organizations religion on current notice regarding disaster assistance? See instructions Organizations religion on current notice regarding disaster assistance? See instructions Organizations religion on current notice regarding disaster assistance? See instructions Organizations religion on current notice regarding disaster assistance? See instructions Organizations religion on current notice regarding disaster assistance? See instructions Organizations religion on current notice regarding disaster assistance? See instructions Organizations religion on current notice regarding disaster assistance? See instructions Organizations religion on the state of the constitution of the fact and the current of the constitution of the fact and the current of the current of the current of the current of the fact and the current of the fact and the current of the fact and the current of the current of the current of the fact and the current of the current of the fact and the current of the current of the fact and t		?	· =		-	·]]
4945(d)4(A)/A) See instructions (5) Provide for any purpose of the thrain religious, charitable, scientific, literary, or educational purposes, or for the prevention of civelity to children or animals? b I any answer is "set to \$34(1)-65, do any of the transactions fail to qualify under the exceptions described in Regulations section \$3.4(3) does the foundation state assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here of It the answers "Set to question \$34() does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "set, states the statement required by Regulations section \$3.4945-5(d). 5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "set to 6b, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part XIII. A 1 and year during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part XIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Name and address (c) Compensation (a) Name and address (b) FIRM, and average but for the party of the pa			L T	ו מאובב אי	1 -	
(e) Provide for any purpose other than religious, charitable, scientific, therary, or educational purposes, or for the prevention of cruelty to children or animals? If any answer is "Yes "to 5a(1)(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding desiater assistance? See instructions Organizations religion on current notice regarding desiater assistance? See instructions Organizations religion on current notice regarding desiater assistance? See instructions Organizations religion on current notice regarding desiater assistance? See instructions Organizations religion on current notice regarding desiater assistance? See instructions Organizations religion on current notice regarding desiater assistance? See instructions Organizations religion on current notice regarding desiater assistance? See instructions Organizations religion on the religion of the same design of the same design of the same design of the form 870. 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to Mile Form 870. 7a At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? 7a At any time during the year, premiums, directly or indirectly, to pay premiums on years and the foundation, during the year. 7a At any time during the year, premiums, directly or indirectly, to pay premiums on years and the foundation of the foundation received any proceeds or have any net income attributable to the transaction? 8 is the foundation, during the year? 9 if "Yes" [X] No 8 is the foundation, during the year. 9 if "Yes" [X] No 1 List all officers, the foundation received any proceeds or have any net income attributable to the transaction? 1 List all officers, the foundation received any proceeds or have any net income attributable to the transaction? 9 if "Yes" [X] No 1 List all officers and the foundation received any pr		on described in section		ac 🔽 No	H	- [-
the prevention of cruelly to children or anomals? If if any answer is "Yes" to Sa(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section \$3.945 or an acurrent notice regarding desaster assistance, check here or it the answer s'ves to question \$40,406 set the foundation characteristic for the compensation of the statement required by Regulations section \$5.4945-5(d). Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on the foundation, during the year, pay premiums, directly or indirectly or		v or educational nurnoses or		53 (AE) 100		
b If any answer is Yes' to Sa(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance, check here c If the answer is Yes' to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes, attach the statement required by Regulations section 53.4945-5(d). So Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes's attach the statement required by Regulations section 53.4945-5(d). So Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes's attach the statement required by Regulations section 53.4945-5(d). So Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If Yes is the foundation of the foundation received any foundation and party to a prohibited tax sheller transaction? If Yes are the foundation received any proceeds or have any net income attributable to the transaction? If Yes to Si, the Form 820. If Yes are the foundation received any proceeds or have any net income attributable to the transaction? If Yes are the foundation received any proceeds or have any net income attributable to the transaction? If Yes are the foundation received any proceeds or have any net income attributable to the transaction? If Yes are the foundation received any proceeds or have any net income attributable to the transaction? If Yes are the foundation received any proceeds or have any net income attributable to the transaction? If Yes are the foundation received any proceeds or have any net income attributable to the transaction? If Yes are the foundation received any proceeds or have any net income attributable to the transaction? If Yes are the foundation received any proceed any transaction or the		y, or cadoattorial parposco, or		es X No	:	
