

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491083007561

Form 990-PF

Department of the Treasury  
Internal Revenue Service

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 [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No. 1545-0052

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 12-01-2019, and ending 11-30-2020

Name of foundation  
THE GERALD B SHREIBER FOUNDATION

A Employer identification number  
22-6868479

Number and street (or P.O. box number if mail is not delivered to street address)  
6000 CENTRAL HWY

Room/suite

B Telephone number (see instructions)  
(856) 662-5789

City or town, state or province, country, and ZIP or foreign postal code  
PENNSAUKEN, NJ 08109

C If exemption application is pending, check here

G Check all that apply:  

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

D 1. Foreign organizations, check here.....

D 2. Foreign organizations meeting the 85% test, check here and attach computation ...

H Check type of organization:  
☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here .....

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ 42,189,273

J Accounting method:  
☒ Cash ☐ Accrual  
☐ Other (specify) \_\_\_\_\_  
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here .....

Part I

Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

Revenue

1 Contributions, gifts, grants, etc., received (attach schedule)

2 Check ☐ if the foundation is not required to attach Sch. B

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

b Gross sales price for all assets on line 6a

7 Capital gain net income (from Part IV, line 2)

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns and allowances

b Less: Cost of goods sold

c Gross profit or (loss) (attach schedule)

11 Other income (attach schedule)

12 Total. Add lines 1 through 11

Operating and Administrative Expenses

13 Compensation of officers, directors, trustees, etc.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach schedule)

c Other professional fees (attach schedule)

17 Interest

18 Taxes (attach schedule) (see instructions)

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule)

24 Total operating and administrative expenses. Add lines 13 through 23

25 Contributions, gifts, grants paid

26 Total expenses and disbursements. Add lines 24 and 25

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

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

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

Form 990-PF (2019)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing . . . . .			
	2 Savings and temporary cash investments . . . . .	3,897,145	2,226,651	2,226,651
	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 ▶ _____			
	8 Inventories for sale or use . . . . .			
	9 Prepaid expenses and deferred charges . . . . .			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule) . . . . .	326,430	348,371	39,962,622
	c Investments—corporate bonds (attach schedule) . . . . .			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans . . . . .			
	13 Investments—other (attach schedule) . . . . .			
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	4,223,575	2,575,022	42,189,273	
Liabilities	17 Accounts payable and accrued expenses . . . . .			
	18 Grants payable . . . . .			
	19 Deferred revenue . . . . .			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule) . . . . .			
	22 Other liabilities (describe ▶ _____)			
	23 <b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	24 Net assets without donor restrictions . . . . .			
	25 Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	26 Capital stock, trust principal, or current funds . . . . .	4,223,575	2,575,022	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	0	0	
29 <b>Total net assets or fund balances</b> (see instructions) . . . . .	4,223,575	2,575,022		
30 <b>Total liabilities and net assets/fund balances</b> (see instructions) .	4,223,575	2,575,022		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	4,223,575
2 Enter amount from Part I, line 27a . . . . .	2	830,516
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3 . . . . .	4	5,054,091
5 Decreases not included in line 2 (itemize) ▶ _____	5	2,479,069
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	2,575,022

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b>			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss) <div style="float: right; border-left: 1px solid black; padding-left: 5px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	<b>2</b>	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	2,132,642	48,874,363	0.043635
2017	1,782,757	40,854,299	0.043637
2016	1,478,888	36,137,162	0.040924
2015	1,358,568	30,148,822	0.045062
2014	1,122,147	27,952,341	0.040145

<b>2</b> Total of line 1, column (d)	<b>2</b> 0.213403
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b> 0.042681
<b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	<b>4</b> 40,708,512
<b>5</b> Multiply line 4 by line 3	<b>5</b> 1,737,480
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b> 6,357
<b>7</b> Add lines 5 and 6	<b>7</b> 1,743,837
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b> 2,306,478

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	6,357
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	6,357
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	6,357
<b>6</b>	<b>Credits/Payments:</b>		
<b>a</b>	2019 estimated tax payments and 2018 overpayment credited to 2019	<b>6a</b>	67,576
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	0
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	67,576
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	61,219
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2020 estimated tax</b> <b>▶</b> 61,219 <b>Refunded</b> <b>▶</b>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. <b>▶</b> \$ 0 <b>(2)</b> On foundation managers. <b>▶</b> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <b>▶</b> \$ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>		No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .		No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>		No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	Yes	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	Yes	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> NJ		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation .</i>	Yes	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i> . . . . .		No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .		No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>GERALD B SHREIBER</u> Telephone no. ► <u>(856) 662-5789</u>			

