efile GRAPHIC print - DO NOT PROCESS

Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491178009250

2019

OMB No 1545-0052

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

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

Open to Public Inspection

|                    |                   | ndar year 2019, or tax year beginning 01-01-20   | )19 , aı                                     | nd ending 12-31-                |                         |   |
|--------------------|-------------------|--|--|---------------------------------|-------------------------|---|
| GL<br>C/           | JTTENPL<br>O JACK | Indation<br>LAN FAMILY FOUNDATION INC<br>GUTTENPLAN  |  | <b>A Employer Id</b> 27-3764072 | entification numbe      | er  |
|                    |                   | :UTTENPLAN<br>I street (or P O box number if mail is not delivered to street address)                            | ) Room/suite                                 | P Tolonhono ni                  | ımber (see ınstructio   | ne)   |
| 14                 | 00 STAT           | TE ROUTE 36 EAST   |  | (732) 495-9480                  | ,                       | 115)  |
|                    |                   | n, state or province, country, and ZIP or foreign postal code<br>VN, NJ 07748                                    |  |                                 | application is pendir   | ng, check here                                  |
| c C                | neck al           | I that apply Initial return Initial return of a  | former public charity                        | D 1 Foreign or                  | ganizations, check h    | ere $\Box$                                      |
| <b>u</b> ci        | ieck ai           | Final return Amended return  | • •  |                                 | ganizations meeting     | ▶ ⊔   |
|                    |                   | ☐ Address change ☐ Name change   |  |                                 | k here and attach co    |   |
| H C                | neck tv           | rpe of organization ✓ Section 501(c)(3) exempt private   | foundation                                   |                                 | undation status was     |   |
| _                  |                   |  | e private foundation                         | under sectio                    | n 507(b)(1)(A), che     | ck here   |
|                    |                   |  | ☑ Cash ☐ Accru                               | F If the found:                 | ation is in a 60-mont   | h termination 🖂                                 |
| of '               | year (f           | from Part II, col (c),  ▶\$ 4,841,256  Other (specify)  (Part I, column (d) must                                 |  |                                 | n 507(b)(1)(B), chec    |   |
| Pa                 | rt I              | Analysis of Revenue and Expenses (The total  | (a) Revenue and                              |                                 |                         | (d) Disbursements                               |
|                    |                   | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) ) | expenses per<br>books                        | (b) Net investment income       | (c) Adjusted net income | for charitable<br>purposes<br>(cash basis only) |
|                    | 1                 | Contributions, gifts, grants, etc , received (attach schedule)   | 507,097                                      |                                 |                         |   |
|                    | 2                 | Check ▶ ☐ If the foundation is <b>not</b> required to attach Sch B   |  |                                 |                         |   |
|                    | 3                 | Interest on savings and temporary cash investments   | 2,621  |                                 |                         |   |
|                    | 4                 | Dividends and interest from securities   | 158,362                                      | 158,362                         |                         |   |
|                    | 5a                | Gross rents  | ļ  |                                 |                         |   |
| συ.                | Ь                 | Net rental income or (loss)  | - 11 122                                     |                                 |                         |   |
| Ž                  | 6a                | Net gain or (loss) from sale of assets not on line 10  | 11,423                                       |                                 |                         |   |
| Revenue            | b                 | Gross sales price for all assets on line 6a 509,325  | 5  | 350 100                         |                         |   |
| $\simeq$           | 7<br>8            | Capital gain net income (from Part IV, line 2)   |  | 259,100                         |                         |   |
|                    | 9                 | Income modifications   |  |                                 |                         |   |
|                    | 10a               | Gross sales less returns and allowances  |  |                                 |                         |   |
|                    | ь                 | Less Cost of goods sold  | <u>,                                    </u> |                                 |                         |   |
|                    | c                 | Gross profit or (loss) (attach schedule)   | <u></u>                                      |                                 |                         |   |
|                    | 11                | Other income (attach schedule)   | 1,464  | 1,464                           |                         |   |
|                    | 12                | Total. Add lines 1 through 11  | 680,967                                      | 421,547                         |                         |   |
|                    | 13                | Compensation of officers, directors, trustees, etc   | 0  |                                 |                         |   |
|                    | 14                | Other employee salaries and wages  |  |                                 |                         |   |
| ŝ                  | 15                | Pension plans, employee benefits   |  |                                 |                         |   |
| 1156               | 16a               | Legal fees (attach schedule)   |  |                                 |                         |   |
| Expenses           | ь                 | Accounting fees (attach schedule)  |  |                                 |                         |   |
| ы<br>Ф             | c                 | Other professional fees (attach schedule)  |  |                                 |                         |   |
| and Administrative | 17                | Interest   |  |                                 |                         |   |
| stra               | 18                | Taxes (attach schedule) (see instructions)   | 22,317                                       | 1,669                           |                         |   |
| ≣                  | 19                | Depreciation (attach schedule) and depletion   |  |                                 |                         |   |
| Ē                  | 20                | Occupancy  |  |                                 |                         |   |
| <b>ک</b>           | 21                | Travel, conferences, and meetings  |  |                                 |                         |   |
| ä                  | 22                | Printing and publications  |  |                                 |                         |   |
| Бu                 | 23                | Other expenses (attach schedule)   | 16,605                                       | 16,605                          |                         |   |
| Operating          | 24                | Total operating and administrative expenses.   |  |                                 |                         |   |
| be                 |                   | Add lines 13 through 23  | 38,922                                       | 18,274                          |                         | C   |
| 0                  | 25                | Contributions, gifts, grants paid  | 217,050                                      |                                 |                         | 217,050   |
|                    | 26                | <b>Total expenses and disbursements.</b> Add lines 24 and 25   | 255,972                                      | 18,274                          |                         | 217,050   |
|                    | 27                | Subtract line 26 from line 12  |  |                                 |                         |   |
|                    | a                 | Excess of revenue over expenses and disbursements  | 424,995                                      |                                 |                         |   |
|                    | ь                 | Net investment income (if negative, enter -0-)   | ,,,,,,                                       | 403,273                         |                         |   |
|                    | С                 | Adjusted net income (If negative, enter -0-)   |  |                                 |                         |   |
| F                  | D                 | work Dadustian Act Natice are instructions   | 1  | C-1 N 11222                     | <del>.</del> -          | - 000 PE (2010)                                 |

1,084,641

4,189,193

4,189,193

4,189,193

4,189,193

1,296,260

4,614,188

4,614,188

4,614,188

4,614,188

1

2

3 4

5

6

4,189,193

4,614,188

4,614,188 Form **990-PF** (2019)

424,995

1,300,810

4,841,256

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Capital stock, trust principal, or current funds . . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

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

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

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

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

Analysis of Changes in Net Assets or Fund Balances

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

Less accumulated depreciation (attach schedule) ▶ \_\_\_\_\_ 

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶ \_\_\_\_\_

Loans from officers, directors, trustees, and other disqualified persons

Foundations that follow FASB ASC 958, check here ▶

Total assets (to be completed by all filers—see the

Land, buildings, and equipment basis ▶ \_

instructions Also, see page 1, item I)

and complete lines 24, 25, 29 and 30.

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) ▶.

Other increases not included in line 2 (itemize) -

Net assets without donor restrictions . . .

Net assets with donor restrictions . . . .

