

Form **8879-EO****IRS e-file Signature Authorization  
for an Exempt Organization**

OMB No. 1545-0047

For calendar year 2020, or fiscal year beginning \_\_\_\_\_, 2020, and ending \_\_\_\_\_, 20

**2020**Department of the Treasury  
Internal Revenue Service▶ Do not send to the IRS. Keep for your records.  
▶ Go to [www.irs.gov/Form8879EO](http://www.irs.gov/Form8879EO) for the latest information.

Name of exempt organization or person subject to tax

Taxpayer identification number

OCEANFIRST FOUNDATION

22-3465454

Name and title of officer or person subject to tax

**Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) .....	1b .....
2a Form 990-EZ check here ▶	b Total revenue, if any (Form 990-EZ, line 9) .....	2b .....
3a Form 1120-POL check here ▶	b Total tax (Form 1120-POL, line 22) .....	3b .....
4a Form 990-PF check here ▶ <input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5) .....	4b 23,591.
5a Form 8868 check here ▶	b Balance due (Form 8868, line 3c) .....	5b .....
6a Form 990-T check here ▶	b Total tax (Form 990-T, Part III, line 4) .....	6b .....
7a Form 4720 check here ▶	b Total tax (Form 4720, Part III, line 1) .....	7b .....

**Part II Declaration and Signature Authorization of Officer or Person Subject to Tax**

Under penalties of perjury, I declare that ☒ I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize CONDON O'MEARA MCGINTY & DONNELLY LLP to enter my PIN 12345  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶

Date ▶

**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

13601807777

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ CONDON O'MEARA MCGINTY & DONNELLY L James Reilly Date ▶ 5/6/2021

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2020)

023051 11-03-20

19580504 152490 K4H02R

2020.03041 OCEANFIRST FOUNDATION

K4H02R\_1

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**CONDON  
O'MEARA  
MCGINTY &  
DONNELLY LLP**

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Certified Public Accountants

One Battery Park Plaza  
New York, NY 10004-1405  
Tel: (212) 661 - 7777  
Fax: (212) 661 - 4010

May 6, 2021

Ms. Katherine B. Durante  
Executive Director  
OceanFirst Foundation  
975 Hooper Avenue  
Toms River, NJ 08753

Dear Ms. Durante:

Enclosed is the tax return. We will submit, on the organization's behalf, the federal Form 990-PF tax return electronically. Please sign, date and return Form 8879-EO to us so that we may electronically file the return. The authorization form may be emailed to [alazzaruolo@comdcpa.com](mailto:alazzaruolo@comdcpa.com).

If you would like a paper copy of the return for your records, please advise.

If you have any questions, please do not hesitate to contact us.

Very truly yours,



James J. Reilly, CPA, Esq.  
Partner

JJR:dcc

# TAX RETURN FILING INSTRUCTIONS

FORM 990-PF

FOR THE YEAR ENDING

DECEMBER 31, 2020

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**PREPARED FOR:**

OCEANFIRST FOUNDATION  
975 HOOPER AVENUE  
TOMS RIVER, NJ 08753

---

**PREPARED BY:**

CONDON O'MEARA MCGINTY & DONNELLY LLP  
ONE BATTERY PARK PLAZA  
NEW YORK, NY 10004

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**AMOUNT DUE OR REFUND:**

BALANCE DUE OF \$7,823

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**MAKE CHECK PAYABLE TO:**

PAYMENTS SHOULD BE MADE USING THE ELECTRONIC FEDERAL TAX PAYMENT  
SYSTEM (EFTPS).

---

**MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:**

NOT APPLICABLE

---

**RETURN MUST BE MAILED ON OR BEFORE:**

NOT APPLICABLE

---

**SPECIAL INSTRUCTIONS:**

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE  
REVIEWED THE RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN,  
DATE AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL TRANSMIT THE  
RETURN ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.  
RETURN FORM 8879-EO TO US BY MAY 17, 2021

PLEASE NOTE THAT THE FORM 990-PF RETURN CONTAINS EXCESS  
DISTRIBUTION CARRYOVER OF \$6,113,788. THIS MAY BE APPLIED TO TAX YEAR  
2021 AND SUBSEQUENT YEARS.

# Taxpayer Copy



Form 8879-EO

IRS e-file Signature Authorization  
for an Exempt Organization

OMB No. 1545-0047

For calendar year 2020, or fiscal year beginning \_\_\_\_\_, 2020, and ending \_\_\_\_\_, 20\_\_\_\_

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879EO for the latest information.

2020

Department of the Treasury  
Internal Revenue Service

Name of exempt organization or person subject to tax

Taxpayer identification number

OCEANFIRST FOUNDATION

22-3465454

Name and title of officer or person subject to tax

**Part I** Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) .....	1b .....
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9) .....	2b .....
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22) .....	3b .....
4a Form 990-PF check here <input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5) .....	4b 23,591.
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c) .....	5b .....
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4) .....	6b .....
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1) .....	7b .....

**Part II** Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above organization or \_\_\_\_\_ I am a person subject to tax with respect to \_\_\_\_\_ (name of organization) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize CONDON O'MEARA MCGINTY & DONNELLY LLP to enter my PIN 12345  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date

**Part III** Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

13601807777

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature CONDON O'MEARA MCGINTY & DONNELLY L James Reilly Date 5/6/2021

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2020)

Taxpayer Copy

023051 11-03-20

19580504 152490 K4H02R

2020.03041 OCEANFIRST FOUNDATION

K4H02R\_1



## Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

For calendar year 2020 or tax year beginning

, and ending

Name of foundation <b>OCEANFIRST FOUNDATION</b>		A Employer identification number <b>22-3465454</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>975 HOOPER AVENUE</b>	Room/suite	B Telephone number <b>(732) 341-4676</b>
City or town, state or province, country, and ZIP or foreign postal code <b>TOMS RIVER, NJ 08753</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$ 19,991,683.</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		310.	310.		
4 Dividends and interest from securities		776,584.	776,584.		
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		924,945.			
b Gross sales price for all assets on line 6a		1,578,281.			
7 Capital gain net income (from Part IV, line 2)			924,945.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		1,701,839.	1,701,839.		
13 Compensation of officers, directors, trustees, etc.		238,756.	0.		238,756.
14 Other employee salaries and wages		108,748.	0.		108,748.
15 Pension plans, employee benefits		63,390.	0.		63,390.
16a Legal fees					
b Accounting fees STMT 1		18,600.	4,650.		13,950.
c Other professional fees STMT 2		22,500.	0.		22,500.
17 Interest		17,364.	0.		17,364.
18 Taxes STMT 3		5,057.	0.		0.
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications		1,732.	0.		1,732.
23 Other expenses STMT 4		32,715.	0.		32,715.
24 Total operating and administrative expenses. Add lines 13 through 23		508,862.	4,650.		499,155.
25 Contributions, gifts, grants paid		2,675,251.			2,675,251.
26 Total expenses and disbursements. Add lines 24 and 25		3,184,113.	4,650.		3,174,406.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		-1,482,274.			
b Net investment income (if negative, enter -0-)			1,697,189.		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing		2,586.	2,586.
	2 Savings and temporary cash investments	195,369.	298,845.	298,845.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 5	12,566,903.	11,913,567.	19,690,252.
	c Investments - corporate bonds			
	Liabilities	11 Investments - land, buildings, and equipment: basis		
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis				
Less: accumulated depreciation				
15 Other assets (describe)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		12,762,272.	12,214,998.	19,991,683.
17 Accounts payable and accrued expenses				
18 Grants payable				
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe LINE OF CREDIT)	0.	935,000.	
23 Total liabilities (add lines 17 through 22)	0.	935,000.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> X			
	24 Net assets without donor restrictions	12,762,272.	11,279,998.	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances	12,762,272.	11,279,998.		
30 Total liabilities and net assets/fund balances	12,762,272.	12,214,998.		

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

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	12,762,272.
2 Enter amount from Part I, line 27a	2	-1,482,274.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	11,279,998.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	11,279,998.

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Form 990-PF (2020)



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

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
<b>1a PUBLICLY TRADED SECURITIES</b>					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))		
a 1,578,281.		653,336.	924,945.		
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.					
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
a			924,945.		
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)		<div> <div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div> </div>		2	924,945.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8		<div> <div> <div>If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8</div> </div> </div>		3	N/A

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income****SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE.**

1 Reserved			
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
Reserved			
Reserved			
Reserved			
Reserved			
Reserved			
Reserved			
2 Reserved			2
3 Reserved			3
4 Reserved			4
5 Reserved			5
6 Reserved			6
7 Reserved			7
8 Reserved			8

Form **990-PF** (2020)

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Reserved		1	23,591.
c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	23,591.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	23,591.
6 Credits/Payments:			
a 2020 estimated tax payments and 2019 overpayment credited to 2020	6a	15,768.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	15,768.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	7,823.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2021 estimated tax <input type="checkbox"/> Refunded <input checked="" type="checkbox"/>	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. NONE		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation SEE STATEMENT 6		X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Form 990-PF (2020)

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

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11	x
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	x
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>WWW.OCEANFIRSTFDN.ORG</b>	13	x
14 The books are in care of <b>THE FOUNDATION</b> Telephone no. <b>(732) 341-4676</b> Located at <b>975 HOOPER AVENUE, TOMS RIVER, NJ</b> ZIP+4 <b>08753</b>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <b>15</b> N/A		
16 At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country	16	x

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

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

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	x
Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020?	1c	x
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2020? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2020.)	3b	x
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	x
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b	x

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

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 7		238,756.	23,301.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LISA PETROZZELLO - 975 HOOPER AVENUE, TOMS RIVER, NJ 08753	OFFICE MANAGER	58,860.	13,680.	0.

Total number of other employees paid over \$50,000

0  
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**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*
**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

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

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

	Expenses
1 N/A	
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3

0.

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	20,176,714.
b	Average of monthly cash balances	1b	272,969.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	20,449,683.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	20,449,683.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	306,745.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	20,142,938.
6	Minimum investment return. Enter 5% of line 5	6	1,007,147.

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

1	Minimum investment return from Part X, line 6	1	1,007,147.
2a	Tax on investment income for 2020 from Part VI, line 5	2a	23,591.
b	Income tax for 2020. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	23,591.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	983,556.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	983,556.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	983,556.

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	3,174,406.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,174,406.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,174,406.

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

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

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				983,556.
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2020:				
a From 2015	1,009,796.			
b From 2016	481,154.			
c From 2017	518,196.			
d From 2018	1,420,657.			
e From 2019	1,502,931.			
f Total of lines 3a through e	4,932,734.			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$	3,174,406.			
a Applied to 2019, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2020 distributable amount				983,556.
e Remaining amount distributed out of corpus	2,190,850.			
5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	7,123,584.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7	1,009,796.			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	6,113,788.			
10 Analysis of line 9:				
a Excess from 2016	481,154.			
b Excess from 2017	518,196.			
c Excess from 2018	1,420,657.			
d Excess from 2019	1,502,931.			
e Excess from 2020	2,190,850.			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling  

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

	Prior 3 years				(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

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

NONE

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

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

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

SEE STATEMENT 9

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

c Any submission deadlines:

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
10 HAIRY LEGS PO BOX 4452 HIGHLAND PARK, NJ 08904-4452	NONE	PC	BOARD MATCHING GIFT	1,000.
180 TURNING LIVES AROUND INC. 1 BETHANY ROAD, BLDG. 3 SUITE 42 HAZLET, NJ 07730-1681	NONE	PC	ANNUAL CELEBRATION	400.
180 TURNING LIVES AROUND INC. 1 BETHANY ROAD, BLDG. 3 SUITE 42 HAZLET, NJ 07730-1681	NONE	PC	BOARD MATCHING GIFT	500.
180 TURNING LIVES AROUND INC. 1 BETHANY ROAD, BLDG. 3 SUITE 42 HAZLET, NJ 07730-1681	NONE	PC	BOARD MATCHING GIFT	1,000.
180 TURNING LIVES AROUND INC. 1 BETHANY ROAD, BLDG. 3 SUITE 42 HAZLET, NJ 07730-1681	NONE	PC	TECHNOLOGY & SHELTER OPERATING	5,000.
Total SEE CONTINUATION SHEET(S) ▶ 3a				2,675,251.
b Approved for future payment				
BARNEGAT BAY DECOY & BAYMENS MUSEUM PO BOX 339 TUCKERTON, NJ 08050	NONE	PC	THE OCEANFIRST FOUNDATION FLOATING CLASSROOM AT TUCKERTON SEAPORT	50,000.
CENTER FOR NON PROFIT CORPORATIONS 3635 QUAKERBRIDGE ROAD, SUITE 35 MERCERVILLE, NJ 08619	NONE	PC	CAPACITY BUILDING	25,000.
COMMUNITY FOUNDATION OF NEW JERSEY PO BOX 8522 ATLANTIC CITY, NJ 08401	NONE	PC	TRANSFORM SOUTH JERSEY	25,000.
Total SEE CONTINUATION SHEET(S) ▶ 3b				187,500.

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**Part XVI-A**      **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1	Program service revenue:					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	310.	
4	Dividends and interest from securities			14	776,584.	
5	Net rental income or (loss) from real estate:					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			18	924,945.	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue:					
a						
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)		0.		1,701,839.	0.
13	Total. Add line 12, columns (b), (d), and (e)				13	1,701,839.

(See worksheet in line 13 instructions to verify calculations.)

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

[illegible]

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
180 TURNING LIVES AROUND INC. 1 BETHANY ROAD, BLDG. 3 SUITE 42 HAZLET, NJ 07730-1681	NONE	PC	FULL-TIME CHILD ADVOCATE	15,000.
180 TURNING LIVES AROUND INC. 1 BETHANY ROAD, BLDG. 3 SUITE 42 HAZLET, NJ 07730-1681	NONE	PC	BOARD MATCHING GIFT	1,250.
200 CLUB PO BOX 1691 PT PLEASANT BEACH, NJ 08742-1691	NONE	PC	ACTS OF KINDNESS	250.
21 PLUS FOUNDATION, INC. 1900 ROUTE 70, SUITE 12 MANCHESTER, NJ 08759	NONE	PC	ACTS OF KINDNESS	250.
21 PLUS FOUNDATION, INC. 1900 ROUTE 70, SUITE 12 MANCHESTER, NJ 08759	NONE	PC	COMEDY FOR A CAUSE	100.
21 PLUS FOUNDATION, INC. 1900 ROUTE 70, SUITE 12 MANCHESTER, NJ 08759	NONE	PC	BOARD MATCHING GIFT	1,000.
A FAMILY OPTION ADOPTION 1602 LAWRENCE AVE STE 109 OCEAN, NJ 07712-3434	NONE	PC	ACTS OF KINDNESS	250.
<b>Total from continuation sheets</b>				2,667,351.

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
A NEED WE FEED PO BOX 461 ISLAND HEIGHTS, NJ 08732	NONE	PC	ACTS OF KINDNESS	250.
A NEED WE FEED PO BOX 461 ISLAND HEIGHTS, NJ 08732	NONE	PC	STAFF SUPPORT/DEVELOPMENT DIRECTOR	5,000.
ACENDA 42 DELSEA DRIVE SOUTH GLASSBORO, NJ 08028	NONE	PC	ART THERAPY PROGRAM	5,000.
ACENDA 42 DELSEA DRIVE SOUTH GLASSBORO, NJ 08028	NONE	PC	COMMUNITY CARE DAY	1,500.
ALBORADA SPANISH DANCE THEATRE 101 MAIN STREET WOODBRIIDGE, NJ 07095	NONE	PC	HISPANIC TAPAS DANCE	2,250.
ALGONQUIN ARTS THEATRE 60 ABE VORHEES DR MANASQUAN, NJ 08736-3510	NONE	PC	BOARD MATCHING GIFT	1,000.
ALGONQUIN ARTS THEATRE 60 ABE VORHEES DR MANASQUAN, NJ 08736-3510	NONE	PC	PAGE & STAGE/NEXT GEN: LITERATURE TO LIFE & BROADWAY BASH	3,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ALICIA ROSE VICTORIOUS FOUNDATION 2115 VOORHEES TOWN CENTER VOORHEES, NJ 08043	NONE	PC	VIRTUAL BIRTHDAY BASH GALA	1,250.
ALL SAINTS COMMUNITY CENTER 213 MADISON AVENUE LAKEWOOD, NJ 08701-3316	NONE	PC	SAMARITAN HOUSE TRANSITIONAL HOUSING	5,000.
ALLENHURST FIRE DEPARTMENT AND FIRST AID SQUAD 318 HUME ST. ALLENHURST, NJ 07711-1035	NONE	PC	ANNUAL DONATION	500.
ALLIES IN CARING, INC 100 S. SECOND ST. HAMMONTON, NJ 08037	NONE	PC	FREE TELE-COUNSELING SERVICES	5,000.
ALTERNATIVES, INC. 600 FIRST AVENUE RARITAN, NJ 08869-1346	NONE	PC	COVID-19 EMERGENCY SUPPLIES	2,500.
ALTERNATIVES, INC. 600 FIRST AVENUE RARITAN, NJ 08869-1346	NONE	PC	PURCHASE OF PPE	5,000.
ALZHEIMERS DISEASE AND RELATED DISORDERS ASSOCIATION 425 EAGLE ROCK AVE., STE. 203 ROSELAND, NJ 07068	NONE	PC	RESPIRE CARE AND WELLNESS PROGRAM	5,000.