Located at ► 6000 CENTRAL HIGHWAY PENNSAUKEN NJ ZIP+4 ► 081094607

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . .	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year . . . . .	► <b>15</b>		
<b>16</b>	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . . . . .	<b>1b</b>	
	Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>		
<b>c</b>	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? . . . . .	<b>1c</b>	<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b>	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .	<b>2b</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.) . . . . .	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</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?	<b>4b</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

		Yes	No
<b>5a</b>	During the year did the foundation pay or incur any amount to:		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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 . . . . .		<b>5b</b>
	Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>		
<b>c</b>	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? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).		
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>
	If "Yes" to 6b, file Form 8870.		<b>No</b>
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .		<b>7b</b>
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation. See instructions**

(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	(e) Expense account, other allowances
GERALD B SHREIBER 6000 CENTRAL HIGHWAY PENNSAUKEN, NJ 08109	MANAGING TRUSTEE 2.00	0	0	0
MARJORIE SHREIBER ROSHKOFF 6000 CENTRAL HIGHWAY PENNSAUKEN, NJ 08109	TRUSTEE 2.00	0	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). 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	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000. . . . . ► 0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. . . . .		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1	Expenses

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 . . . . .	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	38,599,063
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	2,729,376
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	41,328,439
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	41,328,439
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	619,927
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	40,708,512
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	2,035,426

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	2,035,426
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5. . . . .	<b>2a</b>	6,357
<b>b</b>	Income tax for 2019. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	6,357
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	2,029,069
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	2,029,069
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	2,029,069

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	2,306,478
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	2,306,478
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. . . . .	<b>5</b>	6,357
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	2,300,121

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				2,029,069
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only. . . . .			2,204,618	
<b>b</b> Total for prior years: 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014. . . . .				
<b>b</b> From 2015. . . . .				
<b>c</b> From 2016. . . . .				
<b>d</b> From 2017. . . . .				
<b>e</b> From 2018. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>2,306,478</u>				
<b>a</b> Applied to 2018, but not more than line 2a			2,204,618	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2019 distributable amount. . . . .				101,860
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>	0			
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .				1,927,209
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2020.</b> Subtract lines 7 and 8 from line 6a. . . . .	0			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015. . . . .				
<b>b</b> Excess from 2016. . . . .				
<b>c</b> Excess from 2017. . . . .				
<b>d</b> Excess from 2018. . . . .				
<b>e</b> Excess from 2019. . . . .				

## Part XIV

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . .

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(i)(3) or ☐ 4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum 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 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. . . . .

## Part XV

**1 Information Regarding Foundation Managers:**

a 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). (See section 507(d)(2).)

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>			<b>▶ 3a</b>	2,303,052
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	0

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b>	Program service revenue:					
<b>a</b>	_____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>f</b>	_____					
<b>g</b>	Fees and contracts from government agencies					
<b>2</b>	Membership dues and assessments. . . .					
<b>3</b>	Interest on savings and temporary cash investments . . . . .			14	14,684	
<b>4</b>	Dividends and interest from securities. . . .			14	624,475	
<b>5</b>	Net rental income or (loss) from real estate:					
<b>a</b>	Debt-financed property. . . . .					
<b>b</b>	Not debt-financed property. . . . .					
<b>6</b>	Net rental income or (loss) from personal property					
<b>7</b>	Other investment income. . . . .					
<b>8</b>	Gain or (loss) from sales of assets other than inventory . . . . .					
<b>9</b>	Net income or (loss) from special events:					
<b>10</b>	Gross profit or (loss) from sales of inventory					
<b>11</b>	Other revenue: <b>a</b> _____					
	<b>b</b> _____					
	<b>c</b> _____					
	<b>d</b> _____					
	<b>e</b> _____					
<b>12</b>	Subtotal. Add columns (b), (d), and (e). . .		0		639,159	0
<b>13</b>	<b>Total.</b> Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)			<b>13</b>		<b>639,159</b>

[illegible]

## Part XVII

- |   |   |    |  |    |
|---|---|----|--|----|
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .   | 1c |  | No |
| d | <p>If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p> |    |  |    |

