

Alfiero & Lucia Palestro Foundation, Inc.

A Tax-Exempt Private Foundation
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ALFIERO & LUCIA PALESTRONI FOUNDATION GRANT APPLICATION

Use this format only to apply for a grant

1. Name of Organization: Kessler Foundation
2. Address of Headquarters Office: 120 Eagle Rock Avenue, Suite 100
East Hanover, NJ 07936-3147
3. Telephone: 973-324-8363
E-mail: development@kesslerfoundation.org
Website: KesslerFoundation.org
4. Date Organized: 1985
5. Date and Place of Incorporation: 1986, New Jersey
6. Federal Tax Exempt Status: Kessler Foundation is a 501c3 public charity
Please include IRS Code Determination and a Copy of IRS letter as Exhibit 1.
7. Staff Head
Name: Rodger DeRose
Title: President and CEO
Volunteer or Compensated: Compensated
Amount of Compensation/Benefits (if any): \$935,872
8. Staff Head
Name: _____
Title: _____
Volunteer or Compensated: _____
Amount of Compensation/Benefits (if any): _____
Kindly list Officer/Members or the Board of Directors with Compensation/Benefits (if any) if they serve as Management as Exhibit 2.

9. Chief Purpose of the Organization: With the support of donors like the Alfiero and Lucia Palestro Foundation, Kessler Foundation drives positive change for adults and children with disabilities. Our mission is twofold: We conduct groundbreaking rehabilitation and disability employment research, and we fund innovative initiatives to provide access to job opportunities.

Kessler Foundation scientists seek to improve cognition, mobility, and long-term outcomes, including employment, for adults and children with neurological and developmental disabilities of the brain and spinal cord--traumatic brain injury, spinal cord injury, stroke, MS, and autism. Our research helps people maximize recovery, independence, and inclusion. While our participants hail mainly from the New York/New Jersey metropolitan region, our research changes care throughout the world and our researchers are recognized nationally and internationally in neuroscience, neuropsychology, neurology, bioengineering, public health, and disability employment. Treatments developed at Kessler Foundation are used by rehabilitation professionals in the U.S., Canada, Europe, Australia, Asia, and South America.

Inclusion in the workplace is the primary focus of our grant funding, which helps people with disabilities find meaningful work and gain independence. Our grantmaking is grounded in the belief that people with disabilities have a right to pursue competitive, integrated employment and live with dignity within our communities. By focusing our funding on inclusion, equality, and ability rather than disability, Kessler Foundation has helped thousands across the U.S., including veterans, find meaningful work and gain independence.

Our tagline is "changing the lives of people with disabilities." Real change requires working across the lifecycle to ensure that individuals can overcome obstacles to full community participation. With a talented staff of over 180, governed by an astute and dedicated Board of Trustees, our diverse capabilities uniquely position us to address the challenges of this continuum and effect positive change.

10. Brief History of the Organization:

After World War II, renowned orthopedic surgeon Henry H. Kessler, MD, PhD, founded Kessler Institute for Rehabilitation, where he established a comprehensive program of rehabilitation aimed at helping people with disabilities regain function, rebuild their lives, and achieve maximum independence. For Dr. Kessler, successful rehabilitation encompassed physical recovery integrated with patient education, vocational rehabilitation, research, and specially trained personnel. Today, his vision is reflected in the work of Kessler Foundation, which was formed in 1985 to support Kessler Institute and its patients and has since evolved into an independent research and grantmaking organization focused on improving the lives of adults and children with disabilities.

11. Brief Description of the Organization's Programs in the Most Recent Year:

Please include descriptive materials, publications, etc. as Exhibit 3.

Our current collaborations with the foremost hospitals and universities across the country are critical to the success of our mission. Our collaboration with Kessler Institute for Rehabilitation and Rutgers New Jersey Medical School is integral to our designation as one of only 10 institutions in the U.S. to hold federally funded Model Systems in both traumatic brain injury and spinal cord injury. Collaborations with Veterans Administration hospitals include studies to improve caregiving for veterans with disabilities. Our partnership with the University of Louisville led to the opening of the Tim and Caroline Reynolds Center for Spinal Stimulation at Kessler Foundation, allowing our researchers to study and implement transcutaneous and epidural spinal stimulation, transforming the potential for recovery after spinal cord injury.

In the past year, we have launched many exciting new studies. Two are highlighted:

Programs to address the communication, learning, and behavioral differences of people on the autism spectrum and others with learning and thinking differences have traditionally focused on deficits--the skills they lack. With funding from the Alfiero and Lucia Palestro Foundation, we have developed a groundbreaking intervention that instead targets strengths. This is particularly significant for those seeking employment. Studies have shown that neurodiverse individuals have greater difficulty finding and maintaining jobs, which leads to frustration, less motivation, and a sense of failure. The Kesler Foundation Strength Identification and Expression is an innovative, positive-psychology approach that helps identify and build on individuals' unique skills and talents and provides training to perform well in job interviews and the workplace.

Aging is inevitable. But how we age is far less predictable. We are investigating a pioneering protocol to help older adults stay cognitively intact for as long as possible. The Kessler Foundation Modified Story Memory Technique uses context and imagery to reinforce learning and recall and is proven to improve cognitive performance in individuals with MS and brain injury. In a new study, our objective is to examine the impact of the protocol on learning and memory, daily function, and overall quality of life in older adults.

12. Names of Six Major Contributors:

Please include amount of support given by each last year.

1.	Peter's Yellow Submarine Trust	Amount	\$6,000,000
2.	Reynolds Foundation	Amount	\$2,000,000
3.	Craig H. Neilsen Foundation	Amount	\$883,285
4.	National Multiple Sclerosis Society	Amount	\$725,499
5.	Henry E. and Pauline S. Becker Foundation	Amount	\$640,000
6.	Pfizer	Amount	\$300,000

13. Three Most Important Needs for Funding by the Palestrooni Foundation and the amount you seek for each:

Please list in order of priority.

1. Youth around the world are experiencing a mental health crisis, especially during the transition to adulthood. This critical time is when individuals form meaningful peer relationships, seek employment, and gain independence from caregivers. Unfortunately, this transition is also a time when mental health can worsen, leading to academic failure, low employment, poor overall health, and suicidality. The COVID-19 pandemic has exacerbated already high rates of depression, anxiety, and suicide in adolescents, underlining a great need for post-pandemic interventions to address mental health.

Youth with disabilities—autism, ADHD, and learning differences—are more likely to experience poor mental health compared to their peers. Factors such as low self-esteem, bullying, and feeling isolated are likely to contribute.

Despite the need, research shows that youth with disabilities are less likely to receive or benefit from traditional mental health treatment. Mental health professionals often lack training in treating people with disabilities, and treatments are not properly designed or adapted to meet the unique needs of youth with autism, ADHD, and learning differences.

Further, traditional mental health treatments focus on reducing negative emotions, which may have limited effectiveness in those with disabilities. Conversely, teaching individuals to focus on positive emotions is an innovative approach that shows great benefit in other clinical populations but has not been well-studied in youth with disabilities.

It is our hope that the Alfiero and Lucia Palestrooni Foundation will provide 2025 and 2026 grants in the amount of \$127,000 a year—\$254,000 in total—to target positive mental health in transition-age youth with disabilities by developing and testing a novel intervention: INcreasing Strengths and Positivity to Improve REsilience, Mental Health and Emotions (INSPIRE-ME). The result will be: 1. a one-on-one intervention that can be delivered by therapists, 2. a classroom intervention that can be delivered by educators, and 3. an online training course to equip therapists and teachers to deliver the interventions.

This effort will build on the success of our recent partnership with the Palestrooni Foundation which resulted in the Kessler Foundation Strength Identification and Expression—KF-STRIDE® App. This smartphone app, available on the App Store and Google Play, provides accessible mental health support to young adults on the autism spectrum and those with other disabilities. KF-STRIDE is being used in several ongoing randomized clinical trials. INSPIRE-ME will use the KF-STRIDE smartphone app and its accompanying online web-based delivery platform. Importantly, INSPIRE-ME will be developed to be used both individually and in a classroom-based environment to increase accessibility and scalability.

A significant need for technology-based mental health treatments exists as they may reduce health disparities by being accessible to individuals with limited resources. Evidence shows that mental health conditions have a greater impact on individuals from underrepresented communities. Thus, the development of interventions that are accessible and scalable is imperative. With support from the Palestroni Foundation, we will recruit diverse participants to ensure that INSPIRE-ME can best suit the needs of the broader disability community. **Exhibit 8 contains more details, and we're happy to provide any additional information you might need.**

2. If a two-year commitment is not possible, it is our hope that the Alfiero and Lucia Palestroni Foundation will provide a grant of \$127,000 in 2025 to support the development of INSPIRE-ME's one-on-one intervention and accompanying online course for therapists.