Total from continuation sheets

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
AMERICAN CANCER SOCIETY, EASTERN DIVISION 2310 ROUTE 24, SUITE 1D MANASQUAN, NJ 07836	NONE	PC	RINGING IN THE LOCAL SUMMER VIRTUAL FUNDRAISER	1,500.
AMERICAN LITTORAL SOCIETY 18 HARTSHORNE DR HIGHLANDS, NJ 07732	NONE	PC	IMPACT 100 JERSEY COAST RUNNER-UP AWARD	2,500.
AMERICAN LITTORAL SOCIETY 18 HARTSHORNE DR HIGHLANDS, NJ 07732	NONE	PC	5TH ANNUAL LOBSTER RUN	500.
AMERICAN NATIONAL RED CROSS 1540 WEST PARK AVE. OCEAN, NJ 07712	NONE	PC	HOME RUNS FOR HEROES	2,000.
AMERICAN NATIONAL RED CROSS 1540 WEST PARK AVE. OCEAN, NJ 07712	NONE	PC	RAISING SPIRITS	1,000.
ANIMAL BIRTH CONTROL PO BOX 353 PINE BEACH, NJ 08741-0353	NONE	PC	BOARD MATCHING GIFT	500.
APPLEGARTH VOLUNTEER ENGINE COMPANY NO. 1, INC. 130 APPELGARTH RD. MONROE, NJ 08831	NONE	PC	ANNUAL DONATION	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ARMY EMERGENCY RELIEF 5428 DELAWARE AVE. FORT DIX, NJ 08640-5130	NONE	PC	HOME RUNS FOR HEROES	2,000.
ART SOCIETY OF MONMOUTH COUNTY PO BOX 722 NEW MONMOUTH, NJ 07748-0722	NONE	PC	OLDIES BUT GOODIES SHOW	500.
ARTS ED NJ ARTS ED NJ 16 MOUNT BETHEL ROAD, SUITE 202 WARREN, NJ 07059	NONE	PC	PROFESSIONAL LEARNING WORKSHOP SPONSOR	2,500.
ASBURY PARK MUSIC FOUNDATION 621 LAKE AVE. SUITE 1C ASBURY PARK, NJ 07712	NONE	PC	SUMMER CAMP GRANT	2,500.
ASBURY PARK MUSIC FOUNDATION 621 LAKE AVE. SUITE 1C ASBURY PARK, NJ 07712	NONE	PC	MUSIC SAVED MY LIFE - VOICES AFTER-SCHOOL PROGRAM	5,000.
ASLAN YOUTH MINISTRIES 257 HARDING ROAD, PO BOX 270 RED BANK, NJ 07701-0270	NONE	PC	AFTERSCHOOL TUTORING & TRAUMA INFORMED CARE PROGRAM	15,000.
ATHLETES WITH DISABILITIES PO BOX 612 MOORESTOWN, NJ 08057	NONE	PC	PURCHASE OF YOUTH SPORTS WHEELCHAIRS	1,700.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ATLANTIC CAPE COMMUNITY COLLEGE 5100 BLACK HORSE PIKE MAYS LANDING, NJ 08330-2623	NONE	PC	SCHOLARSHIP PROGRAM	50,000.
ATLANTIC CITY ARTS FOUNDATION PO BOX 3 ATLANTIC CITY, NJ 08404	NONE	PC	48 BLOCKS AC	1,000.
ATLANTIC CITY RESCUE MISSION 2009 BACHARACH BOULEVARD ATLANTIC CITY, NJ 08401	NONE	PC	MEALS, SUPPLIES & SHELTER	5,000.
ATLANTICARE FOUNDATION 2500 ENGLISH CREEK AVE., BUILDING 600 EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	COMMUNITY FOOD ASSISTANCE PROGRAM	5,000.
ATLANTICARE FOUNDATION 2500 ENGLISH CREEK AVE., BUILDING 600 EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	GOLF OUTING	3,500.
ATLANTICARE FOUNDATION 2500 ENGLISH CREEK AVE., BUILDING 600 EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	61ST ANNUAL CENTURY CLUB GALA	3,500.
AUTISM NEW JERSEY 500 HORIZON DRIVE, SUITE 530 ROBBINSVILLE, NJ 08691	NONE	PC	GOLF OUTING	1,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
AUTISM NEW JERSEY 500 HORIZON DRIVE, SUITE 530 ROBBINSVILLE, NJ 08691	NONE	PC	GOLF OUTING	1,500.
AXELROD PERFORMING ARTS CENTER INC 100 GRANT AVE. DEAL PARK, NJ 07723	NONE	PC	CONTEMPORARY BALLET THEATER PROGRAM	3,000.
BACHARACH INSTITUTE FOR REHABILITATION 61 W. JIMMIE LEEDS ROAD POMONA, NJ 08240	NONE	PC	GOLF OUTING	5,000.
BACHARACH INSTITUTE FOR REHABILITATION 61 W. JIMMIE LEEDS ROAD POMONA, NJ 08240	NONE	PC	ANNUAL ABILITY FAIR	1,000.
BACHARACH INSTITUTE FOR REHABILITATION 61 W. JIMMIE LEEDS ROAD POMONA, NJ 08240	NONE	PC	GALA	5,000.
BANCROFT NEUROHEALTH 1255 CALDWELL ROAD CHERRY HILL, NJ 08034	NONE	PC	COVID-19 EMERGENCY FUND	2,500.
BARN STUDIO OF ART 814 WHITAKER AVENUE MILLVILLE, NJ 08332	NONE	PC	COMMUNITY OUTREACH	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BARNEGAT BAY DECOY & BAYMEN'S MUSEUM, INC. 120 WEST MAIN STREET TUCKERTON, NJ 08087	NONE	PC	SUMMER CAMP GRANT	2,500.
BARNEGAT BAY DECOY & BAYMEN'S MUSEUM, INC. 120 WEST MAIN STREET TUCKERTON, NJ 08087	NONE	PC	THE FLOATING CLASSROOM	50,000.
BARNEGAT BAY DECOY & BAYMEN'S MUSEUM, INC. 120 WEST MAIN STREET TUCKERTON, NJ 08087	NONE	PC	HAUNTED SEAPORT	2,500.
BAY ATLANTIC SYMPHONY 1616 PACIFIC AVE, SUITE 308 ATLANTIC CITY, NJ 08401	NONE	PC	HOW MUSIC TALKS PROGRAM	1,500.
BAYVILLE FIRST AID SQUAD 660 ROUTE 9, PO BOX 374 BAYVILLE, NJ 08721	NONE	PC	ANNUAL DONATION	500.
BEACHWOOD VOLUNTEER FIRE COMPANY NO. 1 745 BEACHWOOD BLVD. BEACHWOOD, NJ 08722-2507	NONE	PC	ANNUAL DONATION	500.
BELMAR ARTS COUNCIL INC. 608 RIVER ROAD BELMAR, NJ 07719	NONE	PC	YOUTH OUTREACH PROGRAM	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BERKELEY EMERGENCY RESPONSE TEAM PO BOX 194 BAYVILLE, NJ 08721	NONE	PC	ANNUAL DONATION	500.
BIG BROTHERS BIG SISTERS OF ATLANTIC & CAPE MAY COUNTIES 450 TILTON RD., SUITE 214 NORTHFIELD, NJ 08225	NONE	PC	SPORTS BUDDIES YOUTH MENTORING INITIATIVE	5,000.
BIG BROTHERS BIG SISTERS OF COASTAL & NORTHERN NEW JERSEY 305 BOND STREET, 2ND FLOOR ASBURY PARK, NJ 07712	NONE	PC	GOLF OUTING	200.
BIG BROTHERS BIG SISTERS OF COASTAL & NORTHERN NEW JERSEY 305 BOND STREET, 2ND FLOOR ASBURY PARK, NJ 07712	NONE	PC	ONE-TO-ONE YOUTH MENTORING	5,000.
BIG BROTHERS BIG SISTERS OF CUMBERLAND & SALEM COUNTIES INC 1944 EAST LANDIS AVENUE, PO BOX 2188 VINELAND, NJ 08362-2188	NONE	PC	EMPLOYEE MATCHING GIFT	150.
BIG BROTHERS BIG SISTERS OF CUMBERLAND & SALEM COUNTIES INC 1944 EAST LANDIS AVENUE, PO BOX 2188 VINELAND, NJ 08362-2188	NONE	PC	BIG SPLASH PROGRAM	1,000.
BIG BROTHERS BIG SISTERS OF CUMBERLAND & SALEM COUNTIES INC 1944 EAST LANDIS AVENUE, PO BOX 2188 VINELAND, NJ 08362-2188	NONE	PC	ADULT SCHOOL BASED MENTORING PROGRAM	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BOY SCOUTS OF AMERICA, JERSEY SHORE COUNCIL 1518 RIDGEWAY ROAD TOMS RIVER, NJ 08755	NONE	PC	SUMMER CAMP GRANT	2,500.
BOY SCOUTS OF AMERICA, MONMOUTH COUNCIL 705 GINESI DRIVE MORGANVILLE, NJ 07751	NONE	PC	GOLF OUTING	1,000.
BOY SCOUTS OF AMERICA, MONMOUTH COUNCIL 705 GINESI DRIVE MORGANVILLE, NJ 07751	NONE	PC	JOSHUA HUDDY GALA	5,000.
BOY SCOUTS OF AMERICA, MONMOUTH COUNCIL 705 GINESI DRIVE MORGANVILLE, NJ 07751	NONE	PC	SUMMER CAMP GRANT	2,500.
BOY SCOUTS OF AMERICA, MONMOUTH COUNCIL 705 GINESI DRIVE MORGANVILLE, NJ 07751	NONE	PC	BOARD MATCHING GIFT	500.
BOY SCOUTS OF AMERICA, MONMOUTH COUNCIL 705 GINESI DRIVE MORGANVILLE, NJ 07751	NONE	PC	MOBILE RECRUITMENT & STEAM PROGRAM	5,000.
BOYS & GIRLS CLUB OF ATLANTIC CITY 215 N. SOVEREIGN AVE. ATLANTIC CITY, NJ 08401	NONE	PC	THE ACCC BRIDGE PROGRAM	15,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BOYS & GIRLS CLUB OF ATLANTIC CITY 215 N. SOVEREIGN AVE. ATLANTIC CITY, NJ 08401	NONE	PC	GOLF OUTING	500.
BOYS & GIRLS CLUB OF ATLANTIC CITY 215 N. SOVEREIGN AVE. ATLANTIC CITY, NJ 08401	NONE	PC	SUMMER CAMP GRANT	5,000.
BOYS & GIRLS CLUB OF GLOUCESTER COUNTY INC 123HIGH STREET E GLASSBORO, NJ 08028	NONE	PC	INCREASE CAPACITY TO DELIVER VIRTUAL PROGRAMMING	15,000.
BOYS & GIRLS CLUBS OF CUMBERLAND COUNTY 560 CRYSTAL AVE. VINELAND, NJ 08360	NONE	PC	POWER HOUR/PROJECT LEARN	15,000.
BOYS & GIRLS CLUBS OF MONMOUTH COUNTY 1201 MONROE AVENUE ASBURY PARK, NJ 07712	NONE	PC	MOST UNUSUAL EVENING	250.
BOYS & GIRLS CLUBS OF MONMOUTH COUNTY 1201 MONROE AVENUE ASBURY PARK, NJ 07712	NONE	PC	SUMMER CAMP GRANT	5,000.
BRAIN INJURY ALLIANCE OF NEW JERSEY 825 GEORGES ROAD, 2ND FL NORTH BRUNSWICK, NJ 08902	NONE	PC	ANNUAL 5K RUN/WALK/ROLL	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BRICK CHILDREN'S COMMUNITY THEATRE 270 CHAMBERS BRIDGE ROAD BRICK, NJ 08723	NONE	PC	YOUTH THEATER	3,000.
BRICK MORNING ROTARY PO BOX 213 BRICK, NJ 08723-0213	NONE	PC	COVID - MEALS FOR HEALTH WORKERS	500.
BRIELLE FIRE CO. NO. 1 509 LONGSTREET AVE BRIELLE, NJ 08730	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
BROOKDALE COMMUNITY COLLEGE FOUNDATION 765 NEWMAN SPRINGS RD LINCROFT, NJ 07738-1543	NONE	PC	SCHOLARSHIP PROGRAM	50,000.
BRUCKNER CHASE OCEAN POSITIVE 1131 SIMPSON AVENUE, 2ND FLOOR OCEAN CITY, NJ 08226	NONE	PC	BLUE JOURNEY UNIFIED INCLUSIVE PADDLEBOARDING	4,875.
CAPE HOPE PO BOX 1061 NORTH CAPE MAY, NJ 08204	NONE	PC	EMERGENCY HOUSING PROGRAM	5,000.
CAPE MAY COUNTY 4-H FOUNDATION INC 335 COURT HOUSE-SOUTH DENNIS ROAD CAPE MAY COURT HOUSE, NJ 08210	NONE	PC	4H FAIR	1,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CAPE MAY COUNTY 4-H FOUNDATION INC 335 COURT HOUSE-SOUTH DENNIS ROAD CAPE MAY COURT HOUSE, NJ 08210	NONE	PC	4-H FAIR & PROGRAM SUPPORT	5,000.
CAPE MAY COUNTY COAST GUARD COMMUNITY FOUNDATION PO BOX 1365 RIO GRANDE, NJ 08242	NONE	PC	HOME RUNS FOR HEROES	2,000.
CAPE MAY COUNTY COAST GUARD COMMUNITY FOUNDATION PO BOX 1365 RIO GRANDE, NJ 08242	NONE	PC	CAPE MAY COUNTY COAST GUARD COMMUNITY WEEK	1,000.
CAPE MAY MAC 1048 WASHINGTON ST. CAPE MAY, NJ 08204	NONE	PC	CAPE MAY MUSIC FESTIVAL	1,500.
CAPE MAY STAGE INC 31 PERRY STREET CAPE MAY, NJ 08204	NONE	PC	SHOWBILL AD	800.
CAPE REGIONAL MEDICAL CENTER TWO STONE HARBOR BLVD. CAPE MAY COURT HOUSE, NJ 08210	NONE	PC	GOLF OUTING	1,000.
CAPE REGIONAL MEDICAL CENTER TWO STONE HARBOR BLVD. CAPE MAY COURT HOUSE, NJ 08210	NONE	PC	HOME AND HEALTH SHOW	2,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CAPE SHORE CHORALE P.O. BOX 74 MARMORA, NJ 08223	NONE	PC	MUSIC FOR PEACE AND COMFORT	1,000.
CAPE VOLUNTEERS IN MEDICINE 423 ROUTE 9 N CAPE MAY COURT HOUSE, NJ 08210	NONE	PC	CLOSING GAPS PROGRAM	5,000.
CAREGIVER VOLUNTEERS OF CENTRAL JERSEY 67 ROUTE 37 W RIVERWOOD PLAZA 2, SUITE 201 TOMS RIVER, NJ 08755	NONE	PC	SUPPORTS FOR HOMEBOUND SENIORS	5,000.
CATHOLIC CHARITIES - DIOCESE OF TRENTON 200 MONMOUTH AVE. LAKEWOOD, NJ 08701	NONE	PC	THE CARING CUPBOARD	20,000.
CATHOLIC CHARITIES - DIOCESE OF TRENTON 200 MONMOUTH AVE. LAKEWOOD, NJ 08701	NONE	PC	HOME RUNS FOR HEROES	2,000.
CATHOLIC CHARITIES - DIOCESE OF TRENTON 200 MONMOUTH AVE. LAKEWOOD, NJ 08701	NONE	PC	PROVIDENCE HOUSE GIFT AUCTION	1,500.
CATHOLIC CHARITIES - DIOCESE OF TRENTON 200 MONMOUTH AVE. LAKEWOOD, NJ 08701	NONE	PC	EMERGENCY HOUSING ASSISTANCE	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CCEF/ROWAN COLLEGE SOUTH JERSEY PO BOX 1500 VINELAND, NJ 08362-1500	NONE	PC	SCHOLARSHIP PROGRAM	50,000.
CENTER FOR FAMILY SERVICES, INC. ONE ALPHA AVE. VOORHEES, NJ 08043	NONE	PC	ACTS OF KINDNESS	250.
CENTER FOR FAMILY SERVICES, INC. ONE ALPHA AVE. VOORHEES, NJ 08043	NONE	PC	TOGETHER WE CHANGE LIVES	20,000.
CENTER FOR HOLOCAUST, HUMAN RIGHTS & GENOCIDE EDUCATION 765 NEWMAN SPRINGS ROAD LINCROFT, NJ 07738	NONE	PC	ANNUAL COLLOQUIUM	2,500.
CENTER FOR HOLOCAUST, HUMAN RIGHTS & GENOCIDE EDUCATION 765 NEWMAN SPRINGS ROAD LINCROFT, NJ 07738	NONE	PC	VIRTUAL GALA & TRIBUTE JOURNAL	1,000.
CENTER FOR HOLOCAUST, HUMAN RIGHTS & GENOCIDE EDUCATION 765 NEWMAN SPRINGS ROAD LINCROFT, NJ 07738	NONE	PC	STUDENT LEADERSHIP SUMMIT	5,000.
CENTER FOR NON PROFIT CORPORATIONS 3635 QUAKERBRIDGE ROAD, SUITE 35 MERCERVILLE, NJ 08619	NONE	PC	CAPACITY BUILDING	25,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CENTRAL MOPS LINWOOD 5 MARVIN AVE LINWOOD, NJ 08221-2006	NONE	PC	PARENTING SUPPORT GROUP	1,500.
CENTRASTATE HEALTHCARE FOUNDATION 225 WILLOW BROOK ROAD FREEHOLD, NJ 07728	NONE	PC	CELEBRATION BALL	7,500.
CENTRASTATE HEALTHCARE FOUNDATION 225 WILLOW BROOK ROAD FREEHOLD, NJ 07728	NONE	PC	GOLF OUTING	4,000.
CENTRASTATE HEALTHCARE FOUNDATION 225 WILLOW BROOK ROAD FREEHOLD, NJ 07728	NONE	PC	11TH ANNUAL PAULETTE'S C OF BLUE	1,000.
CENTRASTATE HEALTHCARE FOUNDATION 225 WILLOW BROOK ROAD FREEHOLD, NJ 07728	NONE	PC	MS BENEFIT CHALLENGE	500.
CENTRASTATE HEALTHCARE FOUNDATION 225 WILLOW BROOK ROAD FREEHOLD, NJ 07728	NONE	PC	58TH ANNUAL CELEBRATION BALL	7,500.
CENTRASTATE HEALTHCARE FOUNDATION 225 WILLOW BROOK ROAD FREEHOLD, NJ 07728	NONE	PC	PAULETTE'S C OF BLUE RUN	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CENTRASTATE HEALTHCARE FOUNDATION 225 WILLOW BROOK ROAD FREEHOLD, NJ 07728	NONE	PC	BEHAVIORAL HEALTH SUPPORT FOR PHYSICIANS	5,000.
CFC LOUD N CLEAR FOUNDATION 260 CASINO DRIVE FARMINGDALE, NJ 07727	NONE	PC	ACTS OF KINDNESS	250.
CFC LOUD N CLEAR FOUNDATION 260 CASINO DRIVE FARMINGDALE, NJ 07727	NONE	PC	ROCK THE FARM	1,500.
CHALLENGED YOUTH SPORTS INC DBA RALLYCAP SPORTS 40 BEACON BLVD. SEA GIRT, NJ 08750	NONE	PC	ADAPTIVE RECREATIONAL SPORTS PROGRAM	3,000.
CHARIOT RIDERS INC. 3170 CHARIOT COURT MANCHESTER, NJ 08759	NONE	PC	SUMMER CAMP GRANT	2,500.
CHILDREN'S HOME SOCIETY OF NEW JERSEY 635 SOUTH CLINTON AVENUE TRENTON, NJ 08611	NONE	PC	OCEAN REUNIFICATION PROGRAM, COVID CRISIS ASSISTANCE	15,000.
CHILDREN'S HOSPITAL OF PHILADELPHIA PO BOX 781352 PHILADELPHIA, PA 19178	NONE	PC	BOARD MATCHING GIFT	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CHILDREN'S SPECIALIZED HOSPITAL FOUNDATION 150 NEW PROVIDENCE ROAD MOUNTAINSIDE, NJ 07092	NONE	PC	GOLF OUTING	12,000.
CHILDREN'S SPECIALIZED HOSPITAL FOUNDATION 150 NEW PROVIDENCE ROAD MOUNTAINSIDE, NJ 07092	NONE	PC	HALLOWEEN SPONSOR	2,000.
CHILDREN'S SPECIALIZED HOSPITAL FOUNDATION 150 NEW PROVIDENCE ROAD MOUNTAINSIDE, NJ 07092	NONE	PC	14TH ANNUAL WALK N' ROLL	2,500.
CHRISTIAN BROTHERS ACADEMY 850 NEWMAN SPRINGS ROAD LINCROFT, NJ 07738	NONE	PC	BOARD MATCHING GIFT	5,000.
CLEAN OCEAN ACTION 49 AVENEL BOULEVARD LONG BRANCH, NJ 07740	NONE	PC	SPRING STUDENT SUMMIT	5,000.
CLEAN OCEAN ACTION 49 AVENEL BOULEVARD LONG BRANCH, NJ 07740	NONE	PC	THE OCEAN IS CALLING ... A VIRTUAL CELEBRATION	3,500.
CLEAN OCEAN ACTION 49 AVENEL BOULEVARD LONG BRANCH, NJ 07740	NONE	PC	BEACH SWEEPS - SPRING/FALL	3,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CLINTON HILL COMMUNITY ACTION 625 BROAD ST STE 240 NEWARK, NJ 07102-4417	NONE	PC	BOARD MATCHING GIFT	1,000.
COASTAL HABITAT FOR HUMANITY 1105 MEMORIAL DRIVE ASBURY PARK, NJ 07712	NONE	PC	ANNUAL DONATION	5,000.
COASTAL VOLUNTEERS IN MEDICINE 730 LACEY ROAD FORKED RIVER, NJ 08731	NONE	PC	ACTS OF KINDNESS	250.
COASTAL VOLUNTEERS IN MEDICINE 730 LACEY ROAD FORKED RIVER, NJ 08731	NONE	PC	PPE/DIABETES MANAGEMENT/OPERATING SUPPORT	20,000.
COASTAL VOLUNTEERS IN MEDICINE 730 LACEY ROAD FORKED RIVER, NJ 08731	NONE	PC	EMPLOYEE MATCHING GIFT	250.
COLLIER SERVICES, INC. 160 CONOVER RD WICKATUNK, NJ 07765-0000	NONE	PC	ACTS OF KINDNESS	250.
COLTS NECK FIRST AID SQUAD P.O. BOX 21 COLTS NECK, NJ 07722	NONE	PC	ANNUAL DONATION	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
COMMON GROUND GRIEF CENTER 67 TAYLOR AVE. MANASQUAN, NJ 08736	NONE	PC	CHEFS EXTRAORDINAIRE	1,000.
COMMON GROUND GRIEF CENTER 67 TAYLOR AVE. MANASQUAN, NJ 08736	NONE	PC	CHEFS EXTRAORDINAIRE	500.
COMMUNITY FOOD BANK OF NEW JERSEY INC 31 EVANS TERMINAL HILLSIDE, NJ 07205	NONE	PC	BOARD MATCHING GIFT	1,050.