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2021-02-25	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below  
 (see instr.) ☒ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	STEVEN J MEADE		2021-02-25		P01551465
	Firm's name ▶ RSM US LLP				Firm's EIN ▶ 42-0714325
	Firm's address ▶ 518 TOWNSHIP LINE ROAD SUITE 300 BLUE BELL, PA 19422				Phone no. (215) 641-8600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
A DOG'S LIFE RESCUE 741 N CITRUS AVE LOS ANGELES, CA 90038		PUBLIC CHARITY	GENERAL SUPPORT	1,000
ALLEY CAT ALLIESPO BOX 98179 WASHINGTON, DC 20077		PUBLIC CHARITY	GENERAL SUPPORT	700
ALLEY CAT RESCUEPO BOX 96499 WASHINGTON, DC 20077		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN ASSOCIATES BEN-GURION UNIVERSITY OF THE NEGEV 261 OLD YORK ROAD 417A PO BOX 1128 JENKINTOWN, PA 19046		PUBLIC CHARITY	GENERAL SUPPORT	75,000
AMERICAN CANCER SOCIETY INC 1851 OLD CUTHBERT RD CHERRY HILL, NJ 08034		PUBLIC CHARITY	GENERAL SUPPORT	752
AMERICAN FRIENDS OF MAGEN DAVID ADOM 57 MARSHALL DRIVE EDISON, NJ 08817		PUBLIC CHARITY	GENERAL SUPPORT	5,000
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN HUMANE 251 ROYAL PALM WAY SUITE 450 PALM BEACH, FL 33480		PUBLIC CHARITY	GENERAL SUPPORT	750
AMERICAN INDIAN COLLEGE FUND 8333 GREENWOOD BLVD DENVER, CO 80221		PUBLIC CHARITY	GENERAL SUPPORT	5,000
ANIMAL ADOPTION CENTER PO BOX 4017 LINDENWOLD, NJ 08021		PUBLIC CHARITY	GENERAL SUPPORT	2,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ANIMAL HOUSE CAT RESCUE & ADOPTION CENTER 2151 59TH STREET ST LOUIS, MO 63110		PUBLIC CHARITY	GENERAL SUPPORT	500
ANIMAL SANCTUARY SOCIETY INC PO BOX 24 MOUNT LAUREL, NJ 08054		PUBLIC CHARITY	GENERAL SUPPORT	500
ANIMAL WELFARE ASSOCIATION 509 CENTENNIAL BLVD VOORHEES, NJ 08043		PUBLIC CHARITY	GENERAL SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ANIMALS' ANGELS 133 E MAIN STREET 1B WESTMINSTER, MD 21157		PUBLIC CHARITY	GENERAL SUPPORT	700
ATLANTICARE FOUNDATION 200 ENGLISH CREEK AVENUE BLDG 600 EGG HARBOR TOWNSHIP, NJ 08234		PUBLIC CHARITY	GENERAL SUPPORT	500
BANCROFT1255 CALDWELL ROAD CHERRY HILL, NJ 08034		PUBLIC CHARITY	GENERAL SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON ROAD KANAB, UT 84741		PUBLIC CHARITY	GENERAL SUPPORT	750
BETH KEHILLAH CEMETERY 6687 BLACK HORSE PIKE EGG HARBOR TOWNSHIP, NJ 08234		PUBLIC CHARITY	GENERAL SUPPORT	200
BORN FREE USAPO BOX 32160 WASHINGTON, DC 20077		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BOYS AND GIRLS CLUB OF CAMDEN COUNTY INC 2 NORTH DUDLEY STREET CAMDEN, NJ 08105		PUBLIC CHARITY	GENERAL SUPPORT	1,000
BRADFORD COUNTY HUMANE SOCIETY PO BOX 179 ROUTE 220 ULSTER, PA 18850		PUBLIC CHARITY	GENERAL SUPPORT	500
CHILDREN'S HOSPITAL FOUNDATION PO BOX 781352 PHILADELPHIA, PA 19178		PUBLIC CHARITY	GENERAL SUPPORT	101,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHIMP HAVEN 13600 CHIMPANZEE PLACE KEITHVILLE, LA 71047		PUBLIC CHARITY	GENERAL SUPPORT	1,000
CONGREGATION B'NAI TIKVAH BETH ISRAEL 277 TALL PINES DRIVE WEST SEWELL, NJ 08080		PUBLIC CHARITY	GENERAL SUPPORT	11,000
CORINNE GOLDSMITH DICKINSON CENTER FOR MS 5 EAST 98TH STREET 1ST FLOOR NEW YORK, NY 10029		PUBLIC CHARITY	GENERAL SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COURTNEY'S PLACE 7000 E SHEA BLVD SUITE 1430 SCOTTSDALE, AZ 85254		PUBLIC CHARITY	GENERAL SUPPORT	5,000