3. Our third priority for consideration by the Alfiero and Lucia Palestroni Foundation is a grant of \$100,000 in 2025 to support the development of INSPIRE-ME's one-on-one intervention only.

14. Are Funds Donated to or Raised by the Organization Passed on to Other Charities?

If yes, please list the charities and the amounts given to each in the last two years.

Funds donated to or raised by Kessler Foundation exclusively support our internal research and operations. Our grantmaking, which funds innovative initiatives by other nonprofit organizations to improve employment for people with disabilities, is funded by investment income. Our most recent 990, attached, lists our grants.

15. Gross Income in 2023: \$33,534,975

Program Expense in 2023: \$25,951,901

Management and General Costs in 2023: \$7,234,521

Fund Raising Costs in 2023: \$907,435

16. Copy of the Most Recent Financial Audit or Year End Financial Report.

Please enclose as Exhibit 4.

17. Copy of the Most Recent IRS 990 and Schedule A.

Please enclose as Exhibit 5.

18. Copy of Current Budget.

Please enclose as Exhibit 6.

19. Copy of the Current Annual Report if available.

Please enclose as Exhibit 7.

*PLEASE ENCLOSE ANY OTHER DOCUMENTATION WHICH YOU FEEL WOULD BE OF
INTEREST AND/OR ASSISTANCE TO THE TRUSTEES AS EXHIBIT 8.*

AS TRUSTEES MEET THROUGHOUT THE YEAR TO CONSIDER GRANT
APPLICATIONS, WE ENCOURAGE YOU TO SEND THE COMPLETED FORMS AND
EXHIBITS AT YOUR EARLIEST CONVENIENCE.



Helping Young Adults with Disabilities by Increasing Positive Mental Wellbeing
Led by Helen M. Genova, PhD

Executive Summary

Youth around the world are experiencing a mental health crisis, especially during the transition to adulthood. This critical time is when individuals form meaningful peer relationships, seek employment, and gain independence from caregivers. Unfortunately, this transition is also a time when mental health can worsen, leading to academic failure, low employment, poor overall health, and suicidality. The COVID-19 pandemic has exacerbated already high rates of depression, anxiety, and suicide in adolescents, underlining a great need for post-pandemic interventions to address mental health.

Youth with disabilities—autism, ADHD, and learning differences—are more likely to experience poor mental health compared to their peers. Factors such as low self-esteem, bullying, and feeling isolated are likely to contribute.

Despite the need, research shows that youth with disabilities are less likely to receive or benefit from traditional mental health treatment. Mental health professionals often lack training in treating people with disabilities, and treatments are not properly designed or adapted to meet the unique needs of youth with autism, ADHD, and learning differences.

Further, traditional mental health treatments focus on reducing negative emotions, which may have limited effectiveness in those with disabilities. Conversely, teaching individuals to focus on positive emotions is an innovative approach that shows great benefit in other clinical populations but has not been well-studied in youth with disabilities.

It is our hope that the Alfiero and Lucia Palestro Foundation will provide 2025 and 2026 grants in the amount of \$127,000 a year—\$254,000 in total—to target positive mental health in transition-age youth with disabilities by developing and testing a novel intervention: INcreasing Strengths and Positivity to Improve REsilience, Mental Health and Emotions (INSPIRE-ME). The result will be: 1. a one-on-one intervention that can be delivered by therapists, 2. a classroom intervention that can be delivered by educators, and 3. an online training course to equip therapists and teachers to deliver the interventions.

This effort will build on the success of our recent partnership with the Palestro Foundation which resulted in the Kessler Foundation Strength Identification and Expression—KF-STRIDE® App. This smartphone app, available on the App Store and Google Play, provides accessible mental health support to young adults on the autism spectrum and those with other disabilities. KF-STRIDE is being used in several ongoing randomized clinical trials. INSPIRE-ME will use the KF-STRIDE smartphone app and its accompanying online web-based delivery platform. Importantly, INSPIRE-ME will be developed to be used both individually and in a classroom-based environment to increase accessibility and scalability.

A significant need for technology-based mental health treatments exists as they may reduce health disparities by being accessible to individuals with limited resources. Evidence shows that mental health conditions have a greater impact on individuals from underrepresented communities. Thus, the development of interventions that are accessible and scalable is



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imperative. With support from the Palestro Foundation, we will recruit diverse participants to ensure that INSPIRE-ME can best suit the needs of the broader disability community.

Your Impact

We aim to evaluate the impact of INSPIRE-ME on resilience, mental health, and emotions by increasing awareness and usage of strengths while also increasing positive emotions. The proposed INSPIRE-ME program is a multi-component, theory- and evidence-based behavioral intervention grounded in two main ideologies:

First, INSPIRE-ME is based on the science of positive psychology that shows knowing and using personal strengths is tied to increased positive emotions, resilience, and coping across populations.

Second, the interventional framework of INSPIRE-ME is based on the Broaden and Build Theory developed by leading positive psychologist Barbara Fredrickson, PhD. The theory asserts that discrete positive emotions (i.e., joy, contentment, pride) lead to increased positive thoughts and activities, resulting in increased resilience and coping in daily life and during times of adversity.

With support from the Palestro Foundation, we will:

1. Develop the initial prototype of the INSPIRE-ME program.
2. Evaluate its acceptability, usability, and feasibility.

Once the development and initial evaluation of INSPIRE-ME is complete, our long-term goal would be to scale up and implement INSPIRE-ME in various community settings including clinics, schools, and homes. The data gathered and lessons learned will inform future applications to state and federal funders including large-scale randomized controlled trials.

The Need

Several traditional approaches in mental healthcare have been used in youth with disabilities, with differing levels of effectiveness. Two common approaches include psychotherapy or medications, reviewed here.

Cognitive Behavioral Therapy (CBT) is one of the most well-studied psychotherapeutic treatments. However, CBT requires a highly skilled and trained therapist, which automatically limits its accessibility. Many therapists report hesitance to perform CBT on people with disabilities either due to a lack of training or because they are unaware of how to adapt CBT to youth with disabilities.

Pharmacological treatments are often used in youth with disabilities to treat depression and anxiety, more so than other types of treatments. Common medications used include antipsychotics, antidepressants, benzodiazepines, and sedatives. Although useful, certain medications such as benzodiazepines can have significant side effects, including dependence,



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rebound anxiety and aggression, and memory impairment. While pharmacological interventions can be critical for some, exploring non-pharmacological treatments is an important goal.

An Innovative Approach

While traditional mental health treatments target the reduction of negative emotions, such as sadness, fear, depression, and anxiety, behavioral interventions that increase *positive emotions*—joy, pride, contentment, and enthusiasm—are a valuable addition to the milieu of mental health therapy as they improve positive emotional health, resilience, and mental well-being. Positive emotions are uniquely associated with better psychological and physical health outcomes across clinical populations and healthy individuals. High levels of positive well-being, specifically in young adults, are associated with greater academic achievement, higher quality social relationships, and better physical health. Thus, interventions aimed at improving positivity are important for a person's overall well-being and health.

With funding from the Palestro Foundation, we will develop an accessible web and app-based positive mental health treatment. INSPIRE-ME will be created specifically for youth with disabilities to be delivered online (either in a one-on-one or classroom-based setting) so that is accessible to those who have traditionally been underserved and does not require a highly trained therapist. While it is not meant to replace traditional approaches to mental health, INSPIRE-ME represents an innovative approach because it is focused on improving positive mental well-being. It can be used in combination with traditional psychotherapeutic and pharmacologic treatments.

INSPIRE-ME will empower youth with disabilities to harness their positive traits to cultivate emotional wellness and improve resilience. INSPIRE-ME will be delivered online. Web-based interventions are becoming increasingly appealing as they deliver high-quality content in a system that is convenient, accessible, scalable, and at low cost.

INSPIRE-ME will have 8, bi-weekly, 60-minute sessions led by an INSPIRE-ME *Guide* (trained staff member). Sessions will include videos, activities, and quizzes presented on a website. Videos will feature didactic content presented by an animated character. Trainees will answer self-reflective questions about the content and perform mindfulness activities to increase attention to the material.