COMMUNITY FOOD BANK OF NEW JERSEY INC 31 EVANS TERMINAL HILLSIDE, NJ 07205	NONE	PC	COVID-19 FOOD BANK SUPPORT GRANT	25,000.
COMMUNITY FOUNDATION OF NEW JERSEY (IMPACT 100 & CFSJ) PO BOX 8522 ATLANTIC CITY, NJ 08401	NONE	PC	BOARD MATCHING GIFT	500.
COMMUNITY FOUNDATION OF NEW JERSEY (IMPACT 100 & CFSJ) PO BOX 8522 ATLANTIC CITY, NJ 08401	NONE	PC	TRANSFORM SOUTH JERSEY	25,000.
COMMUNITY MEDICAL CENTER FOUNDATION 99 HIGHWAY 37 WEST TOMS RIVER, NJ 08755	NONE	PC	ANNUAL WINE TASTING	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
COMMUNITY MEDICAL CENTER FOUNDATION 99 HIGHWAY 37 WEST TOMS RIVER, NJ 08755	NONE	PC	WINTER BALL	7,500.
COMMUNITY MEDICAL CENTER FOUNDATION 99 HIGHWAY 37 WEST TOMS RIVER, NJ 08755	NONE	PC	COVID-19 RAPID RESPONSE - PURCHASE OF PPE	5,000.
COMMUNITY MEDICAL CENTER FOUNDATION 99 HIGHWAY 37 WEST TOMS RIVER, NJ 08755	NONE	PC	RED, WHITE AND BREW WINE TASTING EVENT	5,500.
COMMUNITY MEDICAL CENTER FOUNDATION 99 HIGHWAY 37 WEST TOMS RIVER, NJ 08755	NONE	PC	EMPLOYEE MATCHING GIFT	250.
COMMUNITY MEDICAL CENTER FOUNDATION 99 HIGHWAY 37 WEST TOMS RIVER, NJ 08755	NONE	PC	GOLF OUTING	5,000.
COMMUNITY MEDICAL CENTER FOUNDATION 99 HIGHWAY 37 WEST TOMS RIVER, NJ 08755	NONE	PC	WINTER HOLIDAY BALL	7,500.
COMMUNITY OPTIONS INC. 16 FARBER RD. PRINCETON, NJ 08540	NONE	PC	PERSONAL PROTECTION EQUIPMENT AND CLEANING SUPPLIES	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
COMMUNITY OPTIONS INC. 16 FARBER RD. PRINCETON, NJ 08540	NONE	PC	CUPID'S CHASE 5K	1,500.
COMMUNITY SERVICES INC. OF OCEAN COUNTY PO BOX 610 MANAHAWKIN, NJ 08050-0610	NONE	PC	BOARD MATCHING GIFT	1,000.
COMMUNITY SERVICES INC. OF OCEAN COUNTY PO BOX 610 MANAHAWKIN, NJ 08050-0610	NONE	PC	PURCHASE MEAL DELIVERY VEHICLE	5,000.
COMPLETECARE HEALTH NETWORK 53 S.LAUREL ST. BRIDGETON, NJ 08302	NONE	PC	SUMMER CAMP GRANT	5,000.
CONSERVE WILDLIFE FOUNDATION OF NEW JERSEY P.O. BOX 420, MAIL CODE 501-03E TRENTON, NJ 08625	NONE	PC	NORTHERN DIAMONDBACK TERRAPIN SURVIVAL PROGRAM	5,000.
CONTACT CAPE-ATLANTIC INC 25 DOLPHIN AVE., BUILDING D NORTHFIELD, NJ 08225	NONE	PC	GATEKEEPER PROGRAM	2,500.
CONTACT CAPE-ATLANTIC INC 25 DOLPHIN AVE., BUILDING D NORTHFIELD, NJ 08225	NONE	PC	HEALTH AND WELLNESS SYMPOSIUM	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CONTACT CAPE-ATLANTIC INC 25 DOLPHIN AVE., BUILDING D NORTHFIELD, NJ 08225	NONE	PC	ACTS OF KINDNESS	250.
CONTACT OF OCEAN & MONMOUTH COUNTIES PO BOX 1121 TOMS RIVER, NJ 08754	NONE	PC	TECHNOLOGY/EQUIPMENT PURCHASE	5,000.
CORINTHIAN YACHT CLUB OF CAPE MAY SAILING FOUNDATION PO BOX 260 CAPE MAY, NJ 08204	NONE	PC	JUNIOR SAILING SCHOLARSHIPS FOR COAST GUARD CHILDREN	2,000.
COUNCIL OF NEW JERSEY GRANTMAKERS 101 W STATE ST TRENTON, NJ 08608-1101	NONE	PC	MEMBERSHIP DUES	5,095.
COUNT BASIE CENTER FOR THE ARTS 99 MONMOUTH ST. RED BANK, NJ 07701-1108	NONE	PC	BOARD MATCHING GIFT	1,000.
COUNT BASIE CENTER FOR THE ARTS 99 MONMOUTH ST. RED BANK, NJ 07701-1108	NONE	PC	BOARD MATCHING GIFT	500.
COUNT BASIE CENTER FOR THE ARTS 99 MONMOUTH ST. RED BANK, NJ 07701-1108	NONE	PC	SHOWTIME AD	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
COURT APPOINTED SPECIAL ADVOCATES OF ATLANTIC & CAPE MAY COUNTIES INC 321 SHORE ROAD SOMERS POINT, NJ 08244	NONE	PC	GO BLUE FOR CASA	1,000.
COURT APPOINTED SPECIAL ADVOCATES OF CAMDEN COUNTY 520 MARKET STREET, SUITE 401 CAMDEN, NJ 08102	NONE	PC	JASON BISHOP SHOW	1,500.
COURT APPOINTED SPECIAL ADVOCATES OF MONMOUTH COUNTY INC 400 STATE RTE. 34 COLTS NECK, NJ 07722	NONE	PC	CASA VOLUNTEER TRAINING	2,500.
COURT APPOINTED SPECIAL ADVOCATES OF MONMOUTH COUNTY INC 400 STATE RTE. 34 COLTS NECK, NJ 07722	NONE	PC	WINE AND MARTINI TASTING	500.
COURT APPOINTED SPECIAL ADVOCATES OF OCEAN COUNTY 1035 HOOPER AVENUE, STE 3 TOMS RIVER, NJ 08753	NONE	PC	50 ADVOCATES FOR 50 CHILDREN IN FOSTER CARE INITIATIVE	5,000.
COURT APPOINTED SPECIAL ADVOCATES OF OCEAN COUNTY 1035 HOOPER AVENUE, STE 3 TOMS RIVER, NJ 08753	NONE	PC	DINING FOR A CAUSE	500.
COVENANT HOUSE NEW JERSEY INC 929 ATLANTIC AVENUE ATLANTIC CITY, NJ 08401	NONE	PC	ACTS OF KINDNESS	250.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CPC FOUNDATION 10 INDUSTRIAL WAY EAST, SUITE 108 EATONTOWN, NJ 07724-3332	NONE	PC	TECHNOLOGY FOR DISTANT LEARNING & TELE-HEALTH	5,000.
CR FOUNDATION 509 FOREST HILLS PARKWAY BAYVILLE, NJ 08721	NONE	PC	TEACHER OF THE YEAR RECOGNITION	5,000.
CROHNS & COLITIS FOUNDATION - NJ CHAPTER 45 WILSON AVENUE MANALAPAN, NJ 07726	NONE	PC	JERSEY SHORE TAKE STEPS WALK	400.
CROHNS & COLITIS FOUNDATION - NJ CHAPTER 45 WILSON AVENUE MANALAPAN, NJ 07726	NONE	PC	SUMMER CAMP GRANT	2,500.
CUMBERLAND CAPE ATLANTIC YMCA 1159 E. LANDIS AVENUE VINELAND, NJ 08360	NONE	PC	CHILDCARE ASSISTANCE FOR ESSENTIAL WORKERS	5,000.
CUMBERLAND COUNTY HABITAT FOR HUMANITY INC. PO BOX 189 VINELAND, NJ 08362-0189	NONE	PC	ANNUAL DONATION	5,000.
DEAL FIRST AID SQUAD INC 110 BRIGHTON AVE DEAL, NJ 07723	NONE	PC	ANNUAL DONATION	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DEBORAH HOSPITAL FOUNDATION FOR DEBORAH HEART AND LUNG CENTER 212 TRENTON ROAD BROWNS MILLS, NJ 08015	NONE	PC	RED TIE GALA	50,000.
DEBORAH HOSPITAL FOUNDATION FOR DEBORAH HEART AND LUNG CENTER 212 TRENTON ROAD BROWNS MILLS, NJ 08015	NONE	PC	HOME RUNS FOR HEROES	2,000.
DESTINY BRIDGE PO BOX 692 LAKEWOOD, NJ 08701	NONE	PC	EMPLOYEE MATCHING GIFT	250.
DH PERFIL LATINO TV INC 422 DEBBIE LN. MILLVILLE, NJ 08332	NONE	PC	VISIONYES SELF-EFFICACY PROJECT	5,000.
EAGLE THEATRE INC 208 VINE STREET HAMMONTON, NJ 08037	NONE	PC	MAINSTAGE PRODUCTIONS	5,000.
EAGLE THEATRE INC 208 VINE STREET HAMMONTON, NJ 08037	NONE	PC	SUMMER CAMP GRANT	2,500.
EARTH ANGELS FOR DEMENTIA 6 DANIELLE CT MAYS LANDING, NJ 08330-1404	NONE	PC	ACTS OF KINDNESS	250.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
EAST DOVER FIRST AID SQUAD PO BOX 1171 TOMS RIVER, NJ 08754	NONE	PC	ANNUAL DONATION	500.
EAST LYNNE THEATER COMPANY 121 FOURTH AVE. WEST CAPE MAY, NJ 08204	NONE	PC	MAINSTAGE PRODUCTION	750.
EGG HARBOR TOWNSHIP POLICE ATHLETIC LEAGUE 2590 RIDGE AVENUE EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	BUDDY'S ADVENTURE ZONE STEM/SUMMER CAMP BUILDING	15,000.
EGG HARBOR TOWNSHIP POLICE ATHLETIC LEAGUE 2590 RIDGE AVENUE EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	EMPLOYEE MATCHING GIFT	111.
EGG HARBOR TOWNSHIP POLICE ATHLETIC LEAGUE 2590 RIDGE AVENUE EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	3D PRINTING OF FACE SHIELDS FOR EMERGENCY WORKERS	2,500.
EGG HARBOR TOWNSHIP POLICE ATHLETIC LEAGUE 2590 RIDGE AVENUE EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	FIRST TECH CHALLENGE TEAM SUPPORT	5,000.
EGG HARBOR TOWNSHIP POLICE ATHLETIC LEAGUE 2590 RIDGE AVENUE EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	10TH ANNUAL SHOP WITH A COP	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
EGG HARBOR TOWNSHIP POLICE ATHLETIC LEAGUE 2590 RIDGE AVENUE EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	SUMMER CAMP GRANT	5,000.
EMMANUEL CANCER FOUNDATION 67 WALNUT AVE STE 107 CLARK, NJ 07066-1640	NONE	PC	ACTS OF KINDNESS	250.
FAF COALITION 49 DELAWARE ST WOODBURY, NJ 08096	NONE	PC	FAF LOT 323 SEASON	1,500.
FAMILY & CHILDRENS SERVICE INC OF MONMOUTH COUNTY 191 BATH AVENUE LONG BRANCH, NJ 07740	NONE	PC	TELEFRIENDS PROGRAM	1,500.
FAMILY FOOD RELIEF OF NJ 212 2ND STREET, SUITE 403 LAKEWOOD, NJ 08701	NONE	PC	COVID-19 FOOD BANK SUPPORT GRANT	25,000.
FAMILY PROMISE OF CAPE MAY COUNTY INC 505 TOWNBANK ROAD NORTH CAPE MAY, NJ 08204	NONE	PC	EMERGENCY SHELTER FOR FAMILIES EXPERIENCING HOMELESSNESS	5,000.
FAMILY PROMISE OF SOUTHERN OCEAN COUNTY INC. PO BOX 83 WEST CREEK, NJ 08092-3134	NONE	PC	EMERGENCY SHELTER PROGRAM	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FAMILY PROMISE OF SOUTHERN OCEAN COUNTY INC. PO BOX 83 WEST CREEK, NJ 08092-3134	NONE	PC	BOARD MATCHING GIFT	1,000.
FAMILY RESOURCE ASSOCIATES 210 NEWMAN SPRINGS ROAD EAST RED BANK, NJ 07701	NONE	PC	GOLF OUTING	300.
FOOD BANK OF SOUTH JERSEY INC 1501 JOHN TIPTON BLVD. PENNSAUKEN, NJ 08110	NONE	PC	ACTS OF KINDNESS	250.
FOOD BANK OF SOUTH JERSEY INC 1501 JOHN TIPTON BLVD. PENNSAUKEN, NJ 08110	NONE	PC	COVID-19 FOOD BANK SUPPORT GRANT	25,000.
FOSTER AND ADOPTIVE FAMILY SERVICES 101 COLLEGE ROAD EAST, 3RD FLOOR PRINCETON, NJ 08540	NONE	PC	SUMMER CAMP GRANT	3,750.
FRANCES FOUNDATION FOR KIDS FIGHTING CANCER, INC. 8 BRYCE ROAD HOLMDEL, NJ 07733	NONE	PC	VIRTUAL GALA	500.
FRIENDS OF ORTLEY BEACH PO BOX 278 LAVALLETTE, NJ 08735	NONE	PC	SPEAKER SERIES PROGRAM SUPPORT	1,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FRIENDS OF THE OCEAN CITY POPS, INC. P.O. 931 OCEAN CITY, NJ 08226	NONE	PC	STUDENT OUTREACH PROGRAMS	3,500.
FULFILL 3300 ROUTE 66 NEPTUNE, NJ 07753-2706	NONE	PC	COVID-19 FOOD BANK SUPPORT GRANT	25,000.
FULFILL 3300 ROUTE 66 NEPTUNE, NJ 07753-2706	NONE	PC	ESTABLISHMENT OF THE BEAT CENTER	100,000.
FULFILL 3300 ROUTE 66 NEPTUNE, NJ 07753-2706	NONE	PC	BOARD MATCHING GIFT	2,500.
FULFILL 3300 ROUTE 66 NEPTUNE, NJ 07753-2706	NONE	PC	HUMANITARIAN GALA	2,500.
FULFILL 3300 ROUTE 66 NEPTUNE, NJ 07753-2706	NONE	PC	BOARD MATCHING GIFT	500.
FULFILL 3300 ROUTE 66 NEPTUNE, NJ 07753-2706	NONE	PC	BOARD MATCHING GIFT	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GARDEN STATE FILM FESTIVAL 711 BOSTON BLVD SEA GIRT, NJ 08750	NONE	PC	19TH ANNUAL GARDEN STATE FILM FESTIVAL	850.
GARDEN STATE PHILHARMONIC SYMPHONY SOCIETY 1 COLLEGE DR. TOMS RIVER, NJ 08753	NONE	PC	YOUTH CONCERT PERFORMANCES	5,000.
GARDEN STATE PHILHARMONIC SYMPHONY SOCIETY 1 COLLEGE DR. TOMS RIVER, NJ 08753	NONE	PC	UNA BELLA NOTTE (CANTINA AND CRESCENDO)	1,000.
GARDEN STATE PHILHARMONIC SYMPHONY SOCIETY 1 COLLEGE DR. TOMS RIVER, NJ 08753	NONE	PC	BOARD MATCHING GIFT	1,000.
GARDEN STATE PHILHARMONIC SYMPHONY SOCIETY 1 COLLEGE DR. TOMS RIVER, NJ 08753	NONE	PC	SYMPHONIC YOUTH ORCHESTRA	5,000.
GEORGIAN COURT UNIVERSITY 900 LAKEWOOD AVENUE LAKEWOOD, NJ 08701	NONE	PC	GOLF OUTING	3,500.
GEORGIAN COURT UNIVERSITY 900 LAKEWOOD AVENUE LAKEWOOD, NJ 08701	NONE	PC	BOARD MATCHING GIFT	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GEORGIAN COURT UNIVERSITY 900 LAKEWOOD AVENUE LAKEWOOD, NJ 08701	NONE	PC	SCHOLARSHIP PROGRAM	50,000.
GI GO FUND INC 1 GATEWAY CENTER, SUITE 120 NEWARK, NJ 07102	NONE	PC	HOME RUNS FOR HEROES	2,000.
GILDA'S CLUB SOUTH JERSEY 700 NEW ROAD LINWOOD, NJ 08221	NONE	PC	CANCER SUPPORT PROGRAMS	5,000.
GILDA'S CLUB SOUTH JERSEY 700 NEW ROAD LINWOOD, NJ 08221	NONE	PC	GOLF OUTING	500.
GIRL SCOUTS OF CENTRAL AND SOUTHERN NEW JERSEY 40 BRACE RD CHERRY HILL, NJ 08034-2621	NONE	PC	GIRL SCOUT LEADERSHIP EXPERIENCE	5,000.
GIRL SCOUTS OF CENTRAL AND SOUTHERN NEW JERSEY 40 BRACE RD CHERRY HILL, NJ 08034-2621	NONE	PC	SUMMER CAMP GRANT	2,500.
GIRL SCOUTS OF THE JERSEY SHORE 242 ADELPHIA RD. FARMINGDALE, NJ 07727-3525	NONE	PC	PHENOMENAL WOMEN UNDER 40	1,250.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GIRL SCOUTS OF THE JERSEY SHORE 242 ADELPHIA RD. FARMINGDALE, NJ 07727-3525	NONE	PC	ACTS OF KINDNESS	250.
GIRL SCOUTS OF THE JERSEY SHORE 242 ADELPHIA RD. FARMINGDALE, NJ 07727-3525	NONE	PC	WOMEN OF DISTINCTION GALA	1,000.
GIRL SCOUTS OF THE JERSEY SHORE 242 ADELPHIA RD. FARMINGDALE, NJ 07727-3525	NONE	PC	TECHNOLOGY PURCHASE	5,000.
GIRL SCOUTS OF THE JERSEY SHORE 242 ADELPHIA RD. FARMINGDALE, NJ 07727-3525	NONE	PC	SUMMER CAMP GRANT	2,500.
GIRL SCOUTS OF THE JERSEY SHORE 242 ADELPHIA RD. FARMINGDALE, NJ 07727-3525	NONE	PC	BOARD MATCHING GIFT	1,000.
GIRL SCOUTS OF THE JERSEY SHORE 242 ADELPHIA RD. FARMINGDALE, NJ 07727-3525	NONE	PC	GOLF OUTING	3,500.
GLOUCESTER COUNTY HABITAT FOR HUMANITY 425 S. BROADWAY PITMAN, NJ 08071	NONE	PC	ANNUAL DONATION	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GORDONS CORNER FIRE CO 683 TENNENT ROAD MANALAPAN, NJ 07726	NONE	PC	ANNUAL DONATION	500.
GREEN FLAG COMMITTEE A NJ NONPROFIT CORPORATION PO BOX 126 MILLVILLE, NJ 08332	NONE	PC	13TH ANNUAL COATS FOR KIDS	2,500.
GUILD OF CREATIVE ART 620 BROAD STREET SHREWSBURY, NJ 07702	NONE	PC	60TH ANNIVERSARY CELEBRATION	500.
HABCORE INC. PO BOX 2361 RED BANK, NJ 07701	NONE	PC	INDEPENDENCE PATHWAYS PROGRAM	15,000.
HABITAT FOR HUMANITY ATLANTIC COUNTY, INC. PO BOX 443 PLEASANTVILLE, NJ 08232-0443	NONE	PC	ANNUAL DONATION	5,000.
HABITAT FOR HUMANITY CAPE MAY COUNTY 20 COURT HOUSE SOUTH DENNIS ROAD CAPE MAY COURT HOUSE, NJ 08210	NONE	PC	ANNUAL DONATION	5,000.
HABITAT FOR HUMANITY IN MONMOUTH COUNTY 45 SOUTH STREET FREEHOLD, NJ 07728	NONE	PC	ACTS OF KINDNESS	250.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HABITAT FOR HUMANITY IN MONMOUTH COUNTY 45 SOUTH STREET FREEHOLD, NJ 07728	NONE	PC	ANNUAL DONATION	5,000.
HABITAT FOR HUMANITY OF BURLINGTON AND MERCER COUNTIES 530 ROUTE 38 EAST MAPLE SHADE, NJ 08052	NONE	PC	ANNUAL DONATION	5,000.
HABITAT FOR HUMANITY OF SOUTHERN OCEAN COUNTY, INC. 668 MAIN ST WEST CREEK, NJ 08092	NONE	PC	ANNUAL DONATION	5,000.
HACKENSACK MERIDIAN - RIVERVIEW MEDICAL CENTER FOUNDATION 1350 CAMPUS PKWY NEPTUNE, NJ 07753-6821	NONE	PC	FAMILY FIREWORKS	5,000.
HACKENSACK MERIDIAN HEALTH BAYSHORE MEDICAL CENTER FOUNDATION 1340 CAMPUS PARKWAY, BUILDING C, UNIT 4 NEPTUNE, NJ 07753	NONE	PC	OCTOBERFEST COMMUNITY CELEBRATION	1,000.
HACKENSACK MERIDIAN HEALTH INC. (JSUMC) 1340 CAMPUS PARKWAY, BUILDING C, UNIT 4 NEPTUNE, NJ 07753	NONE	PC	GOLF OUTING	1,500.
HACKENSACK MERIDIAN HEALTH OCEAN MEDICAL CENTER FOUNDATION 1340 CAMPUS PARKWAY, BUILDING C, UNIT 4 NEPTUNE, NJ 07753-6821	NONE	PC	GOLF OUTING	3,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HACKENSACK MERIDIAN HEALTH SOUTHERN OCEAN MEDICAL CENTER FOUNDATION 1340 CAMPUS PARKWAY, BUILDING C, UNIT 4 NEPTUNE, NJ 07753	NONE	PC	SIGNATURE SOCIAL	5,000.
HADASSAH, THE WOMEN'S ZIONIST ORGANIZATION OF AMERICA 40 WALL ST 8TH FLR NEW YORK, NY 10005-1471	NONE	PC	BOARD MATCHING GIFT	10,000.
HAMMONTON ARTS CENTER 10 SOUTH SECOND ST., PO BOX 831 HAMMONTON, NJ 08037	NONE	PC	PATRON SPONSORSHIP	500.
HANSEN FOUNDATION INC 4 EAST JIMMIE LEEDS ROAD, #3 GALLOWAY, NJ 08205	NONE	PC	RENOVATION OF RALEIGH & TALLAHASSEE AVENUE RECOVERY RESIDENCES	25,000.
HANSEN FOUNDATION INC 4 EAST JIMMIE LEEDS ROAD, #3 GALLOWAY, NJ 08205	NONE	PC	GOLF OUTING	1,500.
HEROES FOUNDATION NJ PO BOX 71 ROSENHAYN, NJ 08352	NONE	PC	PURCHASE OF AED DEVICES FOR CERT TEAMS	4,000.
HIGH POINT VOLUNTEER FIRE COMPANY 10 WEST 80TH STREET HARVEY CEDARS, NJ 08008	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
<b>Total from continuation sheets</b>				