Other assets (describe > \_

Other liabilities (describe ▶\_

Grants payable

|        | 7   |
|--------|-----|
| 2      | 8   |
| Assets | 9   |
| As     | 10a |
|        | b   |
|        | С   |

11

12

13

14

15

16

17

18

19

20 21

22

23

24

25

26

28

29

30

Part III

2

3

Liabilities

**Fund Balances** 

ŏ

Assets 27

Net

|   | e the kınd(s) of property sold (e g ,<br>arehouse, or common stock, 200 shs     |                                 | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr )          | (d)<br>Date sold<br>(mo , day, yr )     |
|---|---|---------------------------------|--|--|---|
| <b>1</b> a JP MORGAN 12168                                    |   |                                 |  |  | 2019-12-31                              |
| <b>b</b> JP MORGAN 40119                                      |   |                                 |  |  | 2019-12-31                              |
| c CAPITAL GAIN DIVIDENI                                       | os  |                                 | Р                                      |  |   |
| d   |   |                                 |  |  |   |
| e   |   |                                 |  |  |   |
| (0)   | (f)   |                                 | (g)                                    | (  | h)                                      |
| (e)<br>Gross sales price                                      | Depreciation allowed  |                                 | other basis                            |  | r (loss)                                |
| <u> </u>  | (or allowable)  | plus exp                        | ense of sale                           | (e) plus (f                                | ) minus (g)                             |
|   | 3,099   |                                 | 215,613                                |  | 237,486                                 |
| ь   | 53,938  |                                 | 34,612                                 |  | 19,326                                  |
| С   |   |                                 |  |  | 2,288                                   |
| d   |   |                                 |  |  |   |
| e   |   |                                 |  |  |   |
| Complete only for assets                                      | s showing gain in column (h) and ow   | ned by the foundation           | on 12/31/69                            | (  | I)                                      |
| (i)   | (j)   |                                 | (k)                                    |  | h) gain minus                           |
| FMV as of 12/31/69  | Adjusted basis  |                                 | of col (ı)                             |  | less than -0-) <b>or</b><br>om col (h)) |
|   | as of 12/31/69  | over col                        | l (j), if any                          | Losses (III                                |   |
| a   |   |                                 |  |  | 237,486                                 |
| b   |   |                                 |  |  | 19,326                                  |
| C   |   |                                 |  |  |   |
| d   |   |                                 |  |  |   |
| <u>e</u>  |   | If gain, also enter in P        |  |  |   |
| •   | gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi | ons) If (loss), enter -0        | )-<br>}                                | 3  | 259,100                                 |
| Part V Qualification  | Jnder Section 4940(e) for Re  | educed Tax on Net               | Investment Inc                         | come                                       |   |
| (For optional use by domestic p                               | private foundations subject to the sec  | ction 4940(a) tax on ne         | et investment incom                    | e )  |   |
| If section 4940(d)(2) applies, le                             | eave this part blank  |                                 |  |  |   |
| Was the foundation liable for th                              | ne section 4942 tax on the distributal of qualify under section 4940(e). Do     |                                 |  | Y .  | es 🔽 No                                 |
|   | nount in each column for each year,   |                                 |  | <u> </u>                                   |   |
| (a)   | , ,   |                                 | I I I I I I I I I I I I I I I I I I I  | (d)  |   |
| Base period years Calendar<br>year (or tax year beginning in) | <b>(b)</b><br>Adjusted qualifying distributions                                 | (c)<br>Net value of noncharitab | ole-use assets                         | Distribution rati<br>(col (b) divided by c |   |
| 2018  | 192,200   |                                 | 4,359,913                              | ·  | 0 044083                                |
| 2017  | 165,150   |                                 | 3,710,379                              |  | 0 04451                                 |
| 2016  | 171,037   |                                 | 3,010,474                              |  | 0 056814                                |
| 2015  | 179,700   |                                 | 2,610,014                              |  | 0 06885                                 |
| 2014  | 108,500   |                                 | 2,499,232                              |  | 0 043413                                |
| 2 Total of line 1, column (                                   | d)  |                                 | 2                                      |  | 0 25767                                 |
|   | o for the 5-year base period—divide (   |                                 |  |  | 0.054504                                |
| •   | ndation has been in existence if less   | ,                               | 3                                      |  | 0 051534                                |
|   | ncharitable-use assets for 2019 from  | •                               |  |  | 4,536,475                               |
|   |   |                                 | 5                                      |  | 233,783                                 |
|   | ent income (1% of Part I, line 27b)   |                                 | 6                                      |  | 4,033                                   |
|   |   |                                 | 7                                      |  | 237,816                                 |
|   | ions from Part XII, line 4 ,  |                                 |  | - 10/ 1- 1 -                               | 217,050                                 |
| If line 8 is equal to or gre<br>instructions                  | eater than line 7, check the box in Pa  | art VI, line 1b, and com        | npiete that part usin                  | ga 1% tax rate Se                          | e tne Part VI                           |