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Summary of proposed INSPIRE lessons

Lessons	Theme	Activity
1	Aware	<ul style="list-style-type: none">Lesson on character strengths and meaningValues in Action Inventory of Strengths (VIA-IS)Strength-Spotting Homework via app
2	Explore	<ul style="list-style-type: none">Explore ways strengths have been used in the pastAnswer contemplative questions about strength use
3-4	Apply	<ul style="list-style-type: none">Create "strength-strategies" to be used as either coping mechanisms or ways to cultivate wellnessSetting goals to use strengths
5	Gratitude	<ul style="list-style-type: none">Introduce concept of gratitude and how it relates to positive feelingsInstructions on keeping gratitude journal
6	Savoring	<ul style="list-style-type: none">Introduce the idea of savoring positive momentsUsing mindfulness to savor
7	Check In	<ul style="list-style-type: none">Discussion on "what went well" (i.e. how are positive emotions increasing? how are strengths being used?)Discuss things situations in which they could increase their skill use
8	Review	<ul style="list-style-type: none">Review all skills learnedSet goals for future

An Evidence-Based Interventional Framework

INSPIRE-ME Goal 1: Learning about Character Strengths The first goal of INSPIRE-ME will be to help transition-age youth with disabilities identify their personal strengths using a positive psychology framework, and then use those strengths in everyday life. This goal was inspired by the field of Positive Psychology which focuses on the cultivation of what a person *can do*, as opposed to fixing what a person cannot do. One of the most well-established tenets of Positive Psychology is the study of **character strengths**, 24 traits that every individual expresses in differing degrees (see Figure 1). Every character strength is a positive trait and is “universally valued” across cultures and contexts. Further, character strengths are beneficial not only to the individual but also to society. Having universal value and societal benefit make character strength



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identification a highly appropriate interventional goal for transition-age youth as others (parents, teachers, employers, friends) will find these strengths valuable across multiple contexts.

Figure 1. 24 Character Strengths

- | | | |
|--|---|--|
| <ul style="list-style-type: none">• Creativity• Curiosity• Judgement• Love of Learning• Perspective• Bravery• Honesty• Perseverance | <ul style="list-style-type: none">• Zest• Kindness• Love• Social Intelligence• Fairness• Leadership• Teamwork• Forgiveness | <ul style="list-style-type: none">• Humility• Prudence• Self-regulation• Appreciation of Beauty• Gratitude• Hope• Humor• Spirituality |
|--|---|--|

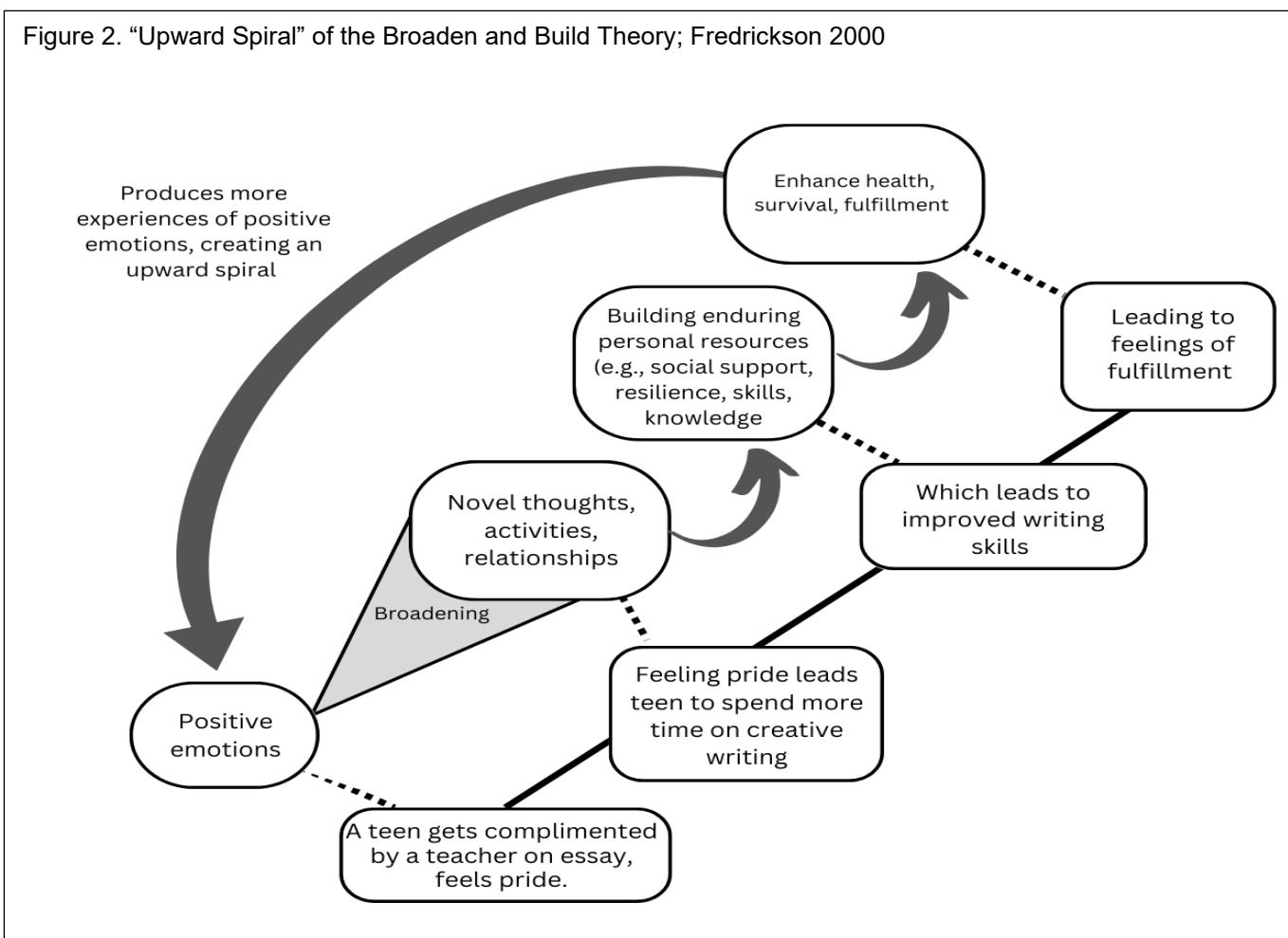
In INSPIRE-ME, users will identify their personal character strengths based on the *Aware-Explore-Apply* framework of published character strength interventions. All users will take a validated assessment of character strengths to identify their personal character strengths (*Aware*). Participants will identify when they used those strengths before (*Explore*) and then create coping strategies in which they may use their strengths—in times of stress or to cultivate happiness—(*Apply*). Two main skills will be taught throughout: 1) “strength spotting” which involves noting when strengths are used in daily life (i.e. *“I used my strength of creativity today when I tried a new recipe.”*) and, 2) “strength strategies” which involves using strengths specifically in times of stress to cope with adversity (i.e. *“I will use my strength of creativity to think outside the box and try a new approach when I’m faced with a problem.”*) Both “strength spotting” and “strength strategies” are popular tools used in positive psychology to increase the use of strengths. Mounting evidence indicates that character strength identification has significant clinical benefits, including improved mood, life satisfaction, and well-being, and it has been used in employment and school settings in the general population. In a recent study of adolescents at a psychiatric care facility, usage of “strength strategies” led to improved self-esteem and self-efficacy.

INSPIRE-ME Goal 2: Increasing Positive Emotions The second goal of INSPIRE-ME is to increase positive emotions by performing activities that increase attention to positive events and feelings. This goal is based on the *Broaden and Build Theory*, which asserts that discrete positive emotions (i.e., pride, joy, contentment, enthusiasm) broaden one’s participation in positive thoughts and activities, which furthers the building of one’s positive resources. As a result, there are increased feelings of fulfillment, which lead back to more positive emotions. This “upward spiral” of positive events can be illustrated in this example (see Figure 2): a teenager gets complimented by a teacher on his writing skills, which leads to a positive emotion of pride. Feeling pride leads the teen to spend more time on his creative writing (increased participation in an activity), which leads to improved writing skills (increased positive resources), leading to feelings of fulfillment (the teen begins to see writing as a pleasurable activity) which



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leads to additional positive emotions, causing the spiral to begin again.



In INSPIRE-ME, trainees will complete a gratitude journal, a daily list of three to five things for which they are grateful. Gratitude journal interventions have been shown to lead to improvements in several outcomes including life satisfaction, happiness, well-being, and self-esteem as well as reductions in negative emotions, depression, and repetitive negative thoughts. In addition to gratitude journaling, trainees will be taught to "savor" which refers to deliberate attention to in-the-moment positive feelings. Correlational and experimental studies have shown that savoring is linked to more frequent and more intense positive emotions.