**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HOLIDAY EXPRESS INC 151 INDUSTRIAL WAY EAST STE A4, BUILDING A STE A4 EATONTOWN, NJ 07724	NONE	PC	PROFESSIONAL CONCERTS FOR CLASSROOMS	5,000.
HOLIDAY EXPRESS INC 151 INDUSTRIAL WAY EAST STE A4, BUILDING A STE A4 EATONTOWN, NJ 07724	NONE	PC	ADOPTION OF TWO EVENTS	5,000.
HOLIDAY EXPRESS INC 151 INDUSTRIAL WAY EAST STE A4, BUILDING A STE A4 EATONTOWN, NJ 07724	NONE	PC	GOLF OUTING	2,500.
HOLIDAY HEIGHTS FIRST AID SQUAD 120 PRINCE CHARLES DR. TOMS RIVER, NJ 08757-6570	NONE	PC	ANNUAL DONATION	500.
HOLLY CITY DEVELOPMENT CORPORATION 14 E. MULBERRY ST MILLVILLE, NJ 08332	NONE	PC	PLAYSTREETS SUMMER PROGRAM	2,450.
HOLMDEL THEATRE COMPANY PO BOX 182 HOLMDEL, NJ 07733-0182	NONE	PC	BOARD MATCHING GIFT	250.
HOMES FOR ALL 309 HOOPER AVE. TOMS RIVER, NJ 08753	NONE	PC	HOME RUNS FOR HEROES	2,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HOMES FOR ALL 309 HOOPER AVE. TOMS RIVER, NJ 08753	NONE	PC	ACTS OF KINDNESS	250.
HOMES FOR ALL 309 HOOPER AVE. TOMS RIVER, NJ 08753	NONE	PC	HANDS FOR ALL	20,000.
HOMES NOW INC. 2141 ROUTE 88 EAST BRICK, NJ 08724	NONE	PC	ACTS OF KINDNESS	250.
HOPE SHEDS LIGHT, INC. 253 CHESTNUT ST. TOMS RIVER, NJ 08753	NONE	PC	DEVELOPMENT AND TRAINING FOR CASA AND YOUTH IN FOSTER CARE	15,000.
HOUSE OF HOPE OF OCEAN COUNTY, INC. 253 CHESTNUT STREET TOMS RIVER, NJ 08753	NONE	PC	EMERGENCY HOUSING ASSISTANCE	5,000.
HOUSE OF HOPE OF OCEAN COUNTY, INC. 253 CHESTNUT STREET TOMS RIVER, NJ 08753	NONE	PC	ACTS OF KINDNESS	250.
INSPIRA HEALTH NETWORK FOUNDATION GLOUCESTER COUNTY 159 BRIDGETON PIKE MULLICA HILL, NJ 08062	NONE	PC	GOLF OUTING	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
INSPIRA HEALTH NETWORK FOUNDATION GLOUCESTER COUNTY 159 BRIDGETON PIKE MULLICA HILL, NJ 08062	NONE	PC	INSPIRA HEALTH GRAND GALA	5,000.
INTERFAITH HEALTH & SUPPORT SERVICES OF SOUTHERN OCEAN COUNTY 1140 ROUTE 72 W MANAHAWKIN, NJ 08050-2412	NONE	PC	STATEWIDE CAREGIVER AND VOLUNTEER CONFERENCE	1,500.
INTERFAITH HEALTH & SUPPORT SERVICES OF SOUTHERN OCEAN COUNTY 1140 ROUTE 72 W MANAHAWKIN, NJ 08050-2412	NONE	PC	ACTS OF KINDNESS	250.
INTERFAITH HEALTH & SUPPORT SERVICES OF SOUTHERN OCEAN COUNTY 1140 ROUTE 72 W MANAHAWKIN, NJ 08050-2412	NONE	PC	RIDE FOR HEALTH PROGRAM - VAN PURCHASE	5,000.
INTERFAITH HOSPITALITY NETWORK OF OCEAN COUNTY, INC. 407 LEXINGTON AVENUE TOMS RIVER, NJ 08753	NONE	PC	BOARD MATCHING GIFT	1,000.
INTERFAITH HOSPITALITY NETWORK OF OCEAN COUNTY, INC. 407 LEXINGTON AVENUE TOMS RIVER, NJ 08753	NONE	PC	BOARD MATCHING GIFT	1,000.
INTERFAITH HOSPITALITY NETWORK OF OCEAN COUNTY, INC. 407 LEXINGTON AVENUE TOMS RIVER, NJ 08753	NONE	PC	ACTS OF KINDNESS	250.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
INTERFAITH HOSPITALITY NETWORK OF OCEAN COUNTY, INC. 407 LEXINGTON AVENUE TOMS RIVER, NJ 08753	NONE	PC	SHELTER PROGRAM SUPPORT	500.
INTERFAITH HOSPITALITY NETWORK OF OCEAN COUNTY, INC. 407 LEXINGTON AVENUE TOMS RIVER, NJ 08753	NONE	PC	HELPING HOMELESS FAMILIES WITH CHILDREN	10,000.
INTERFAITH NEIGHBORS INC. 810 FOURTH AVE ASBURY PARK, NJ 07712	NONE	PC	SPRINGWOOD AVENUE RISING HERITAGE WALKING TOUR	2,500.
INTERFAITH NEIGHBORS INC. 810 FOURTH AVE ASBURY PARK, NJ 07712	NONE	PC	ACTS OF KINDNESS	250.
ISLAND HEIGHTS FIRST AID SQUAD PO BOX 1027 ISLAND HEIGHTS, NJ 08732	NONE	PC	ANNUAL DONATION	500.
JACKSON TOWNSHIP FIRST AID SQUAD 38 E VETERANS HWY JACKSON, NJ 08527	NONE	PC	ANNUAL DONATION	500.
JAZZ ARTS PROJECT, INC 77 PINCKNEY RD RED BANK, NJ 07701-2217	NONE	PC	SUMMER JAZZ AT TWO RIVER	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JAZZ ARTS PROJECT, INC 77 PINCKNEY RD RED BANK, NJ 07701-2217	NONE	PC	SUMMER CAMP GRANT	2,500.
JEFFERSON HEALTH FOUNDATION NEW JERSEY 1099 WHITE HORSE ROAD VOORHEES, NJ 08043	NONE	PC	HEALTHCARE WORKER EMERGENCY ACCOMMODATIONS	5,000.
JEMMS FOUNDATION 467 E WOODBRIDGE AVE AVENEL, NJ 07001-1322	NONE	PC	ACTS OF KINDNESS	250.
JERSEY SHORE JAZZ & BLUES FOUNDATION PO BOX 8713 RED BANK, NJ 07701	NONE	PC	SUMMER FESTIVAL SUPPORT	2,500.
JEVS HUMAN SERVICES 250 N. NEW YORK AVE. ATLANTIC CITY, NJ 08401	NONE	PC	JEVS OPPORTUNITY YOUTH ACADEMY IN ATLANTIC COUNTY	15,000.
JEWISH FAMILY SERVICE OF ATLANTIC COUNTY AND CAPE MAY COUNTIES 607 N. JEROME AVE. MARGATE CITY, NJ 08402	NONE	PC	13TH ANNUAL JFS COCKTAIL PARTY	1,000.
JEWISH FAMILY SERVICE OF ATLANTIC COUNTY AND CAPE MAY COUNTIES 607 N. JEROME AVE. MARGATE CITY, NJ 08402	NONE	PC	EXPANSION OF JFS FOOD PANTRY	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JEWISH FAMILY SERVICE OF ATLANTIC COUNTY AND CAPE MAY COUNTIES 607 N. JEROME AVE. MARGATE CITY, NJ 08402	NONE	PC	VILLAGE BY THE SHORE	20,000.
JEWISH FAMILY SERVICE OF ATLANTIC COUNTY AND CAPE MAY COUNTIES 607 N. JEROME AVE. MARGATE CITY, NJ 08402	NONE	PC	ACTS OF KINDNESS	250.
JEWISH FEDERATION IN THE HEART OF NEW JERSEY 230 OLD BRIDGE TPKE. SOUTH RIVER, NJ 08882	NONE	PC	OUTPATIENT COUNSELING PROGRAM	5,000.
JEWISH FEDERATION OF SOUTHERN NEW JERSEY 1301 SPRINGDALE RD. CHERRY HILL, NJ 08003	NONE	PC	HOME RUNS FOR HEROES	2,000.
JEWISH FEDERATION OF SOUTHERN NEW JERSEY 1301 SPRINGDALE RD. CHERRY HILL, NJ 08003	NONE	PC	RHONA FISCHER FAMILY ASSISTANCE PROGRAM	15,000.
JF PARTY DRAGON 624 LEEWARD AVE BEACHWOOD, NJ 08722-2522	NONE	PC	ACTS OF KINDNESS	250.
JOHN F PETO STUDIO MUSEUM PO BOX 1022 ISLAND HGTS, NJ 08732-1022	NONE	PC	BOARD MATCHING GIFT	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JOHN R ELLIOTT FOUNDATION PO BOX 700 SOMERS POINT, NJ 08224	NONE	PC	HERO SAFE RIDE VOUCHER PROGRAM	2,500.
JUST BELIEVE A NJ NONPROFIT CORPORATION P.O. BOX 5441 TOMS RIVER, NJ 08754	NONE	PC	FIGHTING BACK AGAINST COVID 19	5,000.
JUVENILE DIABETES FOUNDATION INTERNATIONAL 26 BROADWAY 14TH FLOOR NEW YORK, NY 10004-1828	NONE	PC	BOARD MATCHING GIFT	640.
LADACIN NETWORK 1703 KNEELEY BLVD WANAMASSA, NJ 07712	NONE	PC	ACTS OF KINDNESS	250.
LADACIN NETWORK 1703 KNEELEY BLVD WANAMASSA, NJ 07712	NONE	PC	ROSEBUD GALA	3,500.
LADACIN NETWORK 1703 KNEELEY BLVD WANAMASSA, NJ 07712	NONE	PC	GOLF OUTING	350.
LADACIN NETWORK 1703 KNEELEY BLVD WANAMASSA, NJ 07712	NONE	PC	ESTABLISHING EMPLOYEE RECOGNITION & CAPITAL PROJECTS FUNDS	35,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LAKEHURST VOLUNTEER FIRE COMPANY 1 2 PROVING GROUND ROAD LAKEHURST, NJ 08733	NONE	PC	ANNUAL DONATION	500.
LAKESWOOD RESOURCE AND REFERRAL CENTER INC 212 2ND STREET, SUITE 204 LAKESWOOD, NJ 08701	NONE	PC	MOBILE TESTING CENTER SUPPORT & COMMUNITY OUTREACH	5,000.
LAKESWOOD RESOURCE AND REFERRAL CENTER INC 212 2ND STREET, SUITE 204 LAKESWOOD, NJ 08701	NONE	PC	SUPPORT OF COMPLEX CASE MANAGEMENT	15,000.
LAVALLETTE FIRST AID SQUAD PO BOX 334 LAVALLETTE, NJ 08735	NONE	PC	ANNUAL DONATION	500.
LEGAL AID SOCIETY OF MONMOUTH COUNTY 2407 ROUTE 66, PO BOX 2006 OCEAN, NJ 07712	NONE	PC	LEGAL AID PROGRAM SUPPORT	5,000.
LEONARDO FIRST AID SQUAD INC PO BOX 222, 32 VIOLA AVENUE LEONARDO, NJ 07737	NONE	PC	ANNUAL DONATION	500.
LEUKEMIA & LYMPHOMA SOCIETY 14 COMMERCE DRIVE, SUITE 301 CRANFORD, NJ 07016	NONE	PC	BOARD MATCHING GIFT	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LEVOY THEATRE PRESERVATION SOCIETY INC 130 N. HIGH STREET, PO BOX 678 MILLVILLE, NJ 08332	NONE	PC	ARTS FOR SMARTS	5,000.
LEVOY THEATRE PRESERVATION SOCIETY INC 130 N. HIGH STREET, PO BOX 678 MILLVILLE, NJ 08332	NONE	PC	SUMMER CAMP GRANT	2,500.
LIGHTHOUSE INTERNATIONAL FILM FESTIVAL, INC. 104 FAIRVIEW BEACH HAVEN, NJ 08008	NONE	PC	LIGHTHOUSE INTERNATIONAL FILM FESTIVAL	1,000.
LITERACY NEW JERSEY INC 100 MENLO PARK DRIVE, SUITE 314 EDISON, NJ 08837	NONE	PC	ADULT LITERACY IN ATLANTIC/CAPE MAY, GLOUCESTER, MONMOUTH AND OCEAN COUNTIES	5,000.
LITTLE SILVER VOLUNTEER FIRE CO 1 543 PROSPECT AVE LITTLE SILVER, NJ 07739	NONE	PC	ANNUAL DONATION	500.
LONG BEACH ISLAND COMMUNITY CENTER INC. 4700 LONG BEACH BLVD. LONG BEACH TOWNSHIP, NJ 08008	NONE	PC	HUMAN CONCERNS PROGRAM	20,000.
LONG BEACH ISLAND COMMUNITY CENTER INC. 4700 LONG BEACH BLVD. LONG BEACH TOWNSHIP, NJ 08008	NONE	PC	SUMMER CAMP GRANT	2,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LONG BEACH ISLAND COMMUNITY CENTER INC. 4700 LONG BEACH BLVD. LONG BEACH TOWNSHIP, NJ 08008	NONE	PC	EMERGENCY HOUSING ASSISTANCE	5,000.
LT. DENNIS W. ZILINSKI II MEMORIAL FUND 76 CROOKED STICK ROAD JACKSON, NJ 08527	NONE	PC	GOLF OUTING	750.
LT. DENNIS W. ZILINSKI II MEMORIAL FUND 76 CROOKED STICK ROAD JACKSON, NJ 08527	NONE	PC	HOME RUNS FOR HEROES	2,000.
LUNCH BREAK 121 DRS. JAMES PARKER BLVD. RED BANK, NJ 07701	NONE	PC	ACTS OF KINDNESS	250.
LUNCH BREAK 121 DRS. JAMES PARKER BLVD. RED BANK, NJ 07701	NONE	PC	RIISING TOGETHER VIRTUAL FUNDRAISER	1,000.
LUNCH BREAK 121 DRS. JAMES PARKER BLVD. RED BANK, NJ 07701	NONE	PC	GENERAL OPERATING SUPPORT	10,000.
LUNCH BREAK 121 DRS. JAMES PARKER BLVD. RED BANK, NJ 07701	NONE	PC	GENERAL OPERATIONS	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LUNCH BREAK 121 DRS. JAMES PARKER BLVD. RED BANK, NJ 07701	NONE	PC	BOARD MATCHING GIFT	650.
LUNCH BREAK 121 DRS. JAMES PARKER BLVD. RED BANK, NJ 07701	NONE	PC	EMPLOYEE MATCHING GIFT	250.
LUNCH BREAK 121 DRS. JAMES PARKER BLVD. RED BANK, NJ 07701	NONE	PC	BOARD MATCHING GIFT	2,500.
LUSTGARTEN FOUNDATION 415 CROSSWAYS PARK DRIVE, SUITE D WOODBURY, NY 11797-2055	NONE	PC	BOARD MATCHING GIFT	500.
M25 INITIATIVE A NONPROFIT CORPORATION 31 N PEARL ST BRIDGETON, NJ 08302-1901	NONE	PC	HOUSING FIRST RAPID REHOUSING PHASE IV	20,000.
MA DEUCE DEUCE (MA22) 7 APACHE DR. TOMS RIVER, NJ 08753-3403	NONE	PC	HOME RUNS FOR HEROES	2,000.
MAINSTAGE CENTER FOR THE ARTS INC 27 S BLACK HORSE PIKE BLACKWOOD, NJ 08012-2952	NONE	PC	SUMMER STAGE	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MANITOU PARK VOLUNTEER FIRE COMPANY NO 1 PO BOX 592 TOMS RIVER, NJ 08755	NONE	PC	ANNUAL DONATION	500.
MARLBORO FIRST AID & RESCUE SQUAD INC 140 WYNCREST ROAD MARLBORO, NJ 07746	NONE	PC	ANNUAL DONATION	500.
MENTAL HEALTH ASSOCIATION FOUNDATION INC 106 APPLE STREET, SUITE 110 TINTON FALLS, NJ 07724	NONE	PC	"PROMISE OF A NEW DAY" VIRTUAL EVENT	250.