Page **6** 

| 5a   | During the year did the foundation  | pay o                      | r incur any amount to                 |   |                                       |             |         |                   | Yes   | No  |
|------|---|----------------------------|---------------------------------------|---|---------------------------------------|-------------|---------|-------------------|-------|-----|
|      | (1) Carry on propaganda, or other   | ttempt to influence legisl | ation (section 4945(e))?              |   | es 🗸                                  | No.         |         |                   |       |     |
|      | (2) Influence the outcome of any specific public election (see section 4955), or to o |                            |                                       |   |                                       | es 🗀        | ""      |                   |       |     |
|      | on, directly or indirectly, any voter registration drive? Yes V No                    |                            |                                       |   |                                       |             |         |                   |       |     |
|      | (3) Provide a grant to an individual for travel, study, or other similar purposes?    |                            |                                       |   |                                       |             | No      |                   |       |     |
|      | (4) Provide a grant to an organizat   |                            |                                       |   |                                       |             |         |                   |       |     |
|      | in section 4945(d)(4)(A)? See   |                            |                                       |   |                                       | es 🗸        | No      |                   |       |     |
|      | (5) Provide for any purpose other   |                            | - ·                                   | • |                                       |             |         |                   |       |     |
|      | educational purposes, or for the  |                            | · ·                                   |   | Y                                     | es 🗸        | No      |                   |       |     |
| Ь    | If any answer is "Yes" to 5a(1)–(5)   |                            | =                                     |   |                                       | n           | ١.      |                   |       |     |
|      | Regulations section 53 4945 or in a   |                            |                                       |   |                                       |             | ⊢:      | 5b                |       |     |
| _    | Organizations relying on a current  If the answer is "Yes" to question 5              |                            |                                       |   |                                       |             |         |                   |       |     |
| С    | tax because it maintained expendit  |                            |                                       | •                                       |                                       |             |         |                   |       |     |
|      | If "Yes," attach the statement requ   |                            |                                       |   |                                       | es 📙        | No      |                   |       |     |
| 6-   | Did the foundation, during the year   |                            | =                                     |   | ıma an                                |             |         |                   |       |     |
| 6a   | a personal benefit contract?  | •                          |                                       |   |                                       |             |         |                   |       |     |
| ь    | Did the foundation, during the year   |                            |                                       |   | Y                                     | es 🗸        | No      | 6ь                |       | No  |
| b    | If "Yes" to 6b, file Form 8870  | , pay                      | premiums, directly or mu              | infectiv, on a personal be              | ment contract.                        |             | H       | -                 |       | 110 |
| 7a   | At any time during the tax year, wa   | s the                      | foundation a party to a r             | prohibited tax shelter trai             | nsaction?                             |             |         |                   |       |     |
| b    | If "Yes", did the foundation receive  |                            |                                       |   | Ш ¥                                   | es 🗹        | No .    | 7b                |       |     |
| 8    | Is the foundation subject to the sec  |                            | •                                     |   |                                       | •           | F.      |                   |       |     |
| •    | excess parachute payment during t   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            | ers, Directors, Trust                 |   |                                       | es 🔽        |         |                   |       |     |
| Pai  | and Contractors   | OIIIC                      | ers, Directors, Trust                 | lees, roundation Ma                     | illagers, nigiliy i                   | Palu Eli    | iipioye | :65,              |       |     |
| 1    | List all officers, directors, truste  | oc f                       | undation managers ar                  | d their compensation                    | Saa instructions                      |             |         |                   |       |     |
|      | List an officers, directors, truste   |                            | <b>b)</b> Title, and average          | (c) Compensation (If                    |                                       | ns to       |         |                   |       |     |
|      | (a) Name and address  | '                          | hours per week<br>devoted to position | not paid, enter<br>-0-)                 | employee benefit p<br>deferred compen | lans and    |         | xpense<br>er allo |       |     |
| JACK | GUTTENPLAN  | TRUS                       | TEE                                   | 0                                       |                                       | 0           |         |                   |       | 0   |
|      | TREET ROUTE 36 EAST<br>LETOWN, NJ 07748   | U                          |                                       |   |                                       |             |         |                   |       |     |
|      | r GUTTENPLAN  | TRUS                       | TEE                                   | 0                                       |                                       | 0           |         |                   |       |     |
|      | TREET ROUTE 36 EAST   | 0                          |                                       | Ĭ                                       |                                       | 0           |         |                   |       | U   |
|      | LETOWN, NJ 07748  |                            |                                       |   |                                       |             |         |                   |       |     |
|      | GUTTENPLAN  | TRUS                       | TEE                                   | 0                                       |                                       | 0           |         |                   |       | 0   |
|      | TREET ROUTE 36 EAST<br>LETOWN, NJ 07748   | ľ                          |                                       |   |                                       |             |         |                   |       |     |
| 2    |   | id er                      | nployees (other than t                | l<br>hose included on line :            | ∟<br>L−see instructions               | ). If nor   | ne, ent | er "No            | ONE.  | ·-  |
|      |   |                            | ·                                     |   | (d) Contributio                       | <del></del> |         |                   |       |     |
|      | Name and address of each employee   |                            | (b) Title, and average hours per week | (c) Compensation                        | employee ben                          |             | (e) Ex  |                   |       |     |
|      | more than \$50,000  |                            | devoted to position                   | ` '                                     | plans and defe<br>compensation        |             | otne    | er allov          | wance | !5  |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
|      |   |                            |                                       |   |                                       |             |         |                   |       |     |
| Tota | I number of other employees paid o  | /er \$5                    | 0,000                                 |   |                                       | •           |         |                   |       |     |

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

| 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  Total number of others receiving over \$50,000 for professional services.  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc  1  2  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 | Form 990-PF (2019)  |   | Page <b>7</b>    |
|--|---|---|------------------|
| (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation  Total number of others receiving over \$50,000 for professional services   |   | es, Foundation Managers, Highly Paid                                    | Employees,       |
| Total number of others receiving over \$50,000 for professional services   |   | ervices (see instructions). If none, enter "N                           | ONE".            |
| Part IX-B 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 2 3 4 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   | (a) Name and address of each person paid more than \$50,000   | (b) Type of service   | (c) Compensation |
| Part IX-B 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 2 3 3 4 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   |   |   |                  |
| Part IX-B 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 2 3 3 4 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   |   |   |                  |
| Part IX-B 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 2 3 3 4 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   |   |   |                  |
| Part IX-B 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 2 3 3 4 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   |   |   |                  |
| 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.  2  3  4  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   |   | · · · · · · · · · · · · · · · · · · ·                                   |                  |
| 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  |   |   |                  |
| 2  3  4  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   | List the foundation's four largest direct charitable activities during the tax year $$ Including anizations and other beneficiaries served, conferences convened, research papers $\mu$ | le relevant statistical information such as the number of produced, etc | 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   |   | _                |
| 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  |   |   | -                |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount   | 2   |   |                  |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount   | 3   |   |                  |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount   |   |   |                  |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount   | 4   |   |                  |
|  | Part IX-B Summary of Program-Related Investments (s   | see instructions)   |                  |
| <b>▲</b> N/ ↑  |   | ring the tax year on lines 1 and 2                                      | Amount           |
| 2  |   |   |                  |
|  |   |   |                  |
| All other program-related investments See instructions  3  | , -   |   |                  |
|  |   |   |                  |
| Total. Add lines 1 through 3   | Total. Add lines 1 through 3  |   |                  |

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

За 3h

4

5

217.050

217.050

Form 990-PF (2019)

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . . . . . . . .

4

5

217,050

Form **990-PF** (2019)

1,709

Page 9

| Form | 990-PF  | (201 |
|------|---------|------|
| Pa   | rt XIII | •    |

| O-PF | (2 | 01 | 9 | ) |   |
|------|----|----|---|---|---|
| 7111 |    |    |   |   | Ξ |

| )-PF (20 | 019)                 |                    |
|----------|----------------------|--------------------|
| (III)    | Undistributed Income | (see instructions) |

1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019 (a)

Corpus

30.877

1,709

29,168

29,168

4,538

2.829 26,339

26 339

(b)

Years prior to 2018

(c)

2018

- **b** Total for prior years
- a Enter amount for 2018 only. . . . . . .
- 2017, 2016, 2015 Excess distributions carryover, if any, to 2019 a From 2014. . . . . **b** From 2015. . . .
- c From 2016. . . d From 2017. . . . . e From 2018. . . . .
- f Total of lines 3a through e. . . . . . . .

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

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

same amount must be shown in column (a) )

**5** Excess distributions carryover applied to 2019

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

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

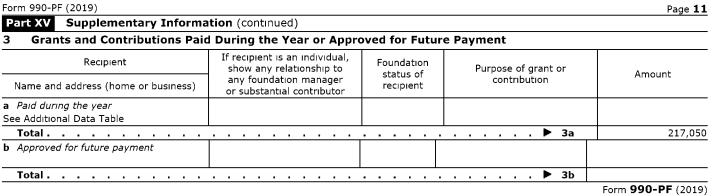
9 Excess distributions carryover to 2020.