A Web-Based Tool with Content Delivered via Animation:

INSPIRE-ME is a web-based intervention in which content is delivered through text, animated videos, and interactive activities. Web-based interventions are becoming increasingly appealing as they deliver high-quality content in a system that is convenient, accessible, scalable, and low-



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cost. Low cost, for example, may make a web-based intervention an attractive option to someone for whom a therapist is inaccessible due to limited financial resources. Recently, demands for web- or app-based mental health tools have increased as they are considered highly effective and accessible to transition-age youth. INSPIRE-ME consists of lessons that present videos of an animated character (see Figure 3) who delivers the content to the users. The content is interactive: self-reflective questions are posed to the user followed by a red “pause” button and chime indicating it is time to pause the video and answer a question.

Figure 3. Animated Character in INSPIRE: A. teaching a lesson about strengths, B. asking a self-reflective button for trainee to answer upon seeing red “pause button” in lower right corner

A.



B.



Homework Delivered by an App-based Design

A critical part of the INSPIRE-ME intervention is the completion of homework between lessons. The KF-STRIDE App, funded by the Palestro Foundation, lets trainees perform “strength-spotting” and use “strength strategies”. The app sends daily reminders to trainees to complete the journal. The benefit of a smartphone app is that transition-age youth often have phones with them, making homework completion more feasible in this population.

Mindfulness Incorporated Throughout to Attend to Positive Events

INSPIRE-ME will use mindfulness techniques to increase attention to the events of the lesson. Mindfulness is commonly used to increase experiential awareness. Mindfulness is defined as the “nonelaborative, nonjudgmental, present-centered awareness in which each thought, feeling, or sensation that arises in the attentional field is acknowledged and accepted as it is” and can be cultivated with practice. As opposed to “mindlessness,” in which one is less aware of emotions, mindfulness involves awareness of how thoughts and feelings arise in the present moment. Studies have shown that mindfulness is effective; the PI’s own work indicates that children with autism who participated in a mindfulness program at their school showed marked improvements in cognitive functioning. Therefore, we feel that incorporating mindfulness into the INSPIRE-ME program will be well-accepted. Additionally, mindfulness will help participants



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attend more fully to the lesson material and positive activities critical to activities like “savoring”. The mindfulness activities included throughout will be “attending to breathing”, a mindfulness technique to increase body awareness and focus the mind on the present moment to reduce mind wandering. Important activities will be preceded by three to five “mindful breaths”.

Support Coach: The INSPIRE Guide:

INSPIRE-ME uses several methods to maximize adherence, including the incorporation of Social Cognitive Theory (SCT) principles to increase sustainable behaviors. One primary SCT strategy is supportive accountability, which refers to improving behavioral program adherence through human support from a coach/therapist. This will be accomplished by the involvement of an *INSPIRE Guide* who works with the trainee. The *INSPIRE Guide*’s role will include (1) establishment of a reciprocal trusting relationship between trainee and guide; (2) with support from the guide, participants play an active role in training as a means to increase intrinsic motivation; (3) presence of the guide focuses on tracking adherence for accountability; (4) holding the trainee accountable for non-adherence; and (5) providing encouragement. The *INSPIRE Guide* is meant to be a supportive individual who helps the trainee by navigating the INSPIRE-ME web-based program. Importantly, the role of the *Guide* is *not to deliver the content*, as this would require advanced training, thus reducing accessibility by increasing burden. Rather, the *Guide* holds the trainee accountable by being present at all sessions and providing standardized guidance to the trainee.

Accessible and Scalable Tool

While many individuals with disabilities can have trouble accessing mental healthcare treatment, evidence suggests that minority youth with disabilities may face even more severe challenges in accessing treatment.

We will seek solutions to address this disparity in several ways. Our existing strategic partnerships with organizations that serve youth with disabilities from underrepresented communities will enable us to recruit a diverse sample of transition-age youth to ensure our results are representative of a broader disability community.

2024 Kessler Foundation Board of Trustees (Volunteer)

Michael P. Davis, Philanthropist

Rodger L. DeRose, President and CEO, Kessler Foundation

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John M. Germain, Managing Partner, NT Hegeman Co., LLC

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Diane Zezza, Senior Vice President, Head of Regulatory Affairs CMC Global Drug Development, Novartis Pharmaceuticals Corp.

KESSLER FOUNDATION

2024
Approved
Budget

OPERATING INCOME:

Donations	\$ 2,915
Special events gross income:	
Stroll 'N Roll	185
Less Stroll 'N Roll & Other Costs	(50)
Net income from events	<u>135</u>
Total Income from Development	<u>3,050</u>
Income from Scans in RONIC	240
Income from external grants - ongoing	<u>13,293</u>
Total Income from Grants	<u>13,533</u>
Miscellaneous income	50
SUBTOTAL - Income from Operations	<u>16,633</u>
 SPENDING RATE DRAWDOWN	 4.97%
Budget Amount	12,570
Tim Reynolds	3,300
 TOTAL INCOME	 <u>\$ 32,503</u>

OPERATING EXPENSES:

Missions:

Internal Support for Research	\$ 10,443
Externally Funded Research	11,090
Tim Reynolds	3,300
Support for PM&R Chair	50
Grants made for Employment & Other	750
Program Center	322
Total Missions	<u>25,955</u>

Fundraising:

Development costs	860
Total Fundraising	<u>860</u>

Administrative:

Communications	917
IT	1,610
Human Resources	508
Finance	423
Administration	2,230
Total Administrative	<u>5,688</u>
TOTAL OPERATING EXPENSES	<u>32,503</u>
NET OPERATING INCOME	<u>\$ -</u>

2024 IMPACT REPORT



you transform the landscape of **what's possible**



in this age of instant gratification, we often forget the time and commitment it takes for ideas—the seeds of innovation, transformation, and equity—to take root. Growth is measured in small increments and may not be visible for months or even years. But be assured that donors like you are impacting our work every day.

With your support, we are expanding the science and understanding of traumatic brain injury, spinal cord injury, stroke, MS, autism, and other neurological and developmental disabilities—leading to improved care, outcomes, and employment.



Rodger DeRose
President and CEO

A blue ink signature of Rodger DeRose's name.

A blue ink signature of Michele Pignatello's name.

Michele Pignatello
Vice President and Chief Development Officer

WHAT'S INSIDE:

Your generous support gives **life** to our work... and **hope** to our communities.



stimulus plan

Thanks to your support, research at the Tim and Caroline Reynolds Center for Spinal Stimulation is transforming the potential for recovery after spinal cord injury.

To date, more than 70 individuals with paralysis have contributed to the steady progress at Kessler Foundation's Reynolds Center. Alexa Alvarez, is one of them.

Diagnosed at age 21 with acute transverse myelitis, a rare, nontraumatic cause of spinal cord injury, Alexa was able to regain some upper body function through extensive rehabilitation. In 2022, she had an epidural stimulator—a device that sends electrical impulses to the spine—surgically implanted at the University of Louisville, a close collaborator of Kessler Foundation.

Now living in New York, Alexa travels to the Reynolds Center several days a week to participate in epidural stimulation research. She and others use a specialized software technology that expands the capabilities of the implanted stimulator.

Over the last several years, Kessler Foundation, the University of Louisville, Johns Hopkins Applied Physics Laboratory, and Medtronic have joined together to develop and update this technology—STIM 1.0 followed by STIM 2.0—both FDA-approved and specifically designed for people with spinal cord injury.

"STIM 1.0 improves function by reawakening the spinal cord's ability to send impulses to paralyzed muscles. STIM 2.0 added voice control, the ability to improve several physiological systems simultaneously, and a remote monitoring feature that allows researchers to follow people at home and in the community," explains Gail Forrest, PhD, director of the Reynolds Center and associate director of the Center for Mobility and Rehabilitation Engineering Research at Kessler Foundation.

The collaborative team made national news in March 2024, winning a major award for breakthrough neuromodulation research from the National Institutes of Health.



The team is developing a device to enable a person with an implanted stimulator to regain control over bladder, blood pressure, breathing, and limbs, reports Dr. Gail Forrest.

Gaining recognition

The collaborative team made national news in March 2024, winning a major award for breakthrough neuromodulation research from the National Institutes of Health.

Building on their earlier work, they proposed the development of a sophisticated tablet-type controller called STIMXS. Through targeted stimulation, STIMXS will enable a person with an implanted stimulator to regain control over their bladder, blood pressure, breathing, and limbs.

The team is one of only four semi-finalists chosen to compete for the final grand prize, which will be announced later this year. "We would not have achieved this milestone without the ongoing support of Tim and Caroline Reynolds and other generous donors," remarks Dr. Forrest. ☀

Added expertise

Internationally recognized research scientists Claudia Angeli, PhD, and Enrico Rejc, PhD, joined the Reynolds Center's staff in 2023.