MENTAL HEALTH ASSOCIATION OF MONMOUTH COUNTY 106 APPLE ST STE 110 TINTON FALLS, NJ 07724-2670	NONE	PC	RED BANK RESOURCE NETWORK	5,000.
MERCY CENTER CORPORATION 1106 MAIN ST. ASBURY PARK, NJ 07712	NONE	PC	FAMILY ASSISTANCE PROGRAM	10,000.
MERCY CENTER CORPORATION 1106 MAIN ST. ASBURY PARK, NJ 07712	NONE	PC	EMERGENCY SERVICES - FOOD, PERSONAL CARE, HOUSEHOLD ASSISTANCE	5,000.
MERCY CENTER CORPORATION 1106 MAIN ST. ASBURY PARK, NJ 07712	NONE	PC	WALK WITH MERCY AWARDS LUNCHEON	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MERIDIAN HEALTH FOUNDATIONS 1340 CAMPUS PARKWAY, BUILDING C, UNIT 4 NEPTUNE, NJ 07753	NONE	PC	CLINICAL TEAM SUPPORT, PPE AND EQUIPMENT	5,000.
MERIDIAN HEALTH FOUNDATIONS 1340 CAMPUS PARKWAY, BUILDING C, UNIT 4 NEPTUNE, NJ 07753	NONE	PC	VIRTUAL CELEBRATION GALA	35,000.
METROPOLITAN CAMDEN HABITAT FOR HUMANITY INC 6955 CENTRAL HWY. PENNSAUKEN, NJ 08109-4109	NONE	PC	ANNUAL DONATION	5,000.
MICHAEL GERARD PUHARIC MEMORIAL FUND INC PO BOX 787 MATAWAN, NJ 07747	NONE	PC	GALA	300.
MIDDLETOWN TOWNSHIP CULTURAL & ARTS COUNCIL, INC. 36 CHURCH STREET MIDDLETOWN, NJ 07748	NONE	PC	CONCERT SERIES SPONSORSHIP	1,000.
MILLVILLE DEVELOPMENT CORPORATION 22 N HIGH STREET MILLVILLE, NJ 08332	NONE	PC	20TH ANNIVERSARY FESTIVAL	3,500.
MILLVILLE DEVELOPMENT CORPORATION 22 N HIGH STREET MILLVILLE, NJ 08332	NONE	PC	SUMMER CAMP GRANT	2,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MILLVILLE PUBLIC SCHOOLS 110 N. THIRD STREET MILLVILLE, NJ 08332	NONE	PC	3D PRINTERS TO CREATE MASKS FOR HOSPITAL WORKERS	2,500.
MOCEANS CENTER FOR INDEPENDENT LIVING, INC. 565 BROADWAY LONG BRANCH, NJ 07740-5950	NONE	PC	ACTS OF KINDNESS	250.
MONMOUTH CONSERVATION FOUNDATION PO BOX 4150 MIDDLETOWN, NJ 07748	NONE	PC	FALL FOR CONSERVATION DRIVE IN	500.
MONMOUTH CONSERVATION FOUNDATION PO BOX 4150 MIDDLETOWN, NJ 07748	NONE	PC	WOODSTOCK EVENT AT FAIRWAY FARM	175.
MONMOUTH CONSERVATION FOUNDATION PO BOX 4150 MIDDLETOWN, NJ 07748	NONE	PC	HOLIDAY LUNCHEON	500.
MONMOUTH COUNTY ARTS COUNCIL, INC. 105 MONMOUTH STREET RED BANK, NJ 07701	NONE	PC	TECHNOLOGY & EQUIPMENT PURCHASE	5,000.
MONMOUTH COUNTY ARTS COUNCIL, INC. 105 MONMOUTH STREET RED BANK, NJ 07701	NONE	PC	TEEN ARTS FESTIVAL, SENIOR ART SHOW AND ROCK THE ARTS GALA	5,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MONMOUTH COUNTY HISTORICAL ASSOCIATION 70 COURT ST. FREEHOLD, NJ 07728	NONE	PC	BOARD MATCHING GIFT	400.
MONMOUTH COUNTY HISTORICAL ASSOCIATION 70 COURT ST. FREEHOLD, NJ 07728	NONE	PC	SPRINGSTEEN: HIS HOMETOWN EXHIBITION	1,000.
MONMOUTH DAY CARE CENTER INC 9 DRS JAMES PARKER BLVD RED BANK, NJ 07701-1503	NONE	PC	GENERAL OPERATING SUPPORT	10,000.
MONMOUTH LIBERTY BASEBALL CLUB 2 SHAWN CT MIDDLETOWN, NJ 07748-3346	NONE	PC	BOARD MATCHING GIFT	500.
MONMOUTH MEDICAL CENTER FOUNDATION 300 2ND AVE LONG BRANCH, NJ 07740-6303	NONE	PC	BOARD MATCHING GIFT	2,500.
MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION 600 RIVER AVENUE, ANNEX BUILDING LAKEWOOD, NJ 08701	NONE	PC	FLAVORS OF THE JERSEY SHORE	1,500.
MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION 600 RIVER AVENUE, ANNEX BUILDING LAKEWOOD, NJ 08701	NONE	PC	GOLF OUTING	2,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION 600 RIVER AVENUE, ANNEX BUILDING LAKEWOOD, NJ 08701	NONE	PC	HUMANITARIAN GALA	10,000.
MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION 600 RIVER AVENUE, ANNEX BUILDING LAKEWOOD, NJ 08701	NONE	PC	COVID-19 EMERGENCY RESPONSE/TRIAGE TENTS	5,000.
MONMOUTH MUSEUM AND CULTURAL CENTER 765 NEWMAN SPRINGS ROAD LINCROFT, NJ 07738	NONE	PC	GENERAL SUPPORT	7,500.
MONMOUTH MUSEUM AND CULTURAL CENTER 765 NEWMAN SPRINGS ROAD LINCROFT, NJ 07738	NONE	PC	SUMMER CAMP GRANT	2,500.
MONMOUTH MUSEUM AND CULTURAL CENTER 765 NEWMAN SPRINGS ROAD LINCROFT, NJ 07738	NONE	PC	SUMMER SUNSET FIESTA VIRTUAL FUNDRAISER	2,500.
MONMOUTH PARK CHARITY FUND 175 OCEANPORT AVE OCEANPORT, NJ 07757	NONE	PC	BOARD MATCHING GIFT	10,000.
MONMOUTH UNIVERSITY 400 CEDAR AVE W LONG BRANCH, NJ 07764-1898	NONE	PC	SCHOLARSHIP PROGRAM	50,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MOVE FOR HUNGER 4 HENDRICKSON AVENUE, SUITE 4 RED BANK, NJ 07701	NONE	PC	ACTS OF KINDNESS	250.
MOVE FOR HUNGER 4 HENDRICKSON AVENUE, SUITE 4 RED BANK, NJ 07701	NONE	PC	FIGHTING HUNGER AND FOOD WASTE IN NJ DURING COVID-19	15,000.
MOVE FOR HUNGER 4 HENDRICKSON AVENUE, SUITE 4 RED BANK, NJ 07701	NONE	PC	COORDINATED FOOD COLLECTION/TRANSPORTATION	5,000.
MUD GIRLS STUDIO 203 HELENA DR LINWOOD, NJ 08221-2224	NONE	PC	ACTS OF KINDNESS	250.
MUSIC AT BUNKER HILL 18 STONEHENGE SEWELL, NJ 08080	NONE	PC	CONCERT IN THE PARK	1,400.
NATIONAL GUARD STATE FAMILY READINESS COUNCIL PO BOX 5692 TRENTON, NJ 08638	NONE	PC	HOME RUNS FOR HEROES	2,000.
NAVAL AIR STATION WILDWOOD AVIATION MUSEUM 500 FORRESTAL ROAD CAPE MAY, NJ 08204	NONE	PC	SUMMER LECTURE & FILM SERIES	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NAVY-MARINE CORPS RELIEF SOCIETY/LAKEHURST NSA LAKEHURST, BERRY RD. BLDG. 158 LAKEHURST, NJ 08733	NONE	PC	HOME RUNS FOR HEROES	2,000.
NEW JERSEY AUDUBON SOCIETY 9 HARDCRABBLE ROAD BERNARDSVILLE, NJ 07924	NONE	PC	SUMMER CAMP GRANT	2,500.
NEW JERSEY AUDUBON SOCIETY 9 HARDCRABBLE ROAD BERNARDSVILLE, NJ 07924	NONE	PC	OPERATING SUPPORT/TEACHER TRAINING	5,000.
NEW JERSEY AUDUBON SOCIETY 9 HARDCRABBLE ROAD BERNARDSVILLE, NJ 07924	NONE	PC	EARTH DAY BIRTHDAY CELEBRATION	1,000.
NEW JERSEY CHAMBER OF COMMERCE FOUNDATION 216 WEST STATE STREET 3RD FL TRENTON, NJ 08608-1002	NONE	PC	JOBS FOR AMERICA'S GRADUATES NEW JERSEY	5,000.
NEW JERSEY COUNCIL FOR ECONOMIC EDUCATION 641 PROSPECT AVE LITTLE SILVER, NJ 07739	NONE	PC	FINANCIAL LITERACY TEACHER PROFESSIONAL DEVELOPMENT WORKSHOPS	45,000.
NEW JERSEY MUSEUM OF BOATING 1800 BAY AVE. POINT PLEASANT, NJ 08742	NONE	PC	ECO PATROL BOAT - MOTOR REPLACEMENT	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NEW JERSEY REPERTORY COMPANY 179 BROADWAY LONG BRANCH, NJ 07740	NONE	PC	MAIN STAGE SUBSCRIPTION SERIES	5,000.
NEW JERSEY THEATRE ALLIANCE 7 KING PLACE MORRISTOWN, NJ 07960	NONE	PC	THE STAGES FESTIVAL	5,000.
NEW JERSEY VIETNAM VETERAN'S MEMORIAL FOUNDATION 1 MEMORIAL LN HOLMDEL, NJ 07733	NONE	PC	GOLF OUTING	750.
NEW JERSEY VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER (NJVOAD) 1636-44 ROUTE 38, LUMBERTON PLAZA #315 LUMBERTON, NJ 08048	NONE	PC	SUPPORT OF VOAD/COAD	5,000.
NEW POINT COMFORT FIRE COMPANY NO 1 PO BOX 352 KEANSBURG, NJ 07734	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
NORTHERN OCEAN HABITAT FOR HUMANITY 1214 ROUTE 37 EAST TOMS RIVER, NJ 08753-5752	NONE	PC	ANNUAL DONATION	5,000.
OCEAN CARES FOUNDATION INC. 687 ROUTE 9 BAYVILLE, NJ 08721	NONE	PC	MENTAL HEALTH & WELLNESS FAIR	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OCEAN CITY ARTS CENTER 1735 SIMPSON AVENUE OCEAN CITY, NJ 08226	NONE	PC	SUMMER LUNCHEON	500.
OCEAN CITY ARTS CENTER 1735 SIMPSON AVENUE OCEAN CITY, NJ 08226	NONE	PC	JURIED ART SHOW	200.
OCEAN CITY THEATRE COMPANY 1501 WEST AVENUE OCEAN CITY, NJ 08226	NONE	PC	BROADWAY ON THE OC BOARDWALK	1,500.
OCEAN COUNTY COLLEGE FOUNDATION PO BOX 2001 TOMS RIVER, NJ 08754-2001	NONE	PC	ACTS OF KINDNESS	250.
OCEAN COUNTY COLLEGE FOUNDATION PO BOX 2001 TOMS RIVER, NJ 08754-2001	NONE	PC	BOARD MATCHING GIFT	2,500.
OCEAN COUNTY COLLEGE FOUNDATION PO BOX 2001 TOMS RIVER, NJ 08754-2001	NONE	PC	SCHOLARSHIP PROGRAM	50,000.
OCEAN COUNTY FOUNDATION FOR VOCATIONAL AND TECHNICAL EDUCATION 137 BEY LEA RD TOMS RIVER, NJ 08753	NONE	PC	WINTER MUSICAL	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OCEAN COUNTY FOUNDATION FOR VOCATIONAL AND TECHNICAL EDUCATION 137 BEY LEA RD TOMS RIVER, NJ 08753	NONE	PC	60 FOR 60 CAMPAIGN	500.
OCEAN COUNTY FOUNDATION FOR VOCATIONAL AND TECHNICAL EDUCATION 137 BEY LEA RD TOMS RIVER, NJ 08753	NONE	PC	CHEFS NIGHT OUT	225.
OCEAN COUNTY FRIENDS OF NAVY LAKEHURST 101 HOOPER AVE, ROOM 109 TOMS RIVER, NJ 08753	NONE	PC	OCEAN COUNTY MILITARY SUPPORT COMMITTEE WINTER MEET AND GREET	1,000.
OCEAN COUNTY HISTORICAL SOCIETY 26 HADLEY AVENUE TOMS RIVER, NJ 08753	NONE	PC	BIRDSALL ROOM RENOVATIONS	5,000.
OCEAN COUNTY HISTORICAL SOCIETY 26 HADLEY AVENUE TOMS RIVER, NJ 08753	NONE	PC	BIRDSALL ROOM RENOVATIONS	2,500.
OCEAN COUNTY JEWISH FEDERATION 1235A ROUTE 70 LAKEWOOD, NJ 08701	NONE	PC	ACTS OF KINDNESS	250.
OCEAN COUNTY LIBRARY FOUNDATION INC. 101 WASHINGTON ST. TOMS RIVER, NJ 08753-7625	NONE	PC	BOARD MATCHING GIFT	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OCEAN COUNTY LIBRARY FOUNDATION INC. 101 WASHINGTON ST. TOMS RIVER, NJ 08753-7625	NONE	PC	NEIGHBORS CONNECTING ARTS AND CULTURAL SERIES	5,000.
OCEAN COUNTY YMCA, INC. 1088 W. WHITTY RD. TOMS RIVER, NJ 08755-3278	NONE	PC	SUMMER MEALS/DAY CAMP SOCIAL DISTANCING EQUIPMENT/AQUATIC NEEDS	15,000.
OCEAN COUNTY YMCA, INC. 1088 W. WHITTY RD. TOMS RIVER, NJ 08755-3278	NONE	PC	BOARD MATCHING GIFT	2,500.
OCEAN COUNTY YMCA, INC. 1088 W. WHITTY RD. TOMS RIVER, NJ 08755-3278	NONE	PC	EMPLOYEE MATCHING GIFT	250.
OCEAN COUNTY YMCA, INC. 1088 W. WHITTY RD. TOMS RIVER, NJ 08755-3278	NONE	PC	SUMMER CAMP GRANT	2,500.
OCEAN COUNTY YMCA, INC. 1088 W. WHITTY RD. TOMS RIVER, NJ 08755-3278	NONE	PC	FIRE RELIEF FUND	500.
OCEAN COUNTY YMCA, INC. 1088 W. WHITTY RD. TOMS RIVER, NJ 08755-3278	NONE	PC	BOARD MATCHING GIFT	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OCEAN GATE VOLUNTEER FIRE CO. PO BOX 613 OCEAN GATE, NJ 08740	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
OCEAN HOUSING ALLIANCE, INC. 605 BAY AVE PT PLEAS BCH, NJ 08742-2536	NONE	PC	OPERATING SUPPORT	2,500.
OCEAN MENTAL HEALTH SERVICES INC. 160 ROUTE 9 BAYVILLE, NJ 08721-2548	NONE	PC	INTEGRATED BEHAVIORAL HEALTH TELEHEALTH SERVICES	5,000.
OCEAN OF LOVE INC. 1709 ROUTE 37 EAST TOMS RIVER, NJ 08753	NONE	PC	PUBLIC SERVICE AWARDS	500.
OCEAN OF LOVE INC. 1709 ROUTE 37 EAST TOMS RIVER, NJ 08753	NONE	PC	ACTS OF KINDNESS	250.