DEFENDERS OF ANIMAL RIGHTS INC 14412 OLD YORK ROAD PO BOX 25 PHOENIX, MD 21131		PUBLIC CHARITY	GENERAL SUPPORT	500
DEFENDERS OF WILDLIFE 1130 17TH STREET NW WASHINGTON, DC 20036		PUBLIC CHARITY	GENERAL SUPPORT	1,000
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DRAGONFLY FOREST 400 FAYETTE STREET SUITE 250 CONSHOHOCKEN, PA 19428		PUBLIC CHARITY	GENERAL SUPPORT	1,000
DREAMCHASER HORSE RESCUE & REHAB 6430 KECHOLE DRIVE FALCON, MO 65470		PUBLIC CHARITY	GENERAL SUPPORT	500
FARM SANCTUARYPO 150 WATKINS GLEN, NY 14891		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FIRST STATE GREYHOUND RESCUE INC PO BOX 67 BLANDON, PA 19510		PUBLIC CHARITY	GENERAL SUPPORT	1,500
FORGOTTEN ANGELS EQUINE RESCUE 288 HARTFORD ROAD MEDFORD, NJ 08055		PUBLIC CHARITY	GENERAL SUPPORT	2,000
FOUR PAWS INTERNATIONAL 36 BROOMFIELD ST 410 BOSTON, MA 02108		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FREEDOM SERVICE DOGS OF AMERICA PO BOX 9108 PUEBLO, CO 81008		PUBLIC CHARITY	GENERAL SUPPORT	500
FRIENDS OF THE ISRAELI DEFENSE FORCES 500 OFFICE CENTER DRIVE SUITE 400 FORT WASHINGTON, PA 19034		PUBLIC CHARITY	GENERAL SUPPORT	35,000
FRIENDS OF THE SHELTER INC PO BOX 4923 CLIFTON, NJ 07015		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRONT RANGE EQUINE RESCUE PO BOX 458 OCALA, FL 34478		PUBLIC CHARITY	GENERAL SUPPORT	750
FUNNY FARM RESCUE 6908 RAILROAD BLVD MAYS LANDING, NJ 08330		PUBLIC CHARITY	GENERAL SUPPORT	1,000
FUREVER AS FRIENDS INC 30 OLYMPIA CT WOOLWICH TWP, NJ 08085		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GLOUCESTER CO POLICE K9 ASSOCIATION PO BOX 337 MICKLETON, NJ 08056		PUBLIC CHARITY	GENERAL SUPPORT	1,000
GOING HOME GREYHOUND 3200 HAZELHURST DRIVE PITTSBURGH, PA 15227		PUBLIC CHARITY	GENERAL SUPPORT	500
GREYHOUND FRIENDS OF NEW JERSEY INC PO BOX 4416 CHERRY HILL, NJ 08034		PUBLIC CHARITY	GENERAL SUPPORT	2,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GREYHOUND PETS OF AMERICA PO BOX 8071 MADEIRA BEACH, FL 33738		PUBLIC CHARITY	GENERAL SUPPORT	5,000
GUIDE DOG FOUNDATION FOR THE BLIND 371 E JERICHO TURNPIKE SMITHTOWN, NY 11787		PUBLIC CHARITY	GENERAL SUPPORT	1,000
GUIDING EYES FOR THE BLIND 611 GRANITE SPRINGS ROAD YORKTOWN HEIGHTS, NY 01598		PUBLIC CHARITY	GENERAL SUPPORT	1,500
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HAPPY CAT INCPO BOX 7013 MERRIFIELD, VA 22116		PUBLIC CHARITY	GENERAL SUPPORT	500
HARRISON TOWNSHIP PBA LOCAL 178 PO BOX 104 EWAN, NJ 08025		PUBLIC CHARITY	GENERAL SUPPORT	100
HILLEL AT DREXEL UNIVERSITY 118 N 34TH STREET PHILADELPHIA, PA 19104		PUBLIC CHARITY	GENERAL SUPPORT	2,500
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
HOMEWARD BOUND PET ADOPTION CENTER PO BOX 475 125 COUNTY HOUSE ROAD BLACKWOOD, NJ 08012		PUBLIC CHARITY	GENERAL SUPPORT	2,500
HUMANE SOCIETY OF OCEAN CITY PO BOX 1254 OCEAN CITY, NJ 08226		PUBLIC CHARITY	GENERAL SUPPORT	700
INTERNATIONAL AGUDAS ANSHEI EMUN 3069 LAWSON BLVD OCEANSIDE, NY 11572		PUBLIC CHARITY	GENERAL SUPPORT	3,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
INTERNATIONAL PRIMATE PROTECTION LEAGUE PO BOX 766 SUMMERVILLE, SC 29484		PUBLIC CHARITY	GENERAL SUPPORT	500
ISRAEL GUIDE DOG CENTER FOR THE BLIND 968 EASTON ROAD SUITE H WARRINGTON, PA 18976		PUBLIC CHARITY	GENERAL SUPPORT	27,000