"Their knowledge and experience in spinal stimulation broadens the Center's neuro-modulation research, helping advance the capacity to restore motor and autonomic function and improve outcomes for individuals with spinal cord injury," notes Steven Kirshblum, MD, co-director of the Reynolds Center and chief medical officer at Kessler Foundation and Kessler Institute for Rehabilitation. ☀



game ON

Virtual reality plays a role in stroke recovery at home, even years later, thanks to donors like you.



4

Virtual game, real gains

Seven years ago, teacher Maria Martin had a devastating stroke. With the support of her husband Peter, she's come a long way, working hard to overcome challenges and volunteering to participate in research.

therapy that is fun and engaging motivates patients to actively participate in rehabilitation and speeds their recovery. Using virtual reality and game-based activities—and with the generosity of many donors including Terri and Michael Goldberg and the Wallerstein Foundation for Geriatric Life Improvement—scientists in the Center for Stroke Rehabilitation Research are expanding treatment options and developing ways to make them available beyond the rehabilitation clinic.

Peii Chen, PhD, senior research scientist, leads studies aimed at developing effective home-based treatment for the disabling symptoms of spatial neglect, a common, but under-recognized complication of stroke and brain injury. Often unaware of this condition, individuals with spatial neglect experience a range of difficulties that hinder recovery, limit independence, and jeopardize safety.

"Immersive virtual reality provides the intensive therapy needed to restore function," explains Dr. Chen.

Maria admits she is hooked on virtual reality. Wearing a headset, she completes tasks much like a gamer competing for points in a video game. "The games are challenging but fun. I can see how people like me could benefit from this therapy."

Peter adds, "Everyone in our life is raving about how well Maria is doing. They almost take for granted what she can do now. I can't thank Dr. Chen enough for helping us incorporate

practices from the games into our routine. We're combating the neglect. It's incredible."

Dr. Chen notes, "Although it has been years since her stroke, gains are still possible. That's why we are working



Dr. Peii Chen focuses on virtual reality game technology to improve spatial neglect.

Wearing a virtual reality headset, participants perform game-like activities under the direction of a therapist. The activities are designed to improve performance over a 15-session, five-week course. The therapist travels to participants' homes for each session, bringing a laptop computer, virtual reality headset, and a Wi-Fi hotspot.

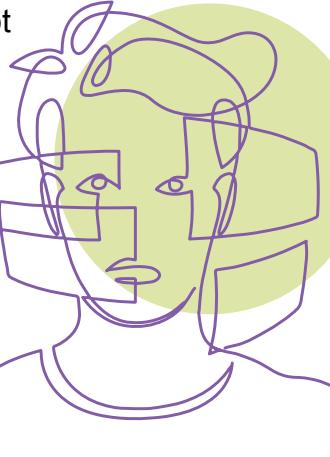
"The equipment is portable," Dr. Chen notes, "because the common goal of all our studies is to transition therapy to home."

Thanks to support from the Sea Grape Foundation, the development of a tele-rehab system is underway. The system will eliminate the need to travel to patients' homes and allow access from any location. "Tele-rehab has the potential to transform the delivery of rehabilitative care," Dr. Chen predicts.

A team effort

The success of home-based therapy for spatial neglect depends on the support of family caregivers. To actively engage them, the Center's stroke team has developed a manual that provides step-by-step guidance for working with their family members on tasks to improve symptoms of spatial neglect. Research shows that caring for family members with spatial neglect is especially stressful.

"Engaging caregivers in rehabilitation may not only improve patient outcomes but the quality of life for caregivers as well," says Dr. Chen. 



5

YOUR IMPACT: EASING THE JOURNEY

course correction

Your support launches a transformative program for those living with spinal cord injury.

Navigating life after a spinal cord injury (SCI) can be daunting.

Dr. Denise Fyffe, above, and Dr. Jeanne Zanca, right, are redefining the post-injury continuum of care.



Individuals and their families are overwhelmed with information, difficult decisions, and an uncertain future—all while dealing with the physical and emotional impact of a life-altering injury.

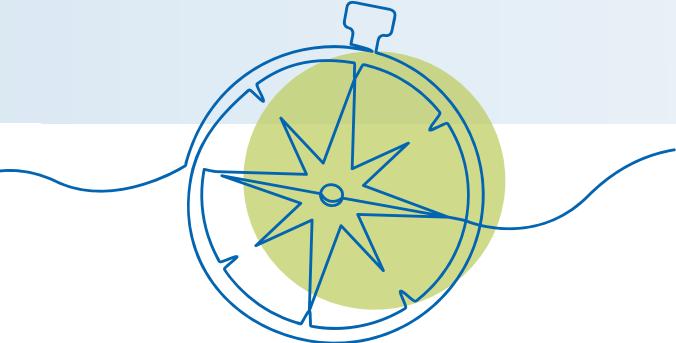
Two complementary, multi-faceted new programs from the Center for Spinal Cord Injury Research at Kessler Foundation offer a comprehensive roadmap to overcome these challenges and empower individuals with SCI to rebuild their lives.

From hospital to home

Through an integrated program of outreach and education, individuals with SCI receive support and guidance to successfully navigate from hospital to home and optimize their outcomes.

"Providing educational and supportive resources at the onset of injury is key to our **SCI Rehabilitation Transition Program**," says Denise Fyffe, PhD, senior research scientist at the Centers for Spinal Cord Injury Research and Outcomes and Assessment Research at Kessler Foundation. "A team of SCI Navigators will work closely with clinicians at University Hospital to help patients and their families transition to a rehabilitation facility."

This unique model also allows the SCI Navigators to follow people with SCI and their families as they adjust to living at home. They will provide resources to facilitate home modifications, access transportation, schedule outpatient rehabilitation, and address health insurance and financial challenges.



Experience guides the way

John McAleavey has lived with a spinal cord injury for 32 years. While thriving today, he vividly remembers his early struggles.

"The worst day of my life was the day I was injured. But returning home after my hospital and rehabilitation stays was another day I will never forget. It simply opened up a range of issues my family and I were not prepared for."

These days, in addition to being a podcaster and an SCI peer counselor, John is helping to guide the new **SCI Rehabilitation Transition and Caregiving Skills and Support Programs**. As a member of the steering committee, he shares his insights on navigating the myriad complex challenges that come with SCI.

"Because of donors like you, these programs increase understanding, ease fears, and provide much-needed resources," says John.

"Your support is appreciated more than you know." ☺

Listen to John's podcasts at QuadCast.com

John McAleavey, with his canine companion YoKen, is lending his voice to improve life after SCI.



proof positive



YOUR IMPACT: TARGETING STRENGTHS

With your support, a novel approach to neurodiversity aims to leverage strengths.

Programs to address the learning, communication, and behavioral differences of people on the autism spectrum traditionally have focused on their deficits—the skills they lack. Thanks to your generosity, researchers at the Center for Autism Research at Kessler Foundation have developed a groundbreaking intervention that instead targets the strengths and abilities of neurodiverse adolescents and young adults.

This is particularly significant for those seeking employment. Studies have shown that neurodiverse individuals have greater difficulty finding and maintaining jobs, which leads to frustration, less motivation, and a sense of failure.

Going to the plus side

To combat this negative cycle, Helen M. Genova, PhD, associate director, Center for Autism Research, developed Kessler Foundation **STRength IDentification and Expression—KF-STRIDE®**—an innovative, positive-psychology approach that helps identify and build on individuals' unique skills and talents and provides training to perform well in job interviews and the workplace.

"Preliminary findings have shown KF-STRIDE effective in preparing transition-age autistic youth for work opportunities. Study participants learned to recognize their strengths and convey them appropriately in an interview setting. They also demonstrated greater confidence and self-awareness," explains Dr. Genova.

Expanding access

The next step is to make this tool available to the autism community through a partnership with Spectrum-Works, a New Jersey-based organization

The Bianchino family sees research as the gateway to new opportunities for their daughter Kira and all neurodiverse individuals.

committed to building a more neurodiverse workforce.

Equally important is Kessler Foundation's partnership with Understood.org's NeuroEquity Research Collaborative, a consortium of thought leaders and experts in neurodivergence. The group is working to advance understanding of neurodiversity and create a research base for a social and structural shift toward equity and inclusion. This partnership is funding the expansion of Dr. Genova's research to youths with learning and thinking differences such as ADHD and dyslexia.

"None of this would be possible without the generous support of our donors. Together, we're making great strides in helping neurodiverse individuals achieve independence," says Dr. Genova.



Bridging perspectives

Inspired by their daughter Kira and her journey on the autism spectrum, Melissa and Tony Bianchino are dedicated members of the Center for Autism Research's Community Advisory Board. They see it as a vital bridge between the research community and families, driving impactful change.