OCEAN PARTNERSHIP FOR CHILDREN, INC. 36 WASHINGTON STREET, STE 1 TOMS RIVER, NJ 08753-7667	NONE	PC	BOARD MATCHING GIFT	1,000.
OCEANAIRE'S BARBERSHOP CHORUS P.O. BOX 1686 TOMS RIVER, NJ 08754	NONE	PC	CORPORATE KEYNOTE SPONSOR - 2020 & 2021	2,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OCEANPORT HOOK AND LADDER COMPANY 21 MAIN ST. OCEANPORT, NJ 07757-1107	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
OCEANPORT VOLUNTEER FIRST AID AND RESCUE 2 PEMBERTON AVE OCEANPORT, NJ 07757	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
OCEAN'S HARBOR HOUSE INC. 808 CONIFER ST. TOMS RIVER, NJ 08753	NONE	PC	EMPLOYEE MATCHING GIFT	250.
OCEAN'S HARBOR HOUSE INC. 808 CONIFER ST. TOMS RIVER, NJ 08753	NONE	PC	BOARD MATCHING GIFT	500.
OCEAN'S HARBOR HOUSE INC. 808 CONIFER ST. TOMS RIVER, NJ 08753	NONE	PC	YOUTH HOUSING COVID 19 RESPONSE PLAN	20,000.
OCEAN'S HARBOR HOUSE INC. 808 CONIFER ST. TOMS RIVER, NJ 08753	NONE	PC	VIRTUAL ART AUCTION	500.
OLD BARRACKS MUSEUM 101 BARRACK STREET TRENTON, NJ 08608	NONE	PC	TAVERN NIGHT	1,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OLD VILLAGE FIRE COMPANY INC 1340 STATE ROUTE 35 MIDDLETOWN, NJ 07748	NONE	PC	ANNUAL DONATION	500.
OPERATION FIRST RESPONSE 20037 DOVE HILL ROAD CULPEPER, NJ 22701	NONE	PC	HOME RUNS FOR HEROES	2,000.
OPERATION WARM 50 APPLIED BANK BOULEVARD, SUITE 204 GLEN MILLS, PA 19342	NONE	PC	OPERATION WARM UP JERSEY SHORE	5,000.
OUR LADY STAR OF THE SEA SCHOOL 15 N. CALIFORNIA AVE. ATLANTIC CITY, NJ 08401	NONE	PC	PROFESSIONAL DEVELOPMENT WORKSHOPS	5,000.
OUR SPECIAL KLUB NEW JERSEY, INC. 41 GREEN ISLAND RD. TOMS RIVER, NJ 08753	NONE	PC	BOWLING PROGRAM FOR CHILDREN WITH DEVELOPMENTAL DISABILITIES	2,000.
PANTHERS LET'S EAT BENEDICT STREET POINT PLEASANT, NJ 08742-0000	NONE	PC	ACTS OF KINDNESS	250.
PARKER FAMILY HEALTH CENTER 211 SHREWSBURY AVE. RED BANK, NJ 07701	NONE	PC	SUPPORT DIABETES CARE FOR THE UNINSURED	15,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PARKER FAMILY HEALTH CENTER 211 SHREWSBURY AVE. RED BANK, NJ 07701	NONE	PC	SPECIAL AWARD - MPCF	1,500.
PARKER FAMILY HEALTH CENTER 211 SHREWSBURY AVE. RED BANK, NJ 07701	NONE	PC	EMERGENCY MEDICATION RELIEF FUND	5,000.
PHOENIX PRODUCTIONS INC 59 CHESTNUT ST, PO BOX 727 RED BANK, NJ 07701	NONE	PC	FULL SEASON PLAYBILL AD	750.
PINE BEACH VOLUNTEER FIRE CO. NO. 1 525 PROSPECT AVE PINE BEACH, NJ 08741	NONE	PC	ANNUAL DONATION	500.
PINE SHORES ART ASSOCIATION 94 STAFFORD AVENUE MANAHAWKIN, NJ 08050	NONE	PC	ARTS EDUCATION & SHOW ADVERTISING	500.
PINWALD PIONEER FOREST FIGHTERS INC 640 PINWALD-KESWICK ROAD, PO BOX 195 BAYVILLE, NJ 08721-0195	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
PINWHEEL PLACE PO BOX 257 RED BANK, NJ 07701	NONE	PC	ACTS OF KINDNESS	250.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PLEASANT PLAINS FIRST AID SQUAD 44 CLAYTON AVE TOMS RIVER, NJ 08755	NONE	PC	ANNUAL DONATION	500.
POINT PLEASANT BOROUGH FIRE DEPARTMENT INC PO BOX 624 POINT PLEASANT, NJ 08742	NONE	PC	ANNUAL DONATION	500.
POINT PLEASANT FIRST AID & EMERGENCY SQUAD 611 LAUREL AVENUE POINT PLEASANT BEACH, NJ 08742	NONE	PC	ANNUAL DONATION	500.
POLICE ATHLETIC LEAGUE OF ATLANTIC CITY 250 NEW YORK AVE. ATLANTIC CITY, NJ 08401	NONE	PC	COMMUNITY STEM PROGRAM	15,000.
PREFERRED BEHAVIORAL HEALTH OF NEW JERSEY INC. PO BOX 2036 LAKEWOOD, NJ 08701	NONE	PC	PURCHASE OF TECHNOLOGY/INCREMENTAL CHILD THERAPY SESSIONS	5,000.
PREFERRED BEHAVIORAL HEALTH OF NEW JERSEY INC. PO BOX 2036 LAKEWOOD, NJ 08701	NONE	PC	COVID RELATED NEEDS (PPE/SHIELDS/CLEANING/SANITIZING)	15,000.
PREFERRED BEHAVIORAL HEALTH OF NEW JERSEY INC. PO BOX 2036 LAKEWOOD, NJ 08701	NONE	PC	GOLF OUTING	500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PREFERRED BEHAVIORAL HEALTH OF NEW JERSEY INC. PO BOX 2036 LAKEWOOD, NJ 08701	NONE	PC	PEER EDUCATOR PROGRAM FOR TEENS	5,000.
PREVENTION RESOURCES INC 4 WALTER FORAN BLVD, SUITE 410 FLEMINGTON, NJ 08822	NONE	PC	OCEANS FAMILY SUCCESS CENTER - FINANCIAL LITERACY SERIES	4,500.
PRO BONO PARTNERSHIP 300 LANIDEX PLAZA, SUITE 3203 PARSIPPANY, NJ 07054	NONE	PC	PRO BONO LEGAL SERVICES FOR NONPROFITS	5,000.
RAFTS INC PO BOX 203 MANASQUAN, NJ 08736	NONE	PC	ADDICTION RECOVERY - TELEPHONE HELPLINE/SUPPORT PROGRAM	4,800.
RECALIBRATE PO BOX 347 TOMS RIVER, NJ 08753	NONE	PC	HOME RUNS FOR HEROES	2,000.
RED BANK RIVERCENTER 140 BROAD STREET RED BANK, NJ 07701	NONE	PC	STREETLIFE PROGRAM	1,000.
REMEMBERING JAMIE FOUNDATION PO BOX 370 SOMERS POINT, NJ 08244	NONE	PC	REMEMBERING JAMIE DINNER	250.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
REVIVE SOUTH JERSEY 40 EAST COMMERCE STREET, PO BOX 9 BRIDGETON, NJ 08302	NONE	PC	BRIDGETON HEALTHY ACTIVITIES AND FAMILY WELLNESS CAMPAIGN	15,000.
RIDGEWAY VOLUNTEER FIRE COMPANY 2848 RIDGEWAY ROAD, ROUTE 571 MANCHESTER, NJ 08759	NONE	PC	ANNUAL DONATION	500.
RISING TREETOPS AT OAKHURST 111 MONMOUTH ROAD OAKHURST, NJ 07755	NONE	PC	THERAPEUTIC RECREATION PROGRAM	5,000.
RIVERFRONT RENAISSANCE CENTER FOR THE ARTS INC 22 NORTH HIGH STREET MILLVILLE, NJ 08332	NONE	PC	YOUTH ART EDUCATION PROGRAMS	2,500.
RONALD MCDONALD HOUSE OF CENTRAL AND NORTHERN NEW JERSEY 131 BATH AVE LONG BRANCH, NJ 07740-6314	NONE	PC	FOOD AND CLEANING SUPPLIES FOR FAMILIES, REMOTE ACCESS FOR EMPLOYEES	5,000.
ROWAN UNIVERSITY FOUNDATION 201 MULLICA HILL RD GLASSBORO, NJ 08028-1700	NONE	PC	SCHOLARSHIP PROGRAM	50,000.
RURAL DEVELOPMENT CORPORATION 6140 MAYS LANDING RD VINELAND, NJ 08361-7651	NONE	PC	ACTS OF KINDNESS	250.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SAINT MAXIMILIAN KOLBE 200 TUCKAHOE RD MARMORA, NJ 08223-1301	NONE	PC	EMPLOYEE MATCHING GIFT	250.
SAINT PETER'S PREP HIGH SCHOOL 144 GRAND ST JERSEY CITY, NJ 07302-4431	NONE	PC	BOARD MATCHING GIFT	2,500.
SAINT PETER'S PREP HIGH SCHOOL 144 GRAND ST JERSEY CITY, NJ 07302-4431	NONE	PC	BOARD MATCHING GIFT	1,000.
SAMARITAN CENTER INC. 36 SOUTH STREET MANASQUAN, NJ 08736	NONE	PC	10TH ANNIVERSARY CELEBRATION	500.
SAVE BARNEGAT BAY 725B MANTOLOKING RD BRICK, NJ 08723-5335	NONE	PC	INSTALLATION OF CITIZEN WATER QUALITY TESTING LAB	5,000.
SCAN 180 HIGHWAY 35 SOUTH EATONTOWN, NJ 07724	NONE	PC	OCEAN COUNTY LUNCH & LEARN PROGRAMS FOR SENIORS	5,000.
SCARSDALE EDMONT FAMILY COUNSELING SERVICE 14 HARWOOD CT STE 403 SCARSDALE, NY 10583-4154	NONE	PC	BOARD MATCHING GIFT	2,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SCHULTZ-HILL FOUNDATION 1616 PACIFIC AVE. ATLANTIC CITY, NJ 08401	NONE	PC	TEXAS TENORS, MUSIC & MEMORIES, ARTS YOUTH OUTREACH	2,500.
SEASHORE GARDENS FOUNDATION 22 WEST JIMMIE LEEDS ROAD GALLOWAY, NJ 08205	NONE	PC	RUN THE BOARDS	500.
SEASIDE PARK (TRI-BORO) FIRST AID SQUAD PO BOX 98 SEASIDE PARK, NJ 08752	NONE	PC	ANNUAL DONATION	500.
SEASIDE PARK VOLUNTEER FIRE CO. NO. 1 PO BOX 201 SEASIDE PARK, NJ 08752-0201	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
SHARK RIVER HILLS FIRST AID INC 201 CARTON AVENUE NEPTUNE, NJ 07753	NONE	PC	ANNUAL DONATION	500.
SHORE CLUBHOUSE 279 BROADWAY, SUITE 400 LONG BRANCH, NJ 07740	NONE	PC	MODEL OF EXCELLENCE	5,000.
SHORE MEDICAL CENTER 100 MEDICAL CENTER WAY SOMERS POINT, NJ 08244	NONE	PC	PURCHASE OF SURGICAL MASKS/FACE SHIELDS	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SHORE MEDICAL CENTER 100 MEDICAL CENTER WAY SOMERS POINT, NJ 08244	NONE	PC	GOLF OUTING	10,000.
SILVER RIDGE PARK FIRST AID SQUAD P O BOX 3311 TOMS RIVER, NJ 08756	NONE	PC	ANNUAL DONATION	500.
SIMON'S SOUP KITCHEN PO BOX 551 SEASIDE PARK, NJ 08752-0551	NONE	PC	ACTS OF KINDNESS	250.
SOCIETY FOR THE PREVENTION OF TEEN SUICIDE INC 110 WEST MAIN ST FREEHOLD, NJ 07728	NONE	PC	VIRTUAL EVENT TO SUPPORT TEEN SUICIDE PREVENTION	2,500.
SOROPTIMIST INTERNATIONAL OF CUMBERLAND COUNTY PO BOX 50 SHILOH, NJ 08353-0050	NONE	PC	EMPLOYEE MATCHING GIFT	100.
SOUTH JERSEY AREA WIND ENSEMBLE 214 BLACKMAN ROAD EGG HARBOR TOWNSHIP, NJ 08234	NONE	PC	SIDE-BY-SIDE CONCERT	1,500.
SOUTH JERSEY CANCER FUND PO BOX 1084 BRIGANTINE, NJ 08203	NONE	PC	EMERGENCY FINANCIAL ASSISTANCE FUND	2,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SOUTH JERSEY CULTURAL ALLIANCE INC 30 FRONT STREET HAMMONTON, NJ 08037	NONE	PC	CROWDFUNDING CAMPAIGN FOR SOUTH JERSEY CULTURAL ORGANIZATIONS	1,500.
SOUTH JERSEY CULTURAL ALLIANCE INC 30 FRONT STREET HAMMONTON, NJ 08037	NONE	PC	25TH ANNIVERSARY ENCORE AWARDS	3,500.
SOUTH JERSEY JAZZ SOCIETY INC PO BOX 329 SOMERS POINT, NJ 08244	NONE	PC	JAZZ AT THE POINT	5,000.
SOUTH TOMS RIVER FIRST AID SQUAD PO BOX 57 BEACHWOOD, NJ 08722-0057	NONE	PC	ANNUAL DONATION	500.
SPANISH SPEAKING PEOPLES COMMUNITY CENTER 3900 VENTNOR AVENUE ATLANTIC CITY, NJ 08401	NONE	PC	ADULT ESL PROGRAM	4,830.
SPECIAL PEOPLE UNITED TO RIDE INC 805 NEWMAN SPRINGS ROAD LINCROFT, NJ 07738-1695	NONE	PC	SUMMER CAMP GRANT	2,500.
SPECIAL STRIDES 118 FEDERAL ROAD MONROE, NJ 08831	NONE	PC	TWILIGHT ON THE FARM GALA	3,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SPRING LAKE FIRE CO. NO. 1 1007 FIFTH AVE. SPRING LAKE, NJ 07762	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
ST. VINCENT DE PAUL SOCIETY NORTHERN MONMOUTH COUNCIL 1 PORTLAND RD UNIT 14 HIGHLANDS, NJ 07732-1951	NONE	PC	ANNUAL DONATION	7,275.
ST. VINCENT DE PAUL SOCIETY OCEAN COUNTY COUNCIL 3 GAINSBOROUGH LANE MANCHESTER, NJ 08759	NONE	PC	ANNUAL DONATION	12,725.
STAFFORD VOLUNTEER FIRE CO. STA. 47 PO BOX 171 MANAHAWKIN, NJ 08050-0171	NONE	NC** (IRC 501(C)(4))	CHARITABLE GRANT CONSISTENT WITH FOUNDATION'S EXEMPT PURPOSE. TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF GRANT HAS BEEN DIVERTED FROM CHARITABLE PURPOSE & NO FURTHER VERIFICATION IS REQUIRED CONSISTENT WITH IRC 4945(H)(3) & TREAS. REG. 53.4945-5(D).	500.
STOCKTON UNIVERSITY 101 VERA KING FARRIS DRIVE SUITE K GALLOWAY, NJ 08205-9441	NONE	PC	SCHOLARSHIP PROGRAM	50,000.
STRAND VENTURES, INC. 400 CLIFTON AVENUE LAKEWOOD, NJ 08701	NONE	PC	ADA EVENT	3,500.
STRAND VENTURES, INC. 400 CLIFTON AVENUE LAKEWOOD, NJ 08701	NONE	PC	TECHNOLOGY UPGRADES	5,000.
<b>Total from continuation sheets</b>				