IZZY'S LOVE EQUINE RESCUE PO BOX 1898 MERRIFIELD, VA 22116		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JEWISH COMMUNITY HOMES FOR ADULT INDEPENDENCE 274 SOUTH BRYN MAWR AVENUE BRYN MAWR, PA 19010		PUBLIC CHARITY	GENERAL SUPPORT	1,800
JEWISH FAMILY & CHILDREN'S SERVICE 1301 SPRINGDALE RD SUITE 150 CHERRY HILL, NJ 08003		PUBLIC CHARITY	GENERAL SUPPORT	1,000
JEWISH FEDERATION OF ATLANTIC AND CAPE MAY COUNTIES 501 N JEROME AVENUE MARGATE, NJ 08402		PUBLIC CHARITY	GENERAL SUPPORT	18,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KATZ JCC1301 SPRINGDALE ROAD CHERRY HILL, NJ 08003		PUBLIC CHARITY	GENERAL SUPPORT	5,000
KEEPERS OF THE WILD 13441 EAST HIGHWAY 66 VALENTINE, AZ 86437		PUBLIC CHARITY	GENERAL SUPPORT	500
KELLMAN BROWN ACADEMY 1007 LAUREL OAK ROAD VOORHEES, NJ 08043		PUBLIC CHARITY	GENERAL SUPPORT	20,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KENNEDY KRIEGER FOUNDATION PO BOX 117 VOORHEES, NJ 08043		PUBLIC CHARITY	GENERAL SUPPORT	5,000
KEREN OR 350 SEVENTH AVENUE SUITE 1004 NEW YORK, NY 10001		PUBLIC CHARITY	GENERAL SUPPORT	1,000
KIEV FAMILY FOUNDATION 9 WEST BRANCH ROAD WESTPORT, CT 06880		PUBLIC CHARITY	GENERAL SUPPORT	1,000
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LANCASTER FARM SANCTUARY 1871 MILTON GROVE ROAD MOUNT JOY, PA 17552		PUBLIC CHARITY	GENERAL SUPPORT	500
LAST CHANCE FOR ANIMALS 8033 W SUNSET BLVD LOS ANGELES, CA 90046		PUBLIC CHARITY	GENERAL SUPPORT	500
LONGPORT PBA LOCAL #363 PO BOX 456 LONGPORT, NJ 08403		PUBLIC CHARITY	GENERAL SUPPORT	100
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LONGPORT SCHOLARSHIP FUND 3012 ATLANTIC AVENUE LONGPORT, NJ 08403		PUBLIC CHARITY	GENERAL SUPPORT	100
MOMS ANIMAL RESCUE INC 200 SPRINGDALE LANE WILLIAMSTOWN, NJ 08094		PUBLIC CHARITY	GENERAL SUPPORT	30,000
MARINE MAMMAL STRANDING CENTER PO BOX 773 BRIGANTINE, NJ 08203		PUBLIC CHARITY	GENERAL SUPPORT	1,000
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MORRIS ANIMAL FOUNDATION 720 S COLORADO BLVD STE 174A DENVER, CO 80246		PUBLIC CHARITY	GENERAL SUPPORT	500
NATIONAL MULTIPLE SCLEROSIS SOCIETY 641 SOUTH FLORES STEET SAN ANTONIO, TX 78204		PUBLIC CHARITY	GENERAL SUPPORT	500
NELLIE'S SCHOOLHOUSE 610 ROSE LANE BRYN MAWR, PA 19010		PUBLIC CHARITY	GENERAL SUPPORT	8,000
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NJ AID FOR ANIMALSPO BOX 4 CEDAR BROOK, NJ 08018		PUBLIC CHARITY	GENERAL SUPPORT	30,000
NOAH'S ARK AND SANCTUARY 712 LG GRIFFIN ROAD LOCUST GROVE, GA 30248		PUBLIC CHARITY	GENERAL SUPPORT	1,000
PETA501 FRONT STREET NORFOLK, VA 23510		PUBLIC CHARITY	GENERAL SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PAWS100 N 2ND STREET PHILADELPHIA, PA 19106		PUBLIC CHARITY	GENERAL SUPPORT	10,000
PENNSYLVANIA SPCA 350 E ERIE AVENUE PHILADELPHIA, PA 19134		PUBLIC CHARITY	GENERAL SUPPORT	61,600
PEOPLE FOR ANIMALS INC 401 HILLSIDE AVENUE HILLSIDE, NJ 07205		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PROVIDENCE ANIMAL CENTER 555 SANDY BANK ROAD MEDIA, PA 19063		PUBLIC CHARITY	GENERAL SUPPORT	500
RED BUCKET EQUINE RESCUE 2885 ENGLISH ROAD CHINO HILLS, CA 91709		PUBLIC CHARITY	GENERAL SUPPORT	500
REDROVERPO BOX 366 ETNA, NH 03750		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RESQCATSPO BOX 3852 SANTA BARBARA, CA 93130		PUBLIC CHARITY	GENERAL SUPPORT	1,500
ROBIN'S NEST INC 42 SOUTH DELSEA DRIVE GLASSBORO, NJ 08028		PUBLIC CHARITY	GENERAL SUPPORT	2,000