"The collaboration between Dr. Genova and her team is invaluable, ensuring that research is informed by lived experiences and diverse perspectives," Melissa shares.

Melissa and Tony are tireless advocates not only for their daughter but the entire community. *"So many have immense talent and a strong desire to do more, yet haven't been given the opportunity. This line of research makes that possible, and we are so proud to be a part of it."*

A major step forward

Racquel Porter, a charter school paraprofessional, survived a stroke last year. "It was life-changing," Racquel says, "but it's my nature to stay positive." During her inpatient rehabilitation stay at Kessler Institute

for Rehabilitation, she volunteered for Dr. Nolan's robotics study.

Paralyzed on one side, Racquel had to relearn to walk. "The exoskeleton was exciting. Every day,

I accomplished something different. I could see improvement."

At discharge, Racquel walked to her van for the ride home. "My children encouraged me to come to Kessler and I'm grateful I did. The research at Kessler Foundation helped me start over."

YOUR IMPACT: ADVANCING MOBILITY

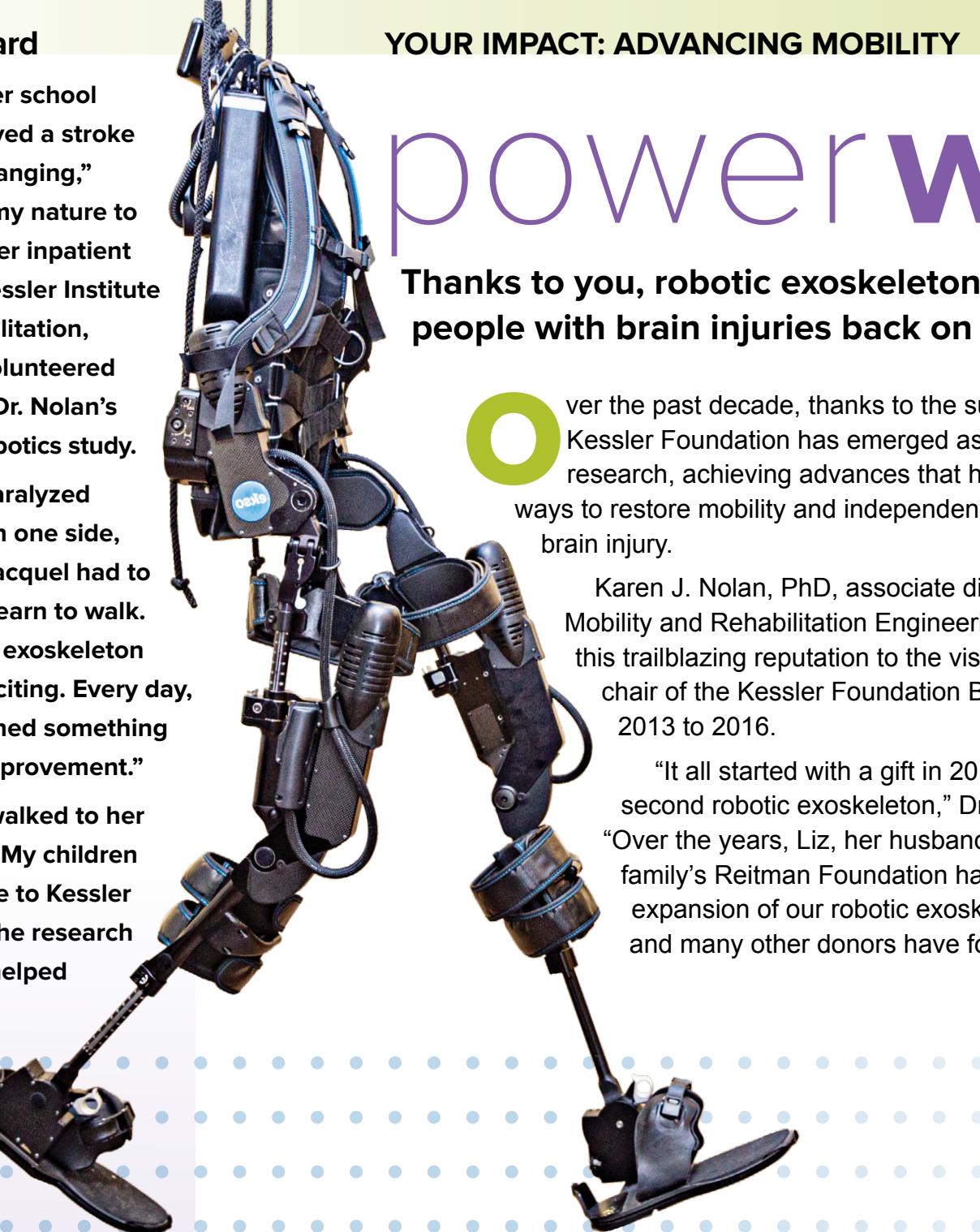
powerwalk

Thanks to you, robotic exoskeletons are getting people with brain injuries back on their feet.

Over the past decade, thanks to the support of many donors, Kessler Foundation has emerged as a leader in robotics research, achieving advances that have established new ways to restore mobility and independence after stroke and brain injury.

Karen J. Nolan, PhD, associate director of the Center for Mobility and Rehabilitation Engineering Research, credits this trailblazing reputation to the vision of Liz Lowenstein, chair of the Kessler Foundation Board of Trustees from 2013 to 2016.

"It all started with a gift in 2014 to purchase a second robotic exoskeleton," Dr. Nolan recalls. "Over the years, Liz, her husband David, and her family's Reitman Foundation have supported the expansion of our robotic exoskeleton research, and many other donors have followed suit."



This has enhanced opportunities to collaborate with industry leaders and device manufacturers to investigate new exoskeleton technology. Using Kessler Foundation's research data, several devices gained FDA clearance. "It is rewarding to work in a place that not only conducts life-changing research for patients but also provides feedback to the industry to improve technology for better outcomes," remarks Dr. Nolan.

Early successes paved the way for additional funding and greater progress, culminating in a large federal grant for the first clinical trial of exoskeletons in adults with acute stroke, a large and growing population in need of new avenues for rehabilitation. Inpatients at Kessler Institute for Rehabilitation

are eligible for the study, which entails intensive, repetitive training in the exoskeleton. "We believe that intervening soon after stroke using the exoskeleton to retrain the individual's gait will contribute to faster and more complete recovery," says Dr. Nolan.

More than just another clinical trial, the study marks a fundamental shift in treatment protocols. Because of your generosity, robotic exoskeletons are on the way to becoming a standard of care for the rehabilitation of mobility deficits after stroke and brain injury.



Dr. Karen J. Nolan sees robotic research opening new ways to maximize recovery and perhaps even rewire the brain.

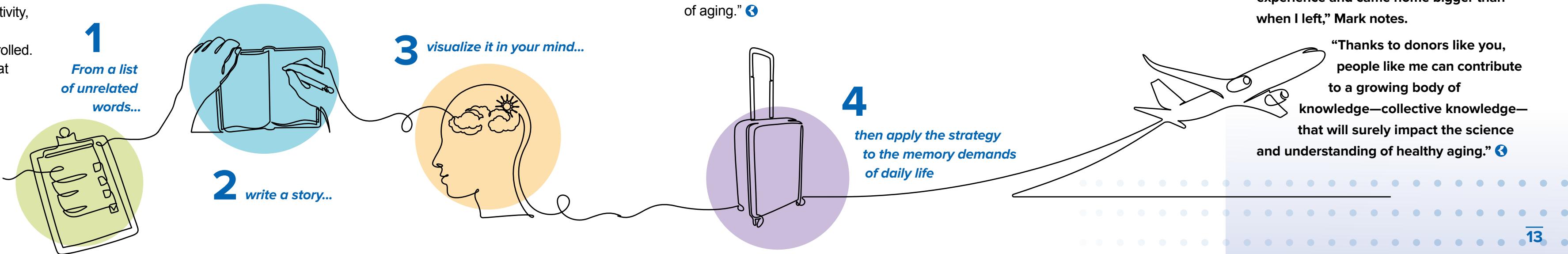
braintraining

How can cognitive function be preserved as we get older? Your generosity extends a pioneering memory protocol to a new community.



Aging is inevitable. But how we age is far less predictable. Certainly, having “good” genes helps. Apart from that, the medical community suggests a healthy lifestyle may be beneficial. This includes a well-balanced diet, exercise, social activity, and minimizing stress, smoking, and alcohol use—all of which can be controlled. Less so are injuries and illnesses that may adversely impact physical and cognitive functioning over time.