section 53.4945 or in a current notice regarding disaster assistance, beck here c if the answer is "Yes" to quetion 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? if "Yes, "attain the statement required by Regulations section 53.4945-5(d). \$ Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal binent contract? If "Yes I admit the statement required by Regulations section 53.4945-5(d). \$ Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal binent contract? If "Yes to 6b, the Form 8870. Yes I No b If "Yes," do the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paractivite payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. CARY DEBODE TRUSTEE GRAY DEBODE TRUSTEE Q Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (g) Name and address of each employee paid more than \$50,000 TRUSTEE Q Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (g) Name and address of each employee paid more than \$50,000 Trustee (g) Name and address of each employee paid more than \$50,000 Trustees (g) Name and address of each employee paid more than \$50,000 Trustees (g) Name and address of each employee paid more than \$50,000 Trustees (g) Compensation (g)	•	nder the exceptions described			٠, ١	
Cryamizations retying on a current notice regarding disaster assistance, check here c If the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53,4945-5(d). But the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal binefit contract? but the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes to 6b, file Form 8870. 7a At any time during the taxyear, was the foundation a party to a prohibited tax shelter transaction? If "Yes to 6b, file Form 8870. 7a At any time during the taxyear, was the foundation a party to a prohibited tax shelter transaction? If "Yes to 6b, file Form 8870. 7a At any time during the taxyear, was the foundation aparty to a prohibited tax shelter transaction? 8 is the foundation subject to the section, 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paractule payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Palad Employees, and Contractors 1. List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) TERNWOOD RD TRUSTEE (c) Compensation (d) C	* * * * * * * * * * * * * * * * * * * *			N/A	5b	-
c If the answer is Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes', attach the statement required by Regulations section 53.4945-5(d). 8a Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If Yes' to 6b, the Form 8870. 7a At any time during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes' to 6b, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? 8b If Yes', did the foundation receive any proceeds or have any net income attributable to the transaction? 9c If Yes' and the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paractivite payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address Compensation of five highest-paid employees (other than those included on line 1). If more, enter "NONE." Compensation of five highest-paid employees (other than those included on line 1). If more, enter "NONE." Compensation of five highest-paid employees (other than those included on line 1). If more, enter "NONE." Compensation of five highest-paid employees (other than those included on line 1). If more, enter "NONE." Compensation of five highest-paid employees (other than those included on line 1). If more, enter "NONE." Compensation of five highest-paid employees (other than those included on line 1). If more, enter "NONE." Compensation of five highest-paid employees (other than those included on line 1). If more, enter "NONE." Compensation of five highest-paid employees (other than those included on line 1). If more, enter "NONE." Compensation of five highest-pai	• •		•			
expenditure responsibility for the grant? If Yes, attach the statement required by Regulations section 53.4945-5(s). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes's 10 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paractive payments) during the year. Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pard Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) File, and average to the provided on the year of the provided on			uned			
Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If 'Yes' to 6b, the Form 8870. If 'Yes' to 6b, the Form 8870. Yes X No b If 'Yes,' did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to 6b, the Form 8870. Yes X No b If 'Yes,' did the foundation subject to the section 4860 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors Lust all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) Fills, and average hours per week devoided to position (fill not paid, enter-0-) SUMMIT, NJ 07901 O.00 O. O. ARGERY GOTTESMAN TRUSTEE (c) Compensation (d) Combitates is a calculut, other allowances and contractors and contractors and contractors and contractors and contractors. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation (d) Combitates is a calculut, other allowances and contractors and contractors. (d) Compensation (d) Combitates is a calculut, other allowances and contractors. (fill not paid, enter-0-) ARGERY GOTTESMAN TRUSTEE O.00				es 🔲 No		
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? b If Yes' to 6b, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If Yes', did the foundation receive any proceeds or have any net income attributable to the transaction? b If Yes', the form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If Yes' is 4b, the Form 8870. 7b If Yes' is 4b, the Form 8870. 7c At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If Yes' is 4b, the Form 8870. 7b If Yes' is 4b, the Form 8870. 7c Is At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If Yes' is 4b, the Form 8870. 7c Is At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? N/A 7b If Yes' is 4b, the Form 8870. N/A 1c If Yes' is 4b, the Form 8870. N/A 1c If Yes' is 4b, the Form 8870. N/A 1c If Yes' is 4b, the Form 8870. N/A 1c If Yes' is 4b, the Form 8870. N/A 1c If Yes' is 4b, the Form 8870. N/A 1c If Yes' is 4b, the Form 8870. N/A 1c If Yes' is 4b, the	If "Yes," attach the statement required by Regulations section 53.4945-5(d).				- 1]
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes's to 6b, the Form 8870. Yes X No b if Yes's, did the foundation aparty to a prohibited tax shelter transaction? A lat yet me during the tax year, was the foundation a party to a prohibited tax shelter transaction? A list the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) Title, and average (c) Compensation (fill not paid, enter 0-) TRUSTEE TRUSTEE TRUSTEE TRUSTEE 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 D. 0. 0. 0. 0. 0. 0. Total number of other employees paid over \$50,000	6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		1	·]]