**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SUCCESS 1ST 98 CANDLEWOOD DRIVE MANTUA, NJ 08051	NONE	PC	INTERGENERATIONAL "LET'S TALK, LISTEN & BOND" PROJECT	2,000.
T THOMAS FORTUNE FOUNDATION 94 DRS. JAMES PARKER BLVD. RED BANK, NJ 07701	NONE	PC	FORTUNE TELLERS PROGRAM	1,000.
T THOMAS FORTUNE FOUNDATION 94 DRS. JAMES PARKER BLVD. RED BANK, NJ 07701	NONE	PC	YEAR OF BASIE PROGRAMS & EXHIBITS	2,500.
THE AL MACKLER CANCER FOUNDATION 103 S SACRAMENTO AVE VENTNOR, NJ 08406	NONE	PC	AL MACKLER CANCER FOUNDATION RACE	1,000.
THE APPEL FARM ARTS AND MUSIC CENTER PO BOX 888, 457 SHIRLEY ROAD ELMER, NJ 08318	NONE	PC	ARTS EDUCATION PROGRAM TRANSITION TO VIRTUAL PLATFORM	5,000.
THE APPEL FARM ARTS AND MUSIC CENTER PO BOX 888, 457 SHIRLEY ROAD ELMER, NJ 08318	NONE	PC	SUMMER CAMP GRANT	2,500.
THE APPEL FARM ARTS AND MUSIC CENTER PO BOX 888, 457 SHIRLEY ROAD ELMER, NJ 08318	NONE	PC	THE GLOUCESTER AND SALEM COUNTY TEEN ARTS FESTIVAL	2,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE ARC OF ATLANTIC COUNTY 6550 DELILAH ROAD, SUITE 101 EGG HARBOR TWP, NJ 08234	NONE	PC	GOLF OUTING	500.
THE ARC OF ATLANTIC COUNTY 6550 DELILAH ROAD, SUITE 101 EGG HARBOR TWP, NJ 08234	NONE	PC	NIGHT TO SHINE PROM	1,500.
THE ARC OF MONMOUTH 1158 WAYSIDE RD TINTON FALLS, NJ 07712-3148	NONE	PC	SANITATION MEASURES AND PREPAREDNESS TO PROTECT RESIDENTS WITH DISABILITIES	5,000.
THE ARC, OCEAN COUNTY CHAPTER 815 CEDARBRIDGE AVE. LAKEWOOD, NJ 08701	NONE	PC	BOWL-A-THON & GIFT AUCTION	500.
THE ARC, OCEAN COUNTY CHAPTER 815 CEDARBRIDGE AVE. LAKEWOOD, NJ 08701	NONE	PC	TOUCHLESS SINKS FOR VOCATIONAL SERVICES	15,000.
THE ARC, OCEAN COUNTY CHAPTER 815 CEDARBRIDGE AVE. LAKEWOOD, NJ 08701	NONE	PC	MEDICAL AND CLEANING SUPPLIES FOR SHELTER PROGRAMS	2,500.
THE BLOOM FOUNDATION 716 NEWMAN SPRINGS ROAD, #117 LINCROFT, NJ 07738	NONE	PC	ACTS OF KINDNESS	250.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE BRADLEY BEACH FIRST AID SQUAD INC 725 MAIN STREET BRADLEY BEACH, NJ 07720	NONE	PC	ANNUAL DONATION	500.
THE FIRST TEE JERSEY SHORE PO BOX 665 POINT PLEASANT, NJ 08742	NONE	PC	GOLF OUTING	3,000.
THE FIRST TEE JERSEY SHORE PO BOX 665 POINT PLEASANT, NJ 08742	NONE	PC	GENERAL PROGRAM SUPPORT	5,000.
THE HISTORIC VILLAGE AT ALLAIRE 4263 ATLANTIC AVENUE FARMINGDALE, NJ 07727	NONE	PC	TRADESMAN EXHIBITION/KIDS CLUB	1,000.
THE KIDS ON THE BLOCK NEW JERSEY, INC. PO BOX 206 SHIP BOTTOM, NJ 08008	NONE	PC	PUPPET PROGRAMS	2,000.
THE KORTNEY ROSE FOUNDATION 41 SUMMERFIELD AVE OCEANPORT, NJ 07757-1214	NONE	PC	"GO GOLD IN SEPTEMBER" EVENT	1,500.
THE PUERTO RICAN ACTION COMMITTEE OF SOUTHERN NEW JERSEY 114 EAST MAIN ST. PENNS GROVE, NJ 08069-1443	NONE	PC	TELE-PROMOTORA EQUIPMENT/PPE	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE SALVATION ARMY 22 SOUTH TEXAS AVE. ATLANTIC CITY, NJ 08401	NONE	PC	EMERGENCY FOOD PANTRY SUPPORT	5,000.
TIGGER HOUSE INC. PO BOX 276 RED BANK, NJ 07701-6311	NONE	PC	BOARD MATCHING GIFT	250.
TOMS RIVER FIELD OF DREAMS INC 37 HARPERS FERRY RD TOMS RIVER, NJ 08753	NONE	PC	CASINO NIGHT	1,200.
TRENTON AREA SOUP KITCHEN 72 HALF ESCHER STREET TRENTON, NJ 08605-0000	NONE	PC	MEAL SERVICE PROGRAM	20,000.
TRINITY HALL 101 CORREGIDOR ROAD TINTON FALLS, NJ 07724	NONE	PC	BOARD MATCHING GIFT	10,000.
TWO RIVER THEATER COMPANY 21 BRIDGE AVENUE RED BANK, NJ 07701	NONE	PC	A LITTLE SHAKESPEARE	2,500.
TWO RIVER THEATER COMPANY 21 BRIDGE AVENUE RED BANK, NJ 07701	NONE	PC	SUMMER CAMP GRANT	2,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UNITED ADVOCACY GROUP INC 40 E. COMMERCE ST, P.O. BOX 9 BRIDGETON, NJ 08302	NONE	PC	SUMMER CAMP GRANT	2,500.
UNITED WAY OF MONMOUTH & OCEAN COUNTIES 4814 OUTLOOK DRIVE SUITE 107 WALL, NJ 07753	NONE	PC	SUMMER CAMP GRANT	2,500.
UNITED WAY OF MONMOUTH & OCEAN COUNTIES 4814 OUTLOOK DRIVE SUITE 107 WALL, NJ 07753	NONE	PC	WARMEST WISHES COAT DRIVE	1,500.
UNITED WAY OF MONMOUTH & OCEAN COUNTIES 4814 OUTLOOK DRIVE SUITE 107 WALL, NJ 07753	NONE	PC	FINANCIAL SUCCESS CENTER	10,000.
VALERIE FUND 2101 MILLBURN AVE. MAPLEWOOD, NJ 07040	NONE	PC	THE WORLD SUBARU 5K RUN & WALK	1,000.
VALERIE FUND 2101 MILLBURN AVE. MAPLEWOOD, NJ 07040	NONE	PC	SUMMER CAMP GRANT	2,500.
VETERANS OF FOREIGN WARS FOUNDATION 373 ADAMSTON ROAD BRICK, NJ 08723	NONE	PC	HOME RUNS FOR HEROES	2,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a** Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
VETGROUP INC. 103 N. MAIN ST. FORKED RIVER, NJ 08731	NONE	PC	HOME RUNS FOR HEROES	2,000.
VILLAGE RESOURCES INCORPORATED 200 MOTT ST. TRENTON, NJ 08611	NONE	PC	OCEAN COORDINATED ASSESSMENT PROGRAM	15,000.
VISITING HOMECARE SERVICE OF OCEAN COUNTY 105 SUNSET AVENUE TOMS RIVER, NJ 08755	NONE	PC	DEMENTIA SOCIAL DAY PROGRAM	15,000.
VISITING NURSE ASSOCIATION OF CENTRAL JERSEY COMM HEALTH CTR INC 806 FIFTH AVENUE ASBURY PARK, NJ 07712	NONE	PC	FREEHOLD FAMILY HEALTH CENTER	25,000.
VISITING NURSE ASSOCIATION OF CENTRAL JERSEY COMMUNITY SERVICES INC. 23 MAIN STREET, SUITE D1 HOLMDEL, NJ 07733	NONE	PC	ENHANCED INFECTION CONTROL, IN-HOME TESTING, PPE	5,000.
VOLUNTEER CENTER OF SOUTH JERSEY 1400 TANYARD ROAD SEWELL, NJ 08080	NONE	PC	GOLD SPONSORSHIP TASTE OF COMMUNITY	1,000.
VOLUNTEERS OF AMERICA INC 531 MARKET ST CAMDEN, NJ 08102	NONE	PC	COVID-19 RESPONSE & TRIAGE - SANITATION, STAFFING, SUPPLEMENTAL FOOD	5,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
WARREN GROVE VOLUNTEER FIRE CO. STA. 48 1475 MAIN STREET WARREN GROVE, NJ 08005	NONE	PC	ANNUAL DONATION	500.
WETLANDS INSTITUTE 1075 STONE HARBOR BLVD STONE HARBOR, NJ 08247	NONE	PC	SUMMER CELEBRATION	1,000.
WHEATON ARTS AND CULTURAL CENTER INC 1501 GLASSTOWN RD MILLVILLE, NJ 08332	NONE	PC	MARKETING PARTNER FOR THE FESTIVAL OF FINE CRAFT AT WHEATONARTS	5,000.
WRITE ON SPORTS INC PO BOX 833 WEST ORANGE, NJ 07076	NONE	PC	ASBURY PARK WRITE ON SPORTS CAMP	2,000.
YMCA OF GREATER MONMOUTH COUNTY 170 PATTERSON AVE. SHREWSBURY, NJ 07702	NONE	PC	ACTS OF KINDNESS	250.
YMCA OF GREATER MONMOUTH COUNTY 170 PATTERSON AVE. SHREWSBURY, NJ 07702	NONE	PC	SUMMER CAMP GRANT	5,000.
YMCA OF GREATER MONMOUTH COUNTY 170 PATTERSON AVE. SHREWSBURY, NJ 07702	NONE	PC	YMCA ACHIEVERS - CAREER PATHWAYS	15,000.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3a Grants and Contributions Paid During the Year**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
YMCA OF THE PINES 1303 STOKES RD. MEDFORD, NJ 08055	NONE	PC	SUMMER CAMP GRANT	2,500.
YOUNG AUDIENCES NEW JERSEY & EASTERN PENNSYLVANIA 200 FORRESTAL ROAD PRINCETON, NJ 08540	NONE	PC	WEST BELMAR ADOPT-A-SCHOOL	1,500.
YOUR GRANDMOTHER'S CUPBOARD 173A ROUTE 37 WEST TOMS RIVER, NJ 08755-8046	NONE	PC	MOBILE CUPBOARD/EMERGENCY ASSISTANCE PROGRAM	5,000.
YOUR GRANDMOTHER'S CUPBOARD 173A ROUTE 37 WEST TOMS RIVER, NJ 08755-8046	NONE	PC	ACTS OF KINDNESS	250.
ZERO - THE END OF PROSTATE CANCER 515 KING STREET, SUITE 420 ALEXANDRIA, NJ 22314	NONE	PC	GOLF OUTING	500.
ZZAK G. APPLAUD OUR KIDS FOUNDATION 37 CATALINA AVE P.O. BOX 994 BARNEGAT, NJ 08005	NONE	PC	SUMMER CAMP GRANT	2,250.
ZZAK G. APPLAUD OUR KIDS FOUNDATION 37 CATALINA AVE P.O. BOX 994 BARNEGAT, NJ 08005	NONE	PC	SPOTLIGHT SOIREE	2,500.
<b>Total from continuation sheets</b>				