ROWAN UNIVERSITY FOUNDATION SHPEEN HALL ROOM 222 40 NORTH ACADEMY STREET GLASSBORO, NJ 08028		PUBLIC CHARITY	GENERAL SUPPORT	1,351,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SALEM COUNTY HUMANE SOCIETY 214 NORTH GAME CREEK ROAD CARNEYS POINT, NJ 08069		PUBLIC CHARITY	GENERAL SUPPORT	1,600
SARA & SAM SCHOFFER HOLOCAUST RESOURCE CENTER 101 VERA KING FERRIS DRIVE GALLOWAY, NJ 08205		PUBLIC CHARITY	GENERAL SUPPORT	200
SEA TURTLE RECOVERYPO BOX 497 WEST ORANGE, NJ 07052		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SEARCH DOG FOUNDATION 6800 WHEELER CANYON RD SANTA PAULA, CA 93060		PUBLIC CHARITY	GENERAL SUPPORT	500
SHREINERS HOSPITALS FOR CHILDREN 3551 N BROAD STREET PHILADELPHIA, PA 19140		PUBLIC CHARITY	GENERAL SUPPORT	500
SOCIETY FOR COMPANION ANIMALS 619 WOOLSEY DRIVE DALLAS, TX 75224		PUBLIC CHARITY	GENERAL SUPPORT	21,500
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SOUTHEASTERN GUIDE DOGS 4210 77TH STREET EAST PALMETTO, FL 34221		PUBLIC CHARITY	GENERAL SUPPORT	750
SOUTH JERSEY REGIONAL ANIMAL SHELTER 1244 N DELSEA DRIVE VINELAND, NJ 08360		PUBLIC CHARITY	GENERAL SUPPORT	1,000
STRAYDOG INCPO BOX 1465 GUN BARRELL CITY, TX 75147		PUBLIC CHARITY	GENERAL SUPPORT	20,000
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE ALS ASSOCIATION GREATER PHILADELPHIA CHAPTER 321 NORRISTOWN ROAD SUITE 260 AMBLER, PA 19002		PUBLIC CHARITY	GENERAL SUPPORT	5,000
THE COOPER FOUNDATION 3 COOPER PLAZA SUITE 500 CAMDEN, NJ 08103		PUBLIC CHARITY	GENERAL SUPPORT	2,000
THE HUMANE FARMING ASSOCIATION PO BOX 3577 SAN RAFAEL, CA 94912		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE HUMANE SOCIETY OF THE UNITED STATES 700 PROFESSIONAL DRIVE GAITHERSBURG, MD 20879		PUBLIC CHARITY	GENERAL SUPPORT	15,000
THE NATIONAL HUMANE EDUCATION SOCIETY 3731 BERRYVILLE PIKE SUITE 200 CHARLES TOWN, WV 25414		PUBLIC CHARITY	GENERAL SUPPORT	20,000
THE SEEING EYEPO BOX 375 MORRISTOWN, NJ 07963		PUBLIC CHARITY	GENERAL SUPPORT	5,000
<b>Total . . . . .</b> ► <b>3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TONS OF TURKEYS1655 E BOOT ROAD WEST CHESTER, PA 19380		PUBLIC CHARITY	GENERAL SUPPORT	500
TONY LA RUSSA'S ANIMAL RESCUE FOUNDATION 2890 MITCHELL DRIVE WALNUT CREEK, CA 94598		PUBLIC CHARITY	GENERAL SUPPORT	50,000
US HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PLACE SW WASHINGTON, DC 20024		PUBLIC CHARITY	GENERAL SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
UNITED WAY OF GREATER PHILA & SOUTHERN NJ PO BOX 15760 PHILADELPHIA, PA 19103		PUBLIC CHARITY	GENERAL SUPPORT	10,000
VIRTUA FOUNDATION 303 LIPPINCOTT DRIVE 4TH FL MARLTON, NJ 08053		PUBLIC CHARITY	GENERAL SUPPORT	50,000
VOORHEES ANIMAL ORPHANAGE 419 COOPER RD VOORHEES, NJ 08043		PUBLIC CHARITY	GENERAL SUPPORT	2,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WILDWOOD K9 4400 NEW JERSEY AVENUE WILDWOOD, NJ 08260		PUBLIC CHARITY	GENERAL SUPPORT	500
WILLIAMSON COLLEGE OF THE TRADES 106 S NEW MIDDLETON ROAD MEDIA, PA 19063		PUBLIC CHARITY	GENERAL SUPPORT	200,000
WOLF PARK4004 EAST 800 NORTH BATTLE GROUND, IN 47920		PUBLIC CHARITY	GENERAL SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				2,303,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WOODFORD CEDAR RUN WILDLIFE REFUGE 4 SAWMILL ROAD MEDFORD, NJ 08055		PUBLIC CHARITY	GENERAL SUPPORT	3,000
1 LOVE 4 ANIMALSPO BOX 1414 SOUTHEASTERN, PA 19398		PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				2,303,052