10 Analysis of line 9 a Excess from 2015. .

**b** Excess from 2016. . c Excess from 2017. . . d Excess from 2018. . e Excess from 2019. .

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

indicated below:



| Enter gross amounts unless otherwise indicated       |   | Unrelated bu                                    | isiness income                 | Excluded by section                 | (e)<br>Related or exemp               |  |
|--|---|---|--------------------------------|-------------------------------------|---------------------------------------|--|
| _  | n service revenue   | (a)<br>Business code                            | (b)<br>Amount                  | (c)<br>Exclusion code               | (d)<br>Amount                         | function income<br>(See instructions ) |
|  |   |   |                                |                                     |                                       |  |
|  |   |   |                                |                                     |                                       |  |
|  |   |   |                                |                                     |                                       |  |
|  |   |   |                                |                                     |                                       |  |
|  |   |   |                                |                                     |                                       |  |
| g Fees   | and contracts from government agencies  |   |                                |                                     |                                       |  |
|  | ership dues and assessments   |   |                                |                                     |                                       |  |
| 3 Interes  | t on savings and temporary cash<br>nents  |   |                                | 14                                  | 2,621                                 |  |
| 4 Divider  | nds and interest from securities  |   |                                | 14                                  | 158,362                               |  |
| <b>5</b> Net rer                                     | ntal income or (loss) from real estate  |   |                                |                                     |                                       |  |
|  | financed property   |   |                                |                                     |                                       |  |
|  | ebt-financed property   |   |                                |                                     |                                       |  |
|  | ntal income or (loss) from personal property  |   |                                | 4.5                                 | 1.464                                 |  |
|  | nvestment income  |   |                                | 15                                  | 1,464                                 |  |
| invento  | • •   |   |                                | 18                                  | 11,423                                |  |
|  | ome or (loss) from special events   |   |                                | 10                                  | 11,423                                |  |
|  | profit or (loss) from sales of inventory  |   |                                |                                     |                                       |  |
|  | revenue a   |   |                                |                                     |                                       |  |
|  |   |   |                                |                                     |                                       |  |
| c  |   |   |                                |                                     |                                       |  |
|  |   |   |                                |                                     |                                       |  |
| d  |   |   |                                |                                     |                                       |  |
| d<br>e   |   |   |                                |                                     |                                       |  |
| d<br>e<br>2 Subtot                                   | al Add columns (b), (d), and (e).   |   |                                |                                     | 173,870                               |  |
| d<br>e<br>2 Subtot<br>3 Total.                       | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)   |   |                                | 13                                  | 173,870                               |  |
| d<br>e<br>2 Subtot<br>3 Total.                       | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  | lations )                                       |                                |                                     | · · · · · · · · · · · · · · · · · · · |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV. | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV. | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    |  |
| d<br>e<br>2 Subtot<br>3 Total.<br>(See w<br>Part XV  | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | lations )<br>le Accomplish<br>income is reporte | ment of Exemed in column (e) c | pt Purposes of Part XVI-A contribut | ted importantly to                    | 173,870                                |

| orm 99        | 90-PF          | (2019)  |  |                                 |   |                               |   |                           | Pa     | age <b>1</b> : |
|---------------|----------------|---|--|---------------------------------|---|-------------------------------|---|---------------------------|--------|----------------|
| Part          |                | Exempt Organi   | zations                                |                                 |   |                               | Relationships With Noncha   |                           |        |                |
|               |                | rganization directly or in<br>r than section 501(c)(3)  |  |                                 |   |                               | ganızatıon described in section 50<br>anızatıons?   | 1                         | Yes    | No             |
| a Trai        | nsfers         | from the reporting foun   | dation to a noncha                     | rıtable exe                     | empt organizati   | on of                         |   |                           |        |                |
|               |                | h   |  |                                 |   |                               |   | 1a(1)                     |        | No             |
|               |                | er assets<br>Insactions   |  |                                 |   |                               |   | 1a(2)                     |        | No             |
|               |                | es of assets to a nonchar   | itable exempt orga                     | nization.                       |   |                               |   | 1b(1)                     |        | No             |
|               |                | chases of assets from a r   |  |                                 |   |                               |   | 1b(2)                     | _      | No             |
| (3)           | Ren            | tal of facilities, equipmer   | nt, or other assets.                   |                                 |   |                               |   | 1b(3)                     |        | No             |
|               |                | nbursement arrangemen   |  |                                 |   |                               |   | 1b(4)                     | +      | No             |
|               |                | ns or loan guarantees.  |  |                                 |   |                               |   | 1b(5)                     | +      | No             |
|               |                | ormance of services or m<br>of facilities, equipment, n   | ·                                      | _                               |   |                               |   | 1b(6)                     | +      | No<br>No       |
| of tl<br>ın a | he go<br>ny tr | ods, other assets, or ser<br>ansaction or sharing arra  | vices given by the<br>ngement, show in | reporting f<br>column <b>(d</b> | foundation If the state of the | ne foundation<br>he goods, ot | should always show the fair market or received less than fair market value assets, or services received | alue                      |        |                |
| (a) Line      | e No ∣         | (b) Amount involved   | (c) Name of noncha                     | arıtable exer                   | mpt organization  | (d) Desc                      | cription of transfers, transactions, and s  | naring arra               | angeme | nts            |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               | +              |   |  |                                 |   |                               |   |                           |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               | _              |   |  |                                 |   |                               |   |                           |        |                |
|               | -+             |   |  |                                 |   |                               |   |                           |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               | +              |   |  |                                 |   |                               |   |                           |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
| des           | cribe          | undation directly or indired in section 501(c) (other complete the following single) Name of organization | r than section 501(<br>chedule         | c)(3)) or ı                     | •   |                               |   | ✓ No<br>ationship         |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               |                |   |  |                                 |   |                               |   |                           |        |                |
|               | of             |   | , it is true, correct,                 |                                 |   |                               | l<br>companying schedules and statemer<br>or (other than taxpayer) is based o                           |                           |        |                |
| Sign<br>Here  |                | *****   |  |                                 | 2020-05-15  | *                             | reti  | the IRS durn<br>the prepa |        |                |

Title Signature of officer or trustee Date (see instr ) 🔽 Yes 🗆 No

Print/Type preparer's name Preparer's Signature Date Check if selfemployed ightharpoonupANTHONY J FAUGNO Paid **Preparer** Firm's name ▶ EISNERAMPER LLP **Use Only** Firm's address ► 111 WOOD AVE SO STE 600 ISELIN, NJ 088302700

Phone no (732) 243-7000 Form **990-PF** (2019)

P00235434

PTIN

Firm's EIN ▶

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

or substantial contributor

Total .

| a Paid during the year   |      |    |   |        |
|--|------|----|---|--------|
| CLEAN OCEAN ACTION<br>18 HARTSHORNE DRIVE<br>HIGHLANDS, NJ 07732 | NONE | PC | TO PROTECT AND CLEAN UP THE<br>NEW JERSEY AND NEW YORK<br>COAST | 20,000 |

| HIGHLANDS, NJ 07732  |      |     | COAST  |        |
|--|------|-----|--|--------|
| FAMILY AND CHILDRENS SERVICE<br>100E OLD COUNTRY ROAD<br>MINEOLA, NY 11501 | NONE | PC  | TO PROTECT AND STRENGTHEN<br>LONG ISLAND'S MOST<br>VULNERABLE CHILDREN | 25,000 |
| JEWIC FOR JECUICO HAJOHT CTREET  | NONE | DC. | TO MAKE THE MECCIALICHED OF  | 6 000  |

| 100E OLD COUNTRY ROAD<br>MINEOLA, NY 11501                | NONE |    | LONG ISLAND'S MOST<br>VULNERABLE CHILDREN  | 23,000 |
|---|------|----|--|--------|
| JEWS FOR JESUS60 HAIGHT STREET<br>SAN FRANCISCO, CA 94102 | NONE | PC | TO MAKE THE MESSIAHSHIP OF<br>JESUS AN UNAVOIDABLE ISSUE<br>TO OUR JEWISH PEOPLE | 6,000  |