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**Part XV** Supplementary Information (continued)**3b Grants and Contributions Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HANSEN FOUNDATION INC 4 E JIMMIE LEEDS RD STE 3 GALLOWAY, NJ 08205	NONE	PC	RENOVATION OF RALEIGH & TALLAHASSEE AVENUE RECOVERY RESIDENCES	25,000.
LUNCH BREAK 121 DRS. JAMES PARKER BOULEVARD RED BANK, NJ 07701-0902	NONE	PC	GENERAL OPERATING SUPPORT	10,000.
MONMOUTH MUSEUM AND CULTURAL CENTER PO BOX 359 LINCROFT, NJ 07738	NONE	PC	GENERAL SUPPORT	7,500.
VETGROUP INC 103 N MAIN ST. FORKED RIVER, NJ 07731	NONE	PC	NETWORK HOMELESS PREVENTION PROGRAM	20,000.
VISITING NURSE ASSOCIATION OF CENTRAL JERSEY COMM HEALTH CTR INC 23 MAIN STREET, SUITE D1 HOLMDEL, NJ 07733	NONE	PC	FREEHOLD FAMILY HEALTH CENTER	25,000.
<b>Total from continuation sheets</b>				87,500.

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**Underpayment of Estimated Tax by Corporations**

▶ Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123

**2020**▶ Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

Name

OCEANFIRST FOUNDATION

Employer identification number

22-3465454

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

**Part I Required Annual Payment**

1	Total tax (see instructions)	1	23,591.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b	
c	Credit for federal tax paid on fuels (see instructions)	2c	
d	Total. Add lines 2a through 2c	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty	3	23,591.
4	Enter the tax shown on the corporation's 2019 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	24,232.
5	Required annual payment. Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	23,591.

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 ☐ The corporation is using the adjusted seasonal installment method.
- 7 ☒ The corporation is using the annualized income installment method.
- 8 ☒ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

**Part III Figuring the Underpayment**

	(a)	(b)	(c)	(d)
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year. Filers with installments due on or after April 1, 2020, and before July 15, 2020, see instructions	g 07/15/20	07/15/20	09/15/20	12/15/20
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	4,294.	3,015.	8,118.
11 <b>Estimated tax paid or credited for each period.</b> For column (a) only, enter the amount from line 11 on line 15. See instructions	11 10,768.			5,000.
<b>Complete lines 12 through 18 of one column before going to the next column.</b>				
12 Enter amount, if any, from line 18 of the preceding column	12	10,768.	6,474.	3,459.
13 Add lines 11 and 12	13	10,768.	6,474.	8,459.
14 Add amounts on lines 16 and 17 of the preceding column	14			
15 Subtract line 14 from line 13. If zero or less, enter -0-	15 10,768.	10,768.	6,474.	8,459.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16	0.	0.	
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17			
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18 10,768.	6,474.	3,459.	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2020)



**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2020 and before 7/1/2020	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 5\% (0.05)}{366}$	22	\$	\$	\$
23 Number of days on line 20 after 6/30/2020 and before 10/1/2020	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\% (0.03)}{366}$	24	\$	\$	\$
25 Number of days on line 20 after 9/30/2020 and before 1/1/2021	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\% (0.03)}{366}$	26	\$	\$	\$
27 Number of days on line 20 after 12/31/2020 and before 4/1/2021	27			
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\% (0.03)}{365}$	28	\$	\$	\$
29 Number of days on line 20 after 3/31/2021 and before 7/1/2021	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30	\$	\$	\$
31 Number of days on line 20 after 6/30/2021 and before 10/1/2021	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32	\$	\$	\$
33 Number of days on line 20 after 9/30/2021 and before 1/1/2022	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34	\$	\$	\$
35 Number of days on line 20 after 12/31/2021 and before 3/16/2022	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$
38 <b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38	\$		0.

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.

Form 2220 (2020)

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K4H02R\_1

**Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method**

See instructions.

**Form 1120-S filers:** For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.**Part I Adjusted Seasonal Installment Method****Caution:** Use this method only if the base period percentage for any 6 consecutive months is at least 70%.  
See instructions.

	(a)	(b)	(c)	(d)
	First 3 months	First 5 months	First 8 months	First 11 months
1 Enter taxable income for the following periods.				
a Tax year beginning in 2017	1a			
b Tax year beginning in 2018	1b			
c Tax year beginning in 2019	1c			
2 Enter taxable income for each period for the tax year beginning in 2020. See the instructions for the treatment of extraordinary items	2			
3 Enter taxable income for the following periods.	First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2017	3a			
b Tax year beginning in 2018	3b			
c Tax year beginning in 2019	3c			
4 Divide the amount in each column on line 1a by the amount in column (d) on line 3a	4			
5 Divide the amount in each column on line 1b by the amount in column (d) on line 3b	5			
6 Divide the amount in each column on line 1c by the amount in column (d) on line 3c	6			
7 Add lines 4 through 6	7			
8 Divide line 7 by 3.0	8			
9a Divide line 2 by line 8	9a			
b Extraordinary items (see instructions)	9b			
c Add lines 9a and 9b	9c			
10 Figure the tax on the amt on ln 9c using the instr for Form 1120, Sch J, line 2, or comparable line of corp's return	10			
11a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a	11a			
b Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b	11b			
c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11c			
12 Add lines 11a through 11c	12			
13 Divide line 12 by 3.0	13			
14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d)	14			
15 Enter any alternative minimum tax (trusts only) for each payment period. See instructions	15			
16 Enter any other taxes for each payment period. See instr.	16			
17 Add lines 14 through 16	17			
18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	18			
19 Total tax after credits. Subtract line 18 from line 17. If zero or less, enter -0-	19			

**Part II Annualized Income Installment Method**

	(a)	(b)	(c)	(d)
	First <u>2</u> months	First <u>4</u> months	First <u>7</u> months	First <u>10</u> months
20 Annualization periods (see instructions)	20			
21 Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items	21	205,941.	408,970.	924,878.
22 Annualization amounts (see instructions)	22	6.000000	3.000000	1.714290
23a Annualized taxable income. Multiply line 21 by line 22	23a	617,823.	701,093.	1,109,854.
b Extraordinary items (see instructions)	23b			
c Add lines 23a and 23b	23c	617,823.	701,093.	1,109,854.
24 Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return	24	8,588.	9,745.	15,427.
25 Enter any alternative minimum tax (trusts only) for each payment period (see instructions)	25			
26 Enter any other taxes for each payment period. See instr.	26			
27 Total tax. Add lines 24 through 26	27	8,588.	9,745.	15,427.
28 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	28			
29 Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0-	29	8,588.	9,745.	15,427.
30 Applicable percentage	30	25%	50%	75%
31 Multiply line 29 by line 30	31	4,294.	7,309.	15,427.

**Part III Required Installments**

	1st installment	2nd installment	3rd installment	4th installment
<b>Note:</b> Complete lines 32 through 38 of one column before completing the next column.				
32 If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the <b>smaller</b> of the amounts in each column from line 19 or line 31	32	0.	4,294.	7,309.
33 Add the amounts in all preceding columns of line 38. See instructions	33		4,294.	7,309.
34 Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-	34		4,294.	3,015.
35 Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. <b>Note:</b> "Large corporations," see the instructions for line 10 for the amounts to enter	35	5,898.	5,898.	5,897.
36 Subtract line 38 of the preceding column from line 37 of the preceding column	36		5,898.	7,502.
37 Add lines 35 and 36	37	5,898.	11,796.	13,399.
38 Required installments. Enter the <b>smaller</b> of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions	38	0.	4,294.	3,015.

Form 2220 (2020)

\*\* ANNUALIZED INCOME INSTALLMENT METHOD USING OPTION 1

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## FORM 990-PF

## ACCOUNTING FEES

## STATEMENT 1

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONDON O'MEARA MCGINTY & DONNELLY LLP - AUDIT & TAX SERVICES	18,600.	4,650.		13,950.
TO FORM 990-PF, PG 1, LN 16B	18,600.	4,650.		13,950.

## FORM 990-PF

## OTHER PROFESSIONAL FEES

## STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ASG ADVISORS - STRATEGIC PLANNING	22,500.	0.		22,500.
TO FORM 990-PF, PG 1, LN 16C	22,500.	0.		22,500.

## FORM 990-PF

## TAXES

## STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	5,057.	0.		0.
TO FORM 990-PF, PG 1, LN 18	5,057.	0.		0.

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## FORM 990-PF

## OTHER EXPENSES

## STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SUPPLIES AND EQUIPMENT	7,285.	0.		7,285.
COMMUNICATIONS	1,393.	0.		1,393.
INSURANCE	5,806.	0.		5,806.
OTHER	10,541.	0.		10,541.
TECHNOLOGY	1,540.	0.		1,540.
SCHOLARSHIP PROGRAM	1,150.	0.		1,150.
MODEL CLASSROOM PROGRAM	5,000.	0.		5,000.
TO FORM 990-PF, PG 1, LN 23	32,715.	0.		32,715.

## FORM 990-PF

## CORPORATE STOCK

## STATEMENT 5

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
1,056,911 SHARES OCEANFIRST FINANCIAL CORP.	11,913,567.	19,690,252.
TOTAL TO FORM 990-PF, PART II, LINE 10B	11,913,567.	19,690,252.

## FORM 990-PF

## EXPLANATION CONCERNING PART VII-A, LINE 8B

## STATEMENT 6

## EXPLANATION

THE ATTORNEY GENERAL OF THE STATE OF NEW JERSEY DOES NOT REQUIRE THE SUBMISSION OF FORM 990-PF BECAUSE THE FOUNDATION DOES NOT SOLICIT CONTRIBUTIONS FROM NEW JERSEY RESIDENTS.

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FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 7

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CHRISTOPHER D. MAHER 975 HOOPER AVENUE TOMS RIVER, NJ 08753	PRESIDENT / CHAIRMAN 1.75	0.	0.	0.
MICHAEL J. FITZPATRICK 975 HOOPER AVENUE TOMS RIVER, NJ 08753	TREASURER 1.75	0.	0.	0.
KATHERINE B. DURANTE 975 HOOPER AVENUE TOMS RIVER, NJ 08753	SECRETARY / EXEC. DIR. 40.00	238,756.	23,301.	0.
JAMES BOLLERMAN 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
ANGELO CATANIA 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
ANTHONY COSCIA 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
MICHAEL D. DEVLIN 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
JACK M. FARRIS 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
JOHN R. GARBARINO 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
KIM GUADAGNO 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.

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JOSEPH M. KYRILLOS 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
REV. MSGR. CASIMIR H. LADZINSKI 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
JUDITH LEONE 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
JOHN K. LLOYD 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
DONALD E. MCLAUGHLIN, CPA 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
WILLIAM MOSS 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
JOSEPH M. MURPHY JR. 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
ROBERT A. PREVITI 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
DIANE RHINE 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
GRACE TORRES 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
GRACE VALLACCHI 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.
JOHN E. WALSH 975 HOOPER AVENUE TOMS RIVER, NJ 08753	DIRECTOR 1.75	0.	0.	0.

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DAVID WINTRODE  
975 HOOPER AVENUE  
TOMS RIVER, NJ 08753

DIRECTOR  
1.75

0. 0. 0.

DAVID W. WOLFE  
975 HOOPER AVENUE  
TOMS RIVER, NJ 08753

DIRECTOR  
1.75

0. 0. 0.

SAMUEL R. YOUNG  
975 HOOPER AVENUE  
TOMS RIVER, NJ 08753

DIRECTOR  
1.75

0. 0. 0.

ROBIN ZAGER  
975 HOOPER AVENUE  
TOMS RIVER, NJ 08753

DIRECTOR  
1.75

0. 0. 0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

238,756.

23,301.

0.

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FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT  
PART VII-B, LINE 5C

STATEMENT 8

GRANTEE'S NAMEGRANTEE'S ADDRESSGRANT AMOUNTDATE OF GRANTAMOUNT EXPENDEDPURPOSE OF GRANT

PLEASE REFER TO GRANTS AND CONTRIBUTIONS PAID DETAIL FOR GRANTS NOTED BY  
CODE: NC\*\* (501(C)(4)) -

DURING 2020, THE FOUNDATION HAS MADE CHARITABLE GRANTS CONSISTENT WITH THE  
FOUNDATION'S EXEMPT PURPOSE TO THE GRANTEE'S NOTED AS CODE NC\*\* (501(C)(4)  
ORGANIZATIONS). TO THE FOUNDATION'S KNOWLEDGE, NO PORTION OF THESE GRANTS  
HAVE BEEN DIVERTED FROM CHARITABLE PURPOSES AND NO FURTHER VERIFICATION IS  
REQUIRED, CONSISTENT WITH IRS 4945(H) & TREAS. REG. 53.4945-5(D).

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FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION  
PART XV, LINES 2A THROUGH 2D

STATEMENT 9

## NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

KATHERINE B. DURANTE, EXECUTIVE DIRECTOR  
975 HOOPER AVE.  
TOMS RIVER, NJ 08753

## TELEPHONE NUMBER

732-341-4676

## NAME OF GRANT PROGRAM

VISIT [WWW.OCEANFIRSTFDN.ORG](http://WWW.OCEANFIRSTFDN.ORG) FOR COMPLETE DETAILS  
REGARDING GRANT PROGRAMS

## EMAIL ADDRESS

INFO@OCEANFIRSTFDN.ORG

## FORM AND CONTENT OF APPLICATIONS

OCEANFIRST FOUNDATION CONCENTRATES ITS GRANT MAKING ON FOUR CORE PRIORITY AREAS: HEALTH AND WELLNESS, HOUSING, IMPROVING QUALITY OF LIFE AND YOUTH DEVELOPMENT AND EDUCATION. IN ADDITION, GRANTS ARE MADE TO SUPPORT EMERGING COMMUNITY NEEDS AND SPECIAL INITIATIVES CONSISTENT WITH THE PRIORITIES OF THE FOUNDATION. ALL ORGANIZATIONS THAT ARE INTERESTED IN APPLYING FOR A GRANT SHOULD CAREFULLY READ THE INFORMATION AVAILABLE ON THE WEBSITE ([WWW.OCEANFIRSTFDN.ORG](http://WWW.OCEANFIRSTFDN.ORG)) ABOUT THE FOUNDATION'S PROGRAMS AND PRIORITY AREAS.

IF YOUR ORGANIZATION IS SEEKING A GRANT, THE BEST PLACE TO START IS WITH A CALL TO THE FOUNDATION OFFICE TO DISCUSS YOUR PROGRAM OR PROJECT. THE FOUNDATION WILL ADVISE WHETHER YOUR REQUEST FITS WITHIN THE FOUNDATION'S GUIDELINES, IF IT MAKES SENSE FOR YOU TO APPLY, AND WHICH GRANT PROGRAM IS BEST FOR YOUR ORGANIZATION.

## ANY SUBMISSION DEADLINES

DEADLINES VARY FOR EACH FUNDING PROGRAM.

## RESTRICTIONS AND LIMITATIONS ON AWARDS

APPLICANTS MUST PROVIDE SERVICES WITHIN THE OCEANFIRST FOOTPRINT AND HAVE 501(C)(3) TAX EXEMPT STATUS WITH THE IRS. APPLICANTS SHOULD BE REGISTERED IN NEW JERSEY AS A CHARITY AND PERFORM A CERTIFIED ANNUAL AUDIT, IF REQUIRED. THE FOUNDATION CONFIRMS TAX-EXEMPT STATUS/NJ CHARITY REGISTRATION. FUNDING IS NOT PROVIDED FOR:

- INDIVIDUALS
- RESEARCH
- ORGANIZATIONS NOT EXEMPT UNDER IRC SECTION 501(C)(3)
- RELIGIOUS CONGREGATIONS
- POLITICAL CAUSES, CANDIDATES, ORGANIZATIONS OR CAMPAIGNS
- ORGANIZATIONS WHOSE PRIMARY PURPOSE IS TO INFLUENCE LEGISLATION
- SPORTS LEAGUES/TEAMS

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