**TY 2019 Accounting Fees Schedule****Name:** THE GERALD B SHREIBER FOUNDATION**EIN:** 22-6868479

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RSM US LLP ACCOUNTING FEES	6,852	3,426		3,426

**TY 2019 Investments Corporate Stock Schedule****Name:** THE GERALD B SHREIBER FOUNDATION**EIN:** 22-6868479**Investments Corporation Stock Schedule**

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
J&J SNACK FOODS CORP.	348,371	39,962,622

**TY 2019 Other Decreases Schedule**

**Name:** THE GERALD B SHREIBER FOUNDATION

**EIN:** 22-6868479

Description	Amount
FAIR MARKET VALUE IN EXCESS OF COST	2,479,069

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF.</b> ▶ Go to <u><a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a></u> for the latest information.	OMB No. 1545-0047
		<b>2019</b>
Name of the organization THE GERALD B SHREIBER FOUNDATION		<b>Employer identification number</b> 22-6868479

Organization type (check one):

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
THE GERALD B SHREIBER FOUNDATION

Employer identification number  
22-6868479

**Part I**

**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GERALD B SHREIBER 6000 CENTRAL HIGHWAY PENNSAUKEN, NJ 08109	\$ 2,501,011	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization THE GERALD B SHREIBER FOUNDATION	Employer identification number 22-6868479
--	--

Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	13,416 SHARES OF J&J SNACK FOODS CORP.	\$ 2,501,011	2019-12-23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization THE GERALD B SHREIBER FOUNDATION	Employer identification number 22-6868479
--	--

Part III

**Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_**

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	