| 100E OLD COUNTRY ROAD<br>MINEOLA, NY 11501                |      |    | LONG ISLAND'S MOST<br>VULNERABLE CHILDREN  | ·   |
|---|------|----|--|-----|
| JEWS FOR JESUS60 HAIGHT STREET<br>SAN FRANCISCO, CA 94102 | NONE | PC | TO MAKE THE MESSIAHSHIP OF<br>JESUS AN UNAVOIDABLE ISSUE<br>TO OUR JEWISH PEOPLE | 6,0 |
|   |      |    |  |     |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

|   | or substantial contributor |  |       |
|---|----------------------------|--|-------|
| a Paid during the year                                      |                            |  |       |
| TWO RIVER THEATRE<br>21 BRIDGE AVENUE<br>RED BANK, NJ 07701 | NONE                       | TO BRING ARTISTIC AND<br>EDUCATION PROGRAMMING TO<br>RED BANK NJ | 5,000 |

5,000

217,050

| COUNT BASIE THEATRE<br>99 MONMOUTH STRET<br>RED BANK, NJ 07701 | NONE | PC | TO BRING QUALITY ENTERTAINMENT AND EDUCATION PROGRAMS TO CELEBRATE DIVERSTITY |
|--|------|----|---|
|--|------|----|---|

or substantial contributor

Name and address (home or business)

Total .

| RED BANK, NJ 07701                          |      |    | EDUCATION PROGRAMS TO<br>CELEBRATE DIVERSTITY |        |
|---|------|----|---|--------|
| CAMP BEREA68 BEREA ROAD<br>HEBRON, NH 03241 | NONE | PC | TO CHANGE LIVES OF YOUNG PEOPLE FOR CHRIST    | 10,000 |

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COALITION FOR CHRISTIAN OUTREACH NONE PC TO TRANSFORM COLLEGE 5,000

| PITTSBURGH, PA 15206   |      |    | WORLD  |        |
|--|------|----|--|--------|
| WOUNDED WARRIOR PROJECT<br>ROOM 320 370 7TH AVENUE<br>NEW YORK, NY 10001 | NONE | PC | TO SUPPORT THE MISSION TO HONOR AND EMPOWER WOUNDED WARRIORS | 6,000  |
| LUNCH BREAK 121 DRS JAMES PARKER BLVD RED BANK NJ 07701                  | NONE | PC | TO SUPPORT THE MISSION TO ALLEVIATE HUNGER AND LEAD          | 10,000 |

| ROOM 320 370 7TH AVENUE<br>NEW YORK, NY 10001                  |      |    | HONOR AND EMPOWER WOUNDED WARRIORS   |        |
|--|------|----|--|--------|
| LUNCH BREAK<br>121 DRS JAMES PARKER BLVD<br>RED BANK, NJ 07701 | NONE | PC | TO SUPPORT THE MISSION TO<br>ALLEVIATE HUNGER AND LEAD<br>THOSE SERVED TO SELF-<br>SUFFICIENCY AND HEALTHIER<br>LIFESTYLES | 10,000 |

▶ 3a

217,050

| NEW YORK, NY 10001   |      |    | WOUNDED WARRIORS   |      |
|--|------|----|--|------|
| LUNCH BREAK<br>121 DRS JAMES PARKER BLVD<br>RED BANK, NJ 07701 | NONE | PC | TO SUPPORT THE MISSION TO<br>ALLEVIATE HUNGER AND LEAD<br>THOSE SERVED TO SELF-<br>SUFFICIENCY AND HEALTHIER<br>LIFESTYLES | 10,0 |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NONE D.C 40.000 DARK CHURCHS! DARK BOAR

| TINTON FALLS, NJ 07724   | NONE | PC | INVITING AND INSPIRING PEOPLE TO FOLLOW JESUS   | 40,000 |
|--|------|----|---|--------|
| HOLIDAY EXPRESS<br>968 SHREWSBURY AVENUE<br>TINTON FALLS, NJ 07724 | NONE | PC | TO PROMOTE MISSION TO DELIVER MUSIC, FOOD, GIFTS, FINANCIAL SUPPORT AND FRIEDNSHIP TO THOSE WITH THE GREATEST NEED FOR THE GIFT OF HUMAN KINDNESS DURING THE HOLIDAY SEASON | 5,000  |

|  |      |    | THE GREATEST NEED FOR THE<br>GIFT OF HUMAN KINDNESS<br>DURING THE HOLIDAY SEASON<br>AND THOROUGHOUT THE YEAR |         |
|--|------|----|--|---------|
| SUMMIT CHURCH720 SUMMIT AVENUE<br>HACKENSACK, NJ 07601 | NONE | PC | TO SUPPORT THE CAUSE OF INVITING & INSPIRING PEOPLE TO FOLLOW JESUS  | 12,500  |
| Total  |      |    | ▶ 3a   | 217,050 |

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MEMORIAL SLOAN KETTERING NONE PC TO SUPPORT A CAUSE WHICH IS 10,000 1275 YORK AVENUE ENGAGED IN FINDING A CURE

| NEW YORK, NY 10065                                  |      |    | FOR CANCER   |       |
|---|------|----|--|-------|
| RAINE FOUNDATION17 RACOON DRIVE<br>HAZLET, NJ 07730 | NONE | PC | TO SUPPORT A CAUSE WHICH<br>ASSISTS CHILDREN AND THEIR<br>FAMILIES WHO ARE IN CRISIS | 7,500 |
| HABITAT FOR HUMANITY<br>111 JOHN ST 23RD FLOOR      | NONE | PC | TO HELP PEOPLE TO BUILD OR IMPROVE THEIR HOME AND                                    | 200   |

|  |      |    | .,   |     |
|--|------|----|--|-----|
| HABITAT FOR HUMANITY<br>111 JOHN ST 23RD FLOOR<br>NEW YORK, NY 10038 | NONE | PC | TO HELP PEOPLE TO BUILD OR IMPROVE THEIR HOME AND ADDRESS THE ISSUES OF POVERTY HOUSING ALL OVER THE WORLD | 200 |
|  |      |    |  |     |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FELLOWSHIP OF CHRISTIAN ATHLETES NONE PC TO LEAD EVERY COACH AND 15.000

| 6 DRUMMOND PL<br>RED BANK, NJ 07701       |      | ATHLETE INTO A GROWING<br>RELATIONSHIP WITH JESUS<br>CHRIST AND HIS CHURCH |       |
|---|------|--|-------|
| AMERICAN FOUNDATIO FOR SUICIDE PREVENTION | NONE | TO SAVE LIVES AND BRING<br>HOPE TO THOSE AFFECTED BY                       | 7,500 |

| MERICAN FOUNDATIO FOR SUICIDE<br>PREVENTION<br>120 WALL STREET 29TH FLOOR<br>NEW YORK, NY 10005 | NONE |    | TO SAVE LIVES AND BRING<br>HOPE TO THOSE AFFECTED BY<br>SUICIDE | 7,500 |  |
|---|------|----|---|-------|--|
| NEW HORIZONS FOUNDATION<br>5550 TECH CENTER DR SUITE 303  | NONE | PC | TO SUPPORT EXISTING<br>CHARITABLE ORGANIZATIONS                 | 300   |  |

| EW YORK, NY 10005   |      |   |     |
|---|------|---|-----|
| EW HORIZONS FOUNDATION<br>550 TECH CENTER DR SUITE 303<br>OLORADO SPRINGS, CO 80919 | NONE | <br>TO SUPPORT EXISTING<br>CHARITABLE ORGANIZATIONS | 30  |
|   |      |   | i e |