The protocol uses context and imagery to reinforce recall, explains Dr. Nancy Chiaravalloti, above.



During ten bi-weekly sessions, study participants, age 60 years and older, are taught to visualize verbal information, incorporate unrelated material into a meaningful context, and then apply these strategies to the memory demands in everyday life.

This protocol was previously shown to improve cognitive performance in individuals with multiple sclerosis and traumatic brain injury. Dr. Chiaravalloti explains, “In this new five-year study, we are building on the science of cognitive training. Our objective is to examine the short- and long-term impact of KF-mSMT on learning and memory abilities, daily function, and overall quality of life in older adults. Early findings are encouraging and with further research, we may be able to learn how we can change the dynamics of aging.” ☀



Picture this.

Participating in Kessler Foundation’s modified Story Memory Technique study was a meaningful experience for attorney and world traveler Mark Jay. “As I get older, I know my physical and cognitive strengths will decline. But I was curious to learn how the aging brain functions—and what it means for me going forward.”

Mark was gratified, although admittedly a bit frustrated, by his personal performance on certain aspects of this memory protocol. Yet he readily acknowledges what a unique opportunity this was.

“By using these visualization techniques during trips where I was well outside my comfort zone, I retained more from each experience.”

Mark Jay

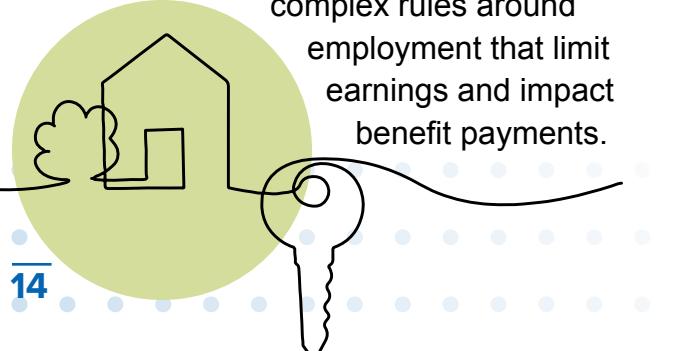
“Thanks to donors like you, people like me can contribute to a growing body of knowledge—collective knowledge—that will surely impact the science and understanding of healthy aging.” ☀

YOUR IMPACT: CHALLENGING THE STATUS QUO

hire potential

Outside-the-box thinking in vocational counseling fosters financial independence, thanks to your support.

Over 14 million Americans with disabilities rely on either Social Security Disability Income (SSDI) or Supplemental Security Income (SSI) to survive. But the system meant to help them can sometimes trap them in poverty. Qualifying for SSDI and SSI is often a long and arduous process, and both have complex rules around employment that limit earnings and impact benefit payments.



“The innovative use of milestone achievement payments has the potential to transform vocational rehabilitation practice.”

Elaine Katz, senior vice president, Center for Grantmaking and Communications at Kessler Foundation

Faced with these challenges and the uncertainties of the job market, many individuals opt out of the workforce.

HireAbility Vermont, part of the state’s Division of Vocational Rehabilitation, is seeking to change that mindset by demonstrating a new way to help people with disabilities achieve financial independence. The program was funded by a grant from Kessler Foundation, which was made possible by your support.

“This two-year grant has been life-changing for several of our participants. The program combines

work incentive counseling with career planning to effectively educate clients about the system, explore their skills and work potential, and enable them to make informed decisions. Our goal is to help those who can work become economically self-sufficient,” says Betsy Choquette, program manager, HireAbility Vermont.

Dollars and sense

Helping clients understand their earning potential and the rules around their benefits is the first step. “While it’s true that working full time at a low wage may put individuals in a worse financial

position than keeping their benefits, we help our clients understand that there are career pathways through credentialing and education that allow them to earn more money and be significantly better off without benefits,” explains Choquette. The infographic at right shows how this works. “When people have information about possibilities, they can make better decisions on how to move forward with employment.”

Transitional support is key

To help ease the shift from benefits dependence to financial independence, HireAbility Vermont offered an innovative incentive payment—extra income when individuals begin to lose benefits. Thanks to the Kessler Foundation grant, one-time “milestone achievement payments” of \$250 and \$750 are issued when an individual reaches certain levels of employment. When benefits cease, an additional \$1,000 is awarded.

“These payments may not seem like a lot, but to someone hoping to break the cycle of dependence, they can be a lifeline. With that comes a sense of empowerment and resiliency. We are proud of our clients,” says Choquette. “And so very grateful for the support of Kessler Foundation and its donors.”



SSDI alone = **\$1,655**



Part-time job + lower SSDI = **\$2,903**



More hours, no SSDI = **\$2,354**



Full-time job, higher salary
= \$3,440

HOW WOULD YOU MAKE A LIVING?

Let’s say you were eligible to receive **\$1,655** in monthly Social Security Disability Income (SSDI) benefits.

If you had a **part-time job** for 18 hours a week at **\$18.25** an hour, your wages would reduce your SSDI to **\$1,490**, but your total monthly income would be **\$2,903**.

If you increased your hours to **30 per week** at the same pay rate, you would lose your SSDI benefits, and your total income would decrease to **\$2,354**.

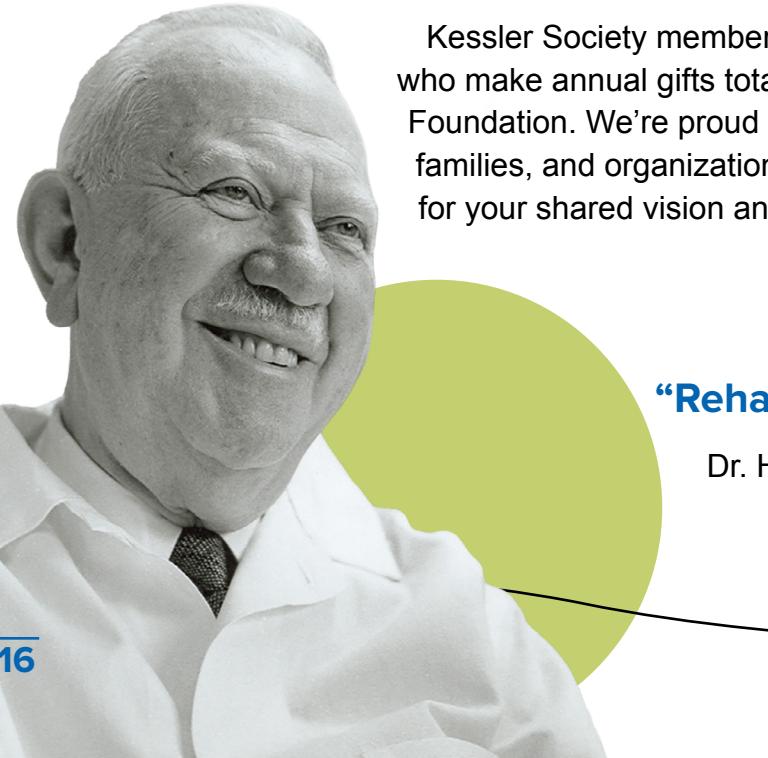
BUT if you explored your skills and potential and landed a **full-time job** at **\$20 per hour**, your income would be **\$3,440**—an 18 percent increase from working 18 hours a week and more than double your income compared to benefits alone.

you change lives

Your support empowers groundbreaking rehabilitation research and employment for people with disabilities.

As a Kessler Society member, you continue the illustrious legacy of Henry H. Kessler, MD, PhD, who founded Kessler Institute for Rehabilitation after serving in World War II. His vision was "...to treat the whole individual...to help people successfully regain physical, mental, social, vocational, and economic usefulness to the fullest possible degree." Thanks to your generosity, people with disabilities restore function and mobility, improve cognition, and secure meaningful jobs and careers.

Kessler Society membership is extended to friends who make annual gifts totaling \$500 or more to Kessler Foundation. We're proud to recognize these individuals, families, and organizations in our 2023 roster. Thank you for your shared vision and commitment. 



"Rehabilitation is the precious gift of hope translated into action."