If Yes' to 6b, file Form 8870. Yes X No If Yes' to 6b, file Form 8870. Yes A large time during the tax year, was the foundation a party to a prohibited tax shelter transaction? N/A 7b If Yes' to 6th feoundation receive any proceeds or have any net income attributable to the transaction? N/A 7b If Yes' to 6th feoundation receive any proceeds or have any net income attributable to the transaction? N/A 7b If Yes' to 6th feoundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Yes X No Yes X No Yes X No Yes X	a personal benefit contract?		Y	es 🗶 No 📙	i	
7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? b if "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 8 is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted to position GARY DEBODE TRUSTEE TRUSTEE TRUSTEE O . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 .	b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paradhule payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (a) Name and address (b) Title, and average hours per week devoted to position TRUSTEE 60 FERNWOOD RD SUMMIT, NJ 07901 0.00 0.0. 0.0. 1 PRUSTEE 1 On 10 On	If "Yes" to 6b, file Form 8870.			[ľ	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y			
excess parachute payment(s) during the year? Part VIII	b If "Yes," did the foundation receive any proceeds or have any net income attrib	outable to the transaction?		N/A	7b	
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) Titls, and average hours per week devoided to position (If not paid, enter -0-) (in ot paid, ent	8 Is the foundation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in remuneration o				- '
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (a) Name and address (b) Title, and average hours per week devoted on the paid. (c) Compensation (if not paid. (enter-0-) (if not paid. (if not pai					•	
1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) Title, and average holds per week devoted to position (a) Name and address TRUSTEE	Part VIII Information About Officers, Directors, Trus	tees, Foundation Ma	anagers, Highly	/		
(a) Name and address (b) Title, and average hours per week devoted to position (fit not paid, enter '0-) (fit not paid, enter '0-) (g) Compensation		their compensation		<u></u>		
(a) Name and address hours per week devoted to position filt not paid, enter -0-) enter -0-) enter -0-) enter -0-) account, other allowances compansion account, other allowances filt not paid, enter -0-) en	T List all Officers, directors, did stees, and foundation managers and		(c) Compensation	(d) Contributions to	(e) E	xpense
GARY DEBODE FRINWOOD RD SUMMIT, NJ 07901 0.00 0.00 0.00 MARGERY GOTTESMAN FRUSTEE 60 FERNWOOD RD SUMMIT, NJ 07901 0.00 0.	(a) Name and address	hours per week devoted	(If not paid,	and deterred	accou	nt, other
60 FERNWOOD RD SUMMIT, NJ 07901 TRUSTEE SUMMIT, NJ 07901 O.00 O. 0. 0. 0. O. 0. 0. O. 0. O. 0. O. 0. TOLITIES AND SUMMIT, NJ 07901 O.00 O.0	CARY DEBODE		enter-0-)	compensation	allov	varices
SUMMIT, NJ 07901 MARGERY GOTTESMAN FRUSTEE O.00 O.00 O.0. O.00 O.0. O.00 O.0. O.00 O.		- TROBIEE	ļ		İ	
MARGERY GOTTESMAN 60 FERNWOOD RD SUMMIT, NJ 07901 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee employees address account, other allowances (e) Expense account, other allowances Total number of other employees paid over \$50,000		0.00	0.	0.	1	0.
SUMMIT, NJ 07901 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Combutions to employee benefit plans account, other allowances (e) Expense account, other allowances Total number of other employees paid over \$50,000						
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position NONE (c) Compensation (d) Combutions to employee benefit plans account, other allowances (c) Compensation (e) Expense account, other allowances Total number of other employees paid over \$50,000						
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contibutions to employee bentil plans and determined to the properties of the position of the properties of the position of the position of the properties of the position of the properties of the position of the properties of the position of the properties of the position of the properties of the position of the properties of th		0.00	0.	0.		0.
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee helit plans add delered compensation (e) Expense account, other allowances Total number of other employees paid over \$50,000					 	
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee helit plans add delered compensation (e) Expense account, other allowances Total number of other employees paid over \$50,000		1				
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee helit plans add delered compensation (e) Expense account, other allowances Total number of other employees paid over \$50,000		1				
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee helit plans add delered compensation (e) Expense account, other allowances Total number of other employees paid over \$50,000			<u> </u>			
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee helit plans add delered compensation (e) Expense account, other allowances Total number of other employees paid over \$50,000		7			ļ	
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee helit plans add delered compensation (e) Expense account, other allowances Total number of other employees paid over \$50,000		.				
(a) Name and address of each employee paid more than \$50,000 NONE Compensation employee paid deterred compensation account, other allowances	2 Compensation of five highest-paid employees (other than those in		enter "NONE."	7-8		
NONE NONE Total number of other employees paid over \$50,000	(a) Name and address of each employee paid more than \$50,000		(c) Compensation	employee benefit plans		
Total number of other employees paid over \$50,000 Description:		devoted to position	(o) component	and deterred compensation		
Total number of other employees paid over 450,000	NONE	_				
Total number of other employees paid over 450,000					ļ	
Total number of other employees paid over 450,000		4				
Total number of other employees paid over 450,000		ļ	ļ		 	
Total number of other employees paid over 450,000		4				
Total number of other employees paid over 450,000		<u> </u>	 			
Total number of other employees paid over 450,000		-]			
Total number of other employees paid over 450,000			 		<u> </u>	
Total number of other employees paid over 450,000		4				
Total number of other employees paid over 450,000	Table number of other employees and over \$50,000	<u> </u>	1		<u> </u>	<u></u>
	Total number of other employees paid over \$50,000			Enrm	990_D	