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WESTON PLAYHOUSE703 MAIN STREET NONE PC TO CONTRIBUTE TO THE 300

WESTON, VT 05161

Total .

|   |      |    | DEVELOPMENT, AND RETREATS   |       |
|---|------|----|---|-------|
| EMMANUEL CANCER FOUNDATION<br>1710 HIGHWAY 71 STE 2<br>WALL, NJ 07719 | NONE | PC | TO PROVIDE COMFORT AND SUPPORT THROUGH PROFESSIONAL IN-HOME COUNSELING AND ASSISTANCE TO NJ FAMILIES WITH | 1,500 |

AMERICAN THEATRE THROUGH TRAINING PROGRAMS, PLAY

▶ 3a

|   |      | TO NJ FAMILIES WITH<br>PEDIATRIC CANCER                                 |     |
|---|------|---|-----|
| COVENANT HOUSE461 EIGHTH AVENUE<br>NEW YORK, NY 10001 | NONE | <br>TO PROVIDE SHELTER AND<br>CARE FOR HOMELESS AND<br>TRAFFICKED YOUTH | 250 |

Recipient
Name and address (home or business)

Recipient
If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Purpose of grant or contribution
recipient

Purpose of grant or contribution
recipient

| CAMPUS CRUSADE<br>100 LAKE HART DRIVE<br>ORLANDO, FL 32832 | NONE | PC | TO OFFER SPIRITUAL GUIDANCE, RESOURCES AND PROGRAMS FOR PEOPLE  | 12,500 |
|--|------|----|---|--------|
| THE V FOUNDATION<br>14600 WESTON PARKWAY<br>CARY, NC 27513 | NONE | PC | TO GENERATE BROAD-BASED<br>SUPPORT FOR CANCER<br>RESEARCH AND CREATE AN<br>URGENT AWARENESS AGAINST<br>CANCER | 6,000  |

| ,   |      |    | URGENT AWARENESS AGAINST<br>CANCER   |         |
|---|------|----|--|---------|
| BILLY GRAHAM EVANGELISTIC<br>ASSOCIATION<br>1 BILLY GRAHAM PARKWAY<br>CHARLOTTE, NC 28201 | NONE | PC | TO PROCLAIM THE GOSPEL OF<br>JESUS CHRIST BY EVERY MEANS<br>AND TO EQUIP CHURCH AND<br>OTHERS TO DO THE SAME | 6,000   |
| Total   |      |    | ▶ 3a   | 217,050 |

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

recipient

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

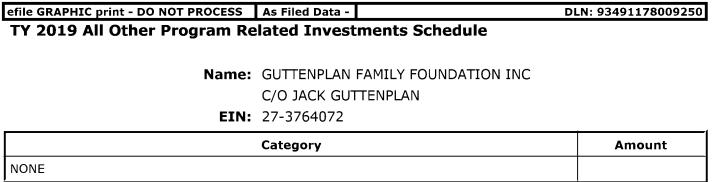
any foundation manager

Name and address (home or business)

| Name and address (nome or business) | or substantial contributor | ·  |                           |     |
|-------------------------------------|----------------------------|----|---------------------------|-----|
| a Paid during the year              |                            |    |                           |     |
| LITTLE SILVER VOLUNTEER FIRE        | NONE                       | PC | TO RESPOND FAITHFULLY AND | 500 |

| NONE | PC   | TO RESPOND FAITHFULLY AND |                         |
|------|------|---------------------------|-------------------------|
|      |      | STEADFASTLY TO CALLS OF   |                         |
|      |      | THOSE IN NEED             |                         |
|      |      |                           |                         |
| ı    | NONE | 1                         | STEADFASTLY TO CALLS OF |

| COMPANY<br>543 PROSPECT AVE<br>LITTLE SILVER, NJ 07739 | STEADFASTLY TO CALLS OF<br>THOSE IN NEED |         |
|--|--|---------|
| Total  | <br><b>&gt;</b> 3a                       | 217,050 |



lefile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491178009250 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2019 Depreciation Schedule Name: GUTTENPLAN FAMILY FOUNDATION INC. C/O JACK GUTTENPLAN

**EIN:** 27-3764072

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

Name: GUTTENPLAN FAMILY FOUNDATION INC

C/O JACK GUTTENPLAN

**EIN:** 27-3764072

**Investments Corporation Stock Schedule** 

| Name of Stock              | End of Year Book<br>Value | End of Year Fair<br>Market Value |
|----------------------------|---------------------------|----------------------------------|
| BGC PARTNERS SHS           | 55,529                    | 135,313                          |
| PFIZER SHS                 | 15,575                    | 39,180                           |
| AMERICA MOVIL SHS          | 44,529                    | 64,000                           |
| BGC PARTNERS INC SHS       | 28,457                    | 56,953                           |
| BANK OF NEW YORK SHS       | 24,800                    | 60,396                           |
| CEMEX SHS                  | 4,501                     | 2,468                            |
| CHESAPEAKE ENERGY SHS      | 95,144                    | 4,213                            |
| WALT DISNEY CO SHS         | 2,204                     | 10,847                           |
| ENCANA CORP SHS            | 6,400                     | 4,690                            |
| FAIRFAX SHS                | 50,870                    | 58,639                           |
| LIBERTY GLOBAL SHS         | 9,161                     | 5,685                            |
| PFIZER SHS                 | 7,190                     | 15,672                           |
| SOLAR CAPITAL SHS          | 165,050                   | 164,960                          |
| VODAFONE SHS               | 226,621                   | 135,310                          |
| WELLS FARGO SHS            | 17,431                    | 34,970                           |
| BERKSHIRE HATHAWAY INC SHS | 8,254                     | 22,650                           |
| FEDEX CORP SHS             | 47,868                    | 60,484                           |
| BP PL C SPONSORED ADR SHS  | 114,931                   | 101,898                          |
| NEWMONT MINING CORP SHS    | 59,885                    | 112,970                          |
| FREEPORT MCMORAN SHS       | 29,486                    | 13,120                           |
| MOSAIC COMPANY SHS         | 23,271                    | 10,820                           |
| BP PLC SHS                 | 39,456                    | 37,740                           |
| CNH INDUSTRIAL SHS         | 23,880                    | 32,296                           |
| AMERICA MOVIL SHS          | 44,114                    | 32,752                           |
| AMERICA MOVIL SHS          |                           |                                  |
| BLACK STONE SHS            | 18,470                    | 12,720                           |
| CK HUTCHISON SHS           | 60,533                    | 57,180                           |
| VODAFONE SHS               | 118,062                   | 77,320                           |
| AMERICA MOVIL SHS          |                           |                                  |
| CNH INDUSTRIAL SHS         |                           |                                  |