Paid Employees, and Contractors (continued)	0 . 0 .	
3 Five highest-paid independent contractors for professional services. If none, enter "NC	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		_
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced,	formation such as the etc.	Expenses
1 N/A		
2		
3		
4		
Dot IV P o		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines	Land 2	Amount
N7 / 3	I allu Z.	Amount
1 N/A		
2		
		
All other program-related investments. See instructions.		
3		
<u> </u>		
Total. Add lines 1 through 3		0.
		Form 000 - BE (2010)

P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		······································
а	Average monthly fair market value of securities	1a	142,950.
b	Average of monthly cash balances	1b	686,584.
	Fair market value of all other assets	1c	5,819,072.
d	Total (add lines 1a, b, and c)	1d	6,648,606.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	,	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,648,606.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	99,729.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,548,877.
6	Minimum investment return. Enter 5% of line 5	6	327,444.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	327,444.
2a	Tax on investment income for 2019 from Part VI, line 5		
	Income tax for 2019. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	978.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	326,466.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	326,466.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	326,466.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	321,211.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	321,211.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	978.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	320,233.
	Note: The amount on line 6 will be used in Part V column (b) in subsequent years when calculating whether the foundation of	ualifies for	the section

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				
line 7				326,466.
2 Undistributed Income, if any, as of the end of 2019				
a Enter amount for 2018 only			321,176.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				<u>'</u>
¢ From 2016				
d From 2017			•	
e From 2018				
f Total of lines 3a through e	0.		· · · · · · · · · · · · · · · · · · ·	
4 Qualifying distributions for 2019 from			· · · · · · · · · · · · · · · · · · ·	
Part XII, line 4: ▶\$ 321,211.				
a Applied to 2018, but not more than line 2a			321,176.	1
b Applied to undistributed income of prior			· · · · · · · · · · · · · · · · · · ·	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				35.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019				
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				•
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		·	
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of			•	
deficiency has been issued, or on which				ì
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		j
e Undistributed income for 2018. Subtract line		-		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract			•	
lines 4d and 5 from line 1. This amount must	·			
be distributed in 2020				326,431.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			ļ
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			Į
9 Excess distributions carryover to 2020.	-			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015		_		
b Excess from 2016				
c Excess from 2017				
d Excess from 2018	ļ	r		
e Excess from 2019				į