| Name of Stock                  | End of Year Book<br>Value | End of Year Fair<br>Market Value |
|--------------------------------|---------------------------|----------------------------------|
| CK HUTCHISON SHS               | 6,950                     | 14,295                           |
| FREEPORT MCMORAN SHS           | 33,536                    | 22,304                           |
| MELCO INTL SHS                 | 7,906                     | 14,058                           |
| BP PLC SHS                     | 0                         | 0                                |
| LAFARGEHOLCIM LTD SHS          | 70,469                    | 80,185                           |
| SOLAR SR CAP SHS               | 69,775                    | 74,624                           |
| TELESITES SAB SHS              | 1,371                     | 1,516                            |
| UNITED TECHNOLOGIES SHS        | 9,891                     | 14,976                           |
| TELESITES SAB SHS              | 1,340                     | 1,481                            |
| MERCK & CO INC SHS             | 8,463                     | 36,380                           |
| MERCK & CO INC SHS             | 8,175                     | 22,738                           |
| AMERICA MOVIL SHS              |                           |                                  |
| AT&T SHS                       | 5,689                     | 7,816                            |
| AT&T SHS                       | 8,522                     | 11,724                           |
| BANK NEW YORK SHS              | 15,649                    | 40,365                           |
| CENTURY LINK SHS               | 254,504                   | 186,182                          |
| PARK HOTELS SHS                | 166,742                   | 155,220                          |
| SOLAR CAP SHS                  | 62,788                    | 66,376                           |
| SOLAR SR CAP SHS               | 166,285                   | 176,000                          |
| CENTURYLINK INC SHS            | 161,216                   | 132,100                          |
| CNX RESOURCES CORP SHS         | 103,034                   | 61,950                           |
| PARK HOTELS & RESORTS INC. SHS | 77,998                    | 74,609                           |
| YUM CHINA HOLDINGS INC.        |                           |                                  |
| BANK NY SHS                    |                           |                                  |
| BANK NY SHS                    |                           |                                  |
| JPMORGAN SHS                   | 25,636                    | 97,580                           |
| LAFARGEHOLCIM SHS              | 35,207                    | 44,240                           |
| NUTRIEN SHS                    | 137,516                   | 118,577                          |
| NEWMARK GROUP SHS              | 26,214                    | 142,179                          |
| ALLERGAN SHS                   | 61,833                    | 76,468                           |

Name of Stock

**Investments Corporation Stock Schedule** 

**DISCOVERY INC SHS** 

**NEWMARK GROUP SHS** 

AFFILIATED MANAGERS

BANK NEW YORK SHS

LIBERTY LATIN AMERICA SHS

**NUTRIEN SHS** 

DISCOVERY INC LAZARD LTD SHS

LAZARD LTD SHS

GRAHAM HOLDINGS COMPANY SHS

# **Value** 6,831

**End of Year Book** 

| 28,008 | 42,824 |
|--------|--------|
| 75,655 | 79,920 |
| 47,023 | 42,370 |
| 27,641 | 31,968 |
| 1,843  | 830    |

28,115

40,841

16,495

**End of Year Fair** 

Market Value

9,056

31,950

28,746

| effie GRAPHIC print - DO NO | OT PROCESS   As Filed Data - | DLN: 934911/8009250 |
|-----------------------------|------------------------------|---------------------|
|                             |                              |                     |
|                             |                              |                     |

## TY 2019 Investments - Other Schedule

Name: GUTTENPLAN FAMILY FOUNDATION INC

C/O JACK GUTTENPLAN

FTN: 27-3764072

| E114: 27-3704072             |                       |            |                                  |  |  |  |
|------------------------------|-----------------------|------------|----------------------------------|--|--|--|
| Investments Other Schedule 2 |                       |            |                                  |  |  |  |
| Category/ Item               | Listed at Cost or FMV | Book Value | End of Year Fair<br>Market Value |  |  |  |
| 200,000 US TREASURY BILL     |                       | 199,225    | 199,529                          |  |  |  |
| 200,000 US TREASURY BILL     |                       | 200,011    | 200,332                          |  |  |  |
| 300,000 US TREASURY BILL     |                       |            |                                  |  |  |  |
| 100,000 US TREASURY BILL     |                       | 99,880     | 100,262                          |  |  |  |
| 100,000 US TREASURY BILL     |                       |            |                                  |  |  |  |
| 200,000 US TREASURY BILL     |                       | 200,019    | 200,891                          |  |  |  |
| ACCRUED INTEREST             |                       |            |                                  |  |  |  |
| 400,000 US TREASURY BILL     |                       | 397,072    | 398,093                          |  |  |  |
| 200,000 US TREASURY BILL     |                       | 200,053    | 201,703                          |  |  |  |

| efile GRAPHIC print - DO NOT PROCESS   | As Filed Data -                      |                          | DLN                    | N: 93491178009250                           |  |  |  |
|--|--------------------------------------|--------------------------|------------------------|---|--|--|--|
| TY 2019 Other Expenses Sche            | TY 2019 Other Expenses Schedule      |                          |                        |   |  |  |  |
| ·                                      |                                      |                          |                        |   |  |  |  |
| Name: GUTTENPLAN FAMILY FOUNDATION INC |                                      |                          |                        |   |  |  |  |
|  | C/O JACK GUTTENPLAN                  |                          |                        |   |  |  |  |
| EIN:                                   | <b>EIN:</b> 27-3764072               |                          |                        |   |  |  |  |
| Other Expenses Schedule                |                                      |                          |                        |   |  |  |  |
| Description                            | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |  |  |  |
| MANAGEMENT FEES                        | 16,598                               | 16,598                   |                        |   |  |  |  |
| SECTION 59(E)(2) EXPENSES              | 7                                    | 7                        |                        |   |  |  |  |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491178009250 |
|--------------------------------------|-----------------|---------------------|
| TY 2019 Other Income Schedul         | e               |                     |

Name: GUTTENPLAN FAMILY FOUNDATION INC.

C/O JACK GUTTENPLAN

**EIN:** 27-3764072

| Other Income Schedule        |                                   |                          |                     |  |  |  |  |
|------------------------------|-----------------------------------|--------------------------|---------------------|--|--|--|--|
| Description                  | Revenue And<br>Expenses Per Books | Net Investment<br>Income | Adjusted Net Income |  |  |  |  |
| K-1 FROM BLACKSTONE MINERALS | 79                                | 79                       |                     |  |  |  |  |
| Royalty Income               | 1.385                             | 1,385                    |                     |  |  |  |  |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data        | -                                | DL                     | N: 93491178009250                           |  |  |  |
|--------------------------------------|----------------------|----------------------------------|------------------------|---|--|--|--|
| TY 2019 Taxes Schedule               |                      |                                  |                        |   |  |  |  |
|                                      |                      |                                  |                        |   |  |  |  |
| Name                                 | e: GUTTENPLAI        | GUTTENPLAN FAMILY FOUNDATION INC |                        |   |  |  |  |
|                                      | C/O JACK GI          | JTTENPLAN                        |                        |   |  |  |  |
| EIN                                  | <b>N:</b> 27-3764072 |                                  |                        |   |  |  |  |
| Category                             | Amount               | Net Investment<br>Income         | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |  |  |
| FOREIGN TAX WITHHELD                 | 1,669                | 1,669                            |                        |   |  |  |  |
| INCOME TAXES PAID                    | 20,648               |                                  |                        |   |  |  |  |