Form 990-PF (2019) EDISON	PROPERTIES	NEWARK FOU	NDATION	22-6	872667 Page 1
Part XIV Private Operating For	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling or foundation, and the ruling is effective for	2019, enter the date of	the ruling	▶		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or 4	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2019	(b) 2018	Prior 3 years (c) 2017	(d) 2016	(e) Total
income from Part I or the minimum	(a) 2019	(0) 20 10	(6) 2017	(0) 20 10	(e) 10ta1
investment return from Part X for					
each year listed b 85% of line 2a				 	
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not				1	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					<u> </u>
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:		ł			
(1) Value of all assets	· 				<u> </u>
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6, for each year					
listed				 	
c "Support" alternative test - enter: (1) Total support other than gross			}		
investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)	/				
(2) Support from general public			 	 	
and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization				L	
(4) Gross investment income				L	
Part XV Supplementary Infor			if the foundation	n had \$5,000 or m	ore in assets
at any time during the		ructions.)			
1 Information Regarding Foundation				. da da	
a List any managers of the foundation who year (but only if they have contributed me			tributions received by the	toundation before the cit	ise of any tax
NONE	, , , , , , , , , , , , , , , , , , ,				
b List any managers of the foundation who	own 10% or more of th	e stock of a corporation	(or an equally large porti	on of the ownership of a i	partnership or
other entity) of which the foundation has			(or an equally lange perm	o o o	, a
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here ► if the foundation on the foundation makes gifts, grants, etc., t	•	•	•	,	uests for funds. If
a The name, address, and telephone numb		e person to whom appli	cations should be addres	sed:	
MARGERY GOTTESMAN, 97			^^^		- 05100
C/O EDISON PROPERTIES				, NEWARK, NO	7 07102
b The form in which applications should be		ion and materials they s	hould include:		
COMMON APPLICATION FO	JRM				
c Any submission deadlines:					
d Any restrictions or limitations on awards,					
EMPHASIS ON AWARDS TO				/ITIES DIREC	TED TOWARD
MPROVING THE QUALITY	OF LIFE I	N NEWARK, N	<u> </u>		
23601 12-17-19					Form 990-PF (2019)

Page 11

3	Grants and Contributions Paid During the	ear or Approved for Future	Payment		
	Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
_	Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
	Paid during the year				
				}	
SEE	ATTACHMENT A	NONE	PUBLIC CHARITY	GENERAL CHARITABLE	
					321,211.
					ı
					· · · · · · · · · · · · · · · · · · ·
		}	ľ		
		 			
]		
	Total			> 3a	321,211.
b	Approved for future payment				
	NONE				
			[•	
					
				,	
	Total	L	1	▶ 3b	0.

Form 990-PF (2019)

Enter gross amounts unless otherwise indicated.	Unrelated business income			y section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
С					
d					<u> </u>
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	12,014.	
5 Net rental income or (loss) from real estate:	· .			,	
a Debt-financed property					
b Not debt-financed property					·····
6 Net rental income or (loss) from personal property					
7 Other investment income	900000		01	7,173.	
8 Gain or (loss) from sales of assets other				50 500	
than inventory			18	78,583.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory		<u> </u>			·
1 Other revenue:					
a	-				
D	-	·			
d	-				
<u> </u>					
2 Subtotal. Add columns (b), (d), and (e)			0.	97,770.	0
3 Total. Add line 12, columns (b), (d), and (e)			<u> L L</u>	13	97,770
See worksheet in line 13 instructions to verify calculations.)			•		
	. A. Ab. A	-liah-mant -f	Evennt D		
Part XVI-B Relationship of Activities	to the Accom	hiisiiiieur ot	Exempt Pt	nposes	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

	Exempt Organ	izations							
1 Did the or	ganization directly or indi	rectly engage in any	of the followin	g with any other organizatio	n described in sectio	n 501(c)		Yes	No
				to political organizations?		• •			
	from the reporting found	**************************************		•					l
				, amount on			18(1)	1	x
(2) Other			•				1a(2)		X
b Other tran	•						14(2)		
		bla nummat assaultat					16(1)		x
	of assets to a noncharita			• • • • • • •					X
	ases of assets from a no		rganization .	• • • • • •	• • • • • • • • • • • • • • • • • • • •		1b(2)		X
	il of facilities, equipment,				• • • • • • • • • •		1b(3)		X
• •	bursement arrangements	,, ,					1b(4)		X
	s or loan guarantees						1b(5)		X
	rmance of services or me						16(6)		
	f facilities, equipment, ma						10	. 	X
				dule. Column (b) should alv				ets,	
				ed less than fair market valu	e in any transaction (or snaring arrangement, sh	OW IN		
	(h) Amount involved			event erespective	(d) c :::				
(2)Line no	(b) Amount involved	(c) Name of		e exempt organization	(U) Description	of transfers, transactions, and si	nering avi	ungeme	
		ļ	N/A						
		<u> </u>			 				
					 				
		<u> </u>			-				
		ļ <u> </u>							
		<u> </u>			_				
									
					 				
									
		ļ							
					- 				
		<u> </u>			 	<u></u>			
		ļ <u>-</u>			_				
									
		<u> </u>			_ <u></u>				
	-	-	•	or more tax-exempt organi	zations described	_	٦	C-11	a
	501(c) (other than section		ction 527?				_] Yes	LX	No
b if Yes, co	omplete the following sch			T 7.5 - T	, ,	 			
	(a) Name of org	janization		(b) Type of organization		c) Description of relationsh	ip		
	N/A								
									
									
		 _							
Titadaa	popular of the later	that I have examined to	a values factor at	annuar askadular d	alatamania	and of my knowledge			
and he				ng accompanying achedules and n taxpayer) is based on all inform		Mav	the IRS on with th	discuss	this
Sign Here	$\sqrt{ V }$	1		وهمأور أزرا		shov	<u>vn</u> below	7 Se <u>e ir</u>	ıstr
 _				11113/20	TRUSTE	E (2)	Yes	<u> </u>	_l No
Sign	nature of officer of trustee			Date F	Trtle				
	Print/Type preparer's na	ame	Preparer's s	ignature	1	Check if PTIN			
Daid			Stus	to Machlin	11/13/2020	self- employed			
STOAKT RACHILIN							966		<u> </u>
Preparer	Firm's name ► BER	DON LLP				Firm's EIN ► 13-04	850	70	
Use Only	<u></u>								
	Firm's address ► 36								
	NE	W YORK, N	Y 1001	.7		Phone no. 212-83			
						Fo	rm 99 1	0-PF	(2019)

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECT	JRITIES :	STATEMENT	1	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	IS REVENUE		(B) NET INVEST MENT INCOM			
TIFF PRIVATE EQUITY PARTNERS 2005 LLC UBS 06669	2,993. 9,021.		0.	2,993 9,021			0.	
TO PART I, LINE 4	12,014.		0. 12,		12,014	•	0.	
FORM 990-PF		OTHER I	NCO	ME		STATEMENT	2	
DESCRIPTION			REV	(A) JENUE BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
TIFF PRIVATE EQUITY LLC MISCELLANEOUS INCOM		005		<1,734.> 8,907.	<1,734.3 8,907.		0 . 0 .	
TOTAL TO FORM 990-P	F, PART I, 1	LINE 11		7,173.	7,173.		0.	
FORM 990-PF		LEGAL	FEI	ES		STATEMENT	3	
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB: PURPOSE:		
LEGAL FEES		3,638.		0.	0 .	,	0.	
O FM 990-PF, PG 1, LN 16A 3,63		3,638.	8. 0.		0.	, (0.	

FORM 990-PF	TAX	ES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
FEDERAL TAX	552.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	552. 0.		0.	0.	
FORM 990-PF	OTHER E	XPENSES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK FEES	12.	12.	0.	0.	

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MARKETABLE SECURITIES	COST	142,999.	143,888.
INVESTMENT IN TIFF EQUITY PARTNERS 2005 LLC	COST	150,945.	183,146.
INVESTMENT IN TIFF MAF	COST	6,168,531.	5,858,794.
TOTAL TO FORM 990-PF, PART II, LINE	13	6,462,475.	6,185,828.
FORM 990-PF EXPLANATION CONCERNING QUALIFYING DISTRI			STATEMENT 8

EXPLANATION

UBS DONOR ADVISED FUND \$95,000 DISTRIBUTION TREATED AS QUALIFYING DISTRIBUTION

FORM 990-PF	EXPLANATION	CONCERNING	PART VII-A,	LINE 12	STATEMENT	9
	SECTION	1 170(C)(2)	(B) STATEMEN	T		

EXPLANATION

DISTRIBUTIONS TO DONOR ADVISED FUND WILL BE USED TO ACCOMPLISH GENERAL CHARITABLE PURPOSE OF THE FOUNDATION