| efile GRAPHIC print - De  | O NOT PROCESS   | As Filed Data -   |  |                     |                  | DLN: 93491178009250         |  |
|---|---|---|--|---------------------|------------------|-----------------------------|--|
| Schedule B  |   | Schedu  | le of Contributo   | rs                  |                  | OMB No 1545-0047            |  |
| (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service   | l   |   | Form 990, 990-EZ, or 990-<br><u>v/Form990</u> for the latest in  |                     |                  | 2019                        |  |
| Name of the organization<br>GUTTENPLAN FAMILY FOU   | NDATION INC   |   |  |                     | Employer id      | entification number         |  |
| C/O JACK GUTTENPLAN   |   |   |  |                     | 27-3764072       |                             |  |
| Organization type (chec   | ck one)   |   |  |                     |                  |                             |  |
| Filers of:  | Section:  |   |  |                     |                  |                             |  |
| Form 990 or 990-EZ  | ☐ 501(c)(   | ) (enter number) or   | ganization   |                     |                  |                             |  |
|   | ☐ 4947(a)( <sup>2</sup>   | 1) nonexempt char   | table trust <b>not</b> treated as  | a private founda    | tion             |                             |  |
|   | ☐ 527 politi  | cal organization  |  |                     |                  |                             |  |
| Form 990-PF   | <b>✓</b> 501(c)(3)  | exempt private fou  | ındatıon   |                     |                  |                             |  |
|   | 4947(a)(1   | 4947(a)(1) nonexempt charitable trust treated as a private foundation |  |                     |                  |                             |  |
|   | 501(c)(3)   | taxable private fou   | ındatıon   |                     |                  |                             |  |
| money or other contributions  |   |   | F that received, during the property of the parts I and II. Se   |                     |                  |                             |  |
| Special Rules   |   |   |  |                     |                  |                             |  |
| under sections 50 received from any   | 09(a)(1) and 170(b)   | (1)(A)(vi), that checuring the year, total                            | Form 990 or 990-EZ that<br>cked Schedule A (Form 9<br>I contributions of the great<br>plete Parts I and II | 990 or 990-EZ), Pa  | art II, line 13, | 16a, or 16b, and that       |  |
| 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 |   |   |  |                     |                  |                             |  |
| during the year, of<br>If this box is check<br>purpose Don't co   | 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 lf 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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year |   |  |                     |                  |                             |  |
| Caution: An organization<br>990-EZ, or 990-PF), but<br>or on its Form 990PF, Pa<br>990-EZ, or 990-PF)   | it <b>must</b> answer "No   | " on Part IV, line 2,   | of its Form 990, or chec   | k the box on line I | H of its Form    |                             |  |
| For Paperwork Reduction Affor Form 990, 990-EZ, or 990  |   | ructions  | Cat No 30613X  | Schedu              | le B (Form 990   | , 990-EZ, or 990-PF) (2019) |  |

Name of organization **Employer identification number** GUTTENPLAN FAMILY FOUNDATION INC 27-3764072 C/O JACK GUTTENPLAN Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Contributors (c) (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person JACK GUTTENPLAN 1 676 LITTLE SILVER PT RD Payroll \$ 163,495 Noncash LITTLE SILVER, NJ 07739 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person JACK GUTTENPLAN 676 LITTLE SILVER PT ROAD Payroll \$ 65,400 Noncash LITTLE SILVER, NJ 07739 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person JACK GUTTENPLAN 676 LITTLE SILVER PT RD **Payroll** \$ 175,716 **✓** Noncash LITTLE SILVER, NJ 07739 (Complete Part II for noncash contributions) (c) (a) (b) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person JACK GUTTENPLAN 676 LITTLE SILVER PT RD **Payroll** \$ 102,486 Noncash LITTLE SILVER, NJ 07739 (Complete Part II for noncash contributions) (a) (b) (C) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person Payroll \$ Noncash (Complete Part II for noncash contributions)

| Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Page 3 |  |  |                                  |  |  |
|--|--|--|----------------------------------|--|--|
|  | N FAMILY FOUNDATION INC  | Employer identification                  | number                           |  |  |
| Part II  | UTTENPLAN Noncash Property   | 27-3764072                               |                                  |  |  |
| (a)<br>No. from<br>Part I                              | (see instructions). Use duplicate copies of Part II if additional space is needed (b)  Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d)<br>Date received             |  |  |
| 1  | LISTED SECURITIES  | \$ 163,495                               | 2019-03-06                       |  |  |
| (a)<br>No. from<br>Part I                              | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (See instructions) | (d)<br>Date received             |  |  |
| 2  | LISTED SECURITIES  | \$ 65,400                                | 2019-04-10                       |  |  |
| (a)<br>No. from<br>Part I                              | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (See instructions) | (d)<br>Date received             |  |  |
| <u>3</u>   | LISTED SECURITIES  | <u>\$ 175,716</u>                        | 2019-05-08                       |  |  |
| (a)<br>No. from<br>Part I                              | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (See instructions) | (d)<br>Date received             |  |  |
| 4  | LISTED SECURITIES  | \$ 102,486                               | 2019-11-12                       |  |  |
| (a)<br>No. from<br>Part I                              | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (See instructions) | (d)<br>Date received             |  |  |
| -  |  |  |                                  |  |  |
| (a)<br>No. from<br>Part I                              | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (See instructions) | (d)<br>Date received             |  |  |
| -  |  |  |                                  |  |  |
|  |  | Schedule B (Form                         | n 990, 990-EZ, or 990-PF) (2019) |  |  |

| Schedule                  | B (Form 990, 990-EZ, or 990-PF) (2019)  |   |   | Page <b>4</b>                                   |  |
|---------------------------|---|---|---|---|--|
| GUTTENPL                  | rganization<br>AN FAMILY FOUNDATION INC<br>GUTTENPLAN                                 |   |   | Employer identification number 27-3764072       |  |
| Part III                  | Exclusively religious, charitable, etc., co than \$1,000 for the year from any one co | te columns <mark>(a) thr</mark> c<br>vely religious, char | ped in section 501(c)(7), (8), or (10) that total more rough (e) and the following line entry. For uritable, etc., contributions of \$1,000 or less for |   |  |
| (a)<br>No. from<br>Part I | (b) Purpose of gift   | (c  | ) Use of gift   | (d) Description of how gift is held             |  |
|                           | (e) Transfer of gi Transferee's name, address, and ZIP 4                              |   | •   | ationship of transferor to transferee           |  |
| (a)<br>No. from<br>Part I | (b) Purpose of gift   | (c) Use of gift   |   | (d) Description of how gift is held             |  |
|                           | Transferee's name, address, and   |   | Transfer of gift<br>Rel   | ationship of transferor to transferee           |  |
| (a)<br>No. from<br>Part I | (b) Purpose of gift   | (c) Use of gift   |   | (d) Description of how gift is held             |  |
|                           | Transferee's name, address, and ZIP 4   |   | Transfer of gift<br>Rel   | ft<br>Relationship of transferor to transferee  |  |
| (a)<br>No. from<br>Part I | (b) Purpose of gift   | _ (c  | ) Use of gift   | (d) Description of how gift is held             |  |
| ,                         | Transferee's name, address, and   |   | Transfer of gift<br>Rel   | ationship of transferor to transferee           |  |
|                           |   |   |   | Schedule B (Form 990, 990-EZ, or 990-PF) (2019) |  |