Dr. Henry H. Kessler

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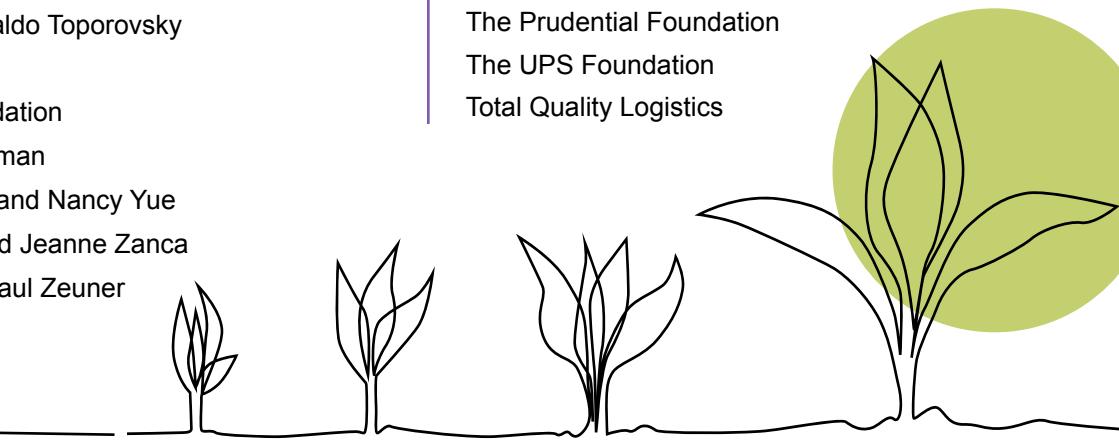
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In 2023, civic-minded organizations generously matched gifts made by individual donors.

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Fundraisers

In 2023, inspired leaders raised funds to champion research and employment for people with disabilities.

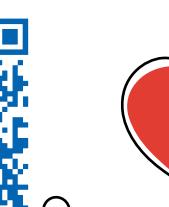
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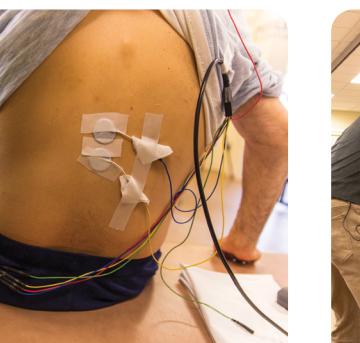
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Mark L. Pollard
Glenn M. Reiter, Esq.
Wendy M. Richman
Allen J. Sinisgalli
Stephen G. Sudovar
Francis A. Wood, MD



\$25,000

Sponsors one research participant with spinal cord injury in a transcutaneous spinal stimulation study



\$15,000

Sponsors one research participant with brain injury, stroke, or MS in a study to restore mobility using a robotic exoskeleton



\$10,000

Sponsors one research participant in a study exploring new treatments using regenerative rehabilitation



\$7,500

Sponsors one research participant with brain injury or MS in a study to improve thinking, learning, and memory



\$5,000

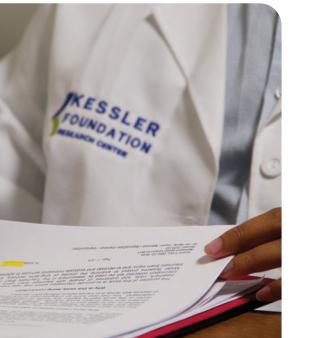
Sponsors one research participant in a study to improve quality of life after spinal cord injury

every gift makes a difference



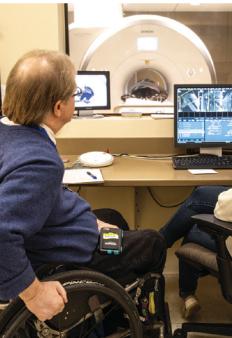
\$5,000

Sponsors one research participant in a study to treat hidden disabilities after stroke



\$3,000

Covers the cost of one study's Institutional Review Board approval, required to protect research participants



\$2,500

Underwrites a functional MRI scan and analysis to determine changes in the brain or spinal cord



\$1,000

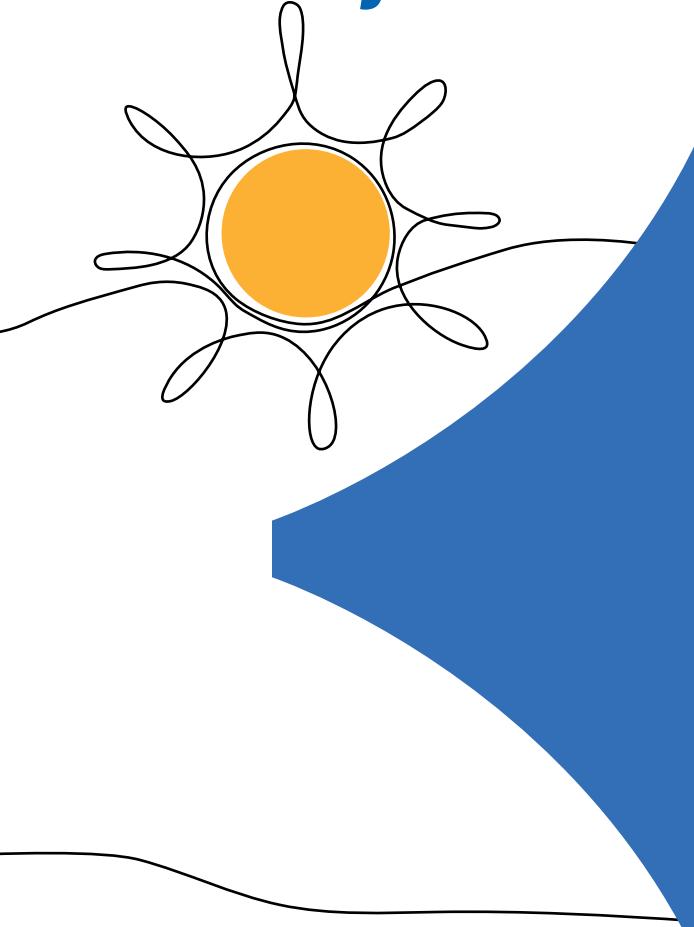
Covers the cost of one study's Institutional Review Board renewal



\$500

Covers the cost of recruiting a research participant

thank you



120 Eagle Rock Avenue, Suite 100
East Hanover, NJ 07936-3147
tel. 973.324.8430 | fax 973.386.1361

[@KesslerFoundation](#) | [@KesslerFdn](#)
[@KesslerFdn](#) | [@Kessler-Foundation](#)
[@KesslerFoundation](#)
KesslerFoundation.org



P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248464862
June 30, 2010 LTR 4168C E0
31-1562134 000000 00
00022680
BODC: TE

KESSLER FOUNDATION INC
% CAROLYN D DURONIO
300 EXECUTIVE DR STE 150
WEST ORANGE NJ 07052-3329

009669

Employer Identification Number: 31-1562134
Person to Contact: Miss Campbell
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your June 21, 2010, request for information regarding your tax-exempt status.

Our records indicate that your organization was recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in October 1998.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(iii).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Michele M. Sullivan

Michele M. Sullivan, Oper. Mgr.
Accounts Management Operations I



Department of the Treasury
Internal Revenue Service
Ogden UT 84201-0038

Notice	CP148B
Notice date	November 13, 2017
Employer ID number	31-1562134
To contact us	Phone 1-800-829-0115
Page 1 of 1	

104690.803522.387473.17282 1 AB 0.403 370

[REDACTED]

KESSLER FOUNDATION INC
% RODGER DEROSE
120 EAGLE ROCK AVE STE 100
EAST HANOVER NJ 07936-3147

104690

We changed your mailing address

We updated our records for your mailing address.

We update our records anytime the address entered on a tax return is different from what we have in our records, or a Form 8822-B is received.

The address shown above is where we previously sent IRS notices and letters about your tax account. We will no longer mail notices and letters to that address. We also sent a confirmation notice to your new mailing address.

What you need to do

Our update to your address may be for minor changes in words and abbreviations, such as using "Street" rather than "St." in your address. To avoid confusion, you or your tax preparer should always enter your correct mailing address in exactly the same way every time you file tax returns.

If there should not be a change to your address, call or write to us using the contact information at the top of this page. If you call, please review the most recent tax returns you filed for differences in addresses entered. For any written correspondence, include a copy of this notice. We can address concerns more quickly via telephone.

Caution for employers regarding third-party payroll providers

If we find any issues with an account, we send a letter or notice to your address of record. We strongly caution any employer against changing the address of record to that of a payroll service provider or any other third party as it may significantly limit our ability to inform the employer of tax matters involving the business. The employer is ultimately responsible for depositing and paying all federal employment tax liabilities. For more information, visit www.irs.gov and search keywords, "Change of Address" or "Outsourcing Payroll Duties."

Additional information

- Visit www.irs.gov/cp148b
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2023Open to Public
Inspection**A For the 2023 calendar year, or tax year beginning** and ending

B Check if applicable:	C Name of organization KESSLER FOUNDATION, INC.	D Employer identification number 31-1562134
Address change	Doing Business As	E Telephone number (973) 324-8364
Name change	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite
Initial return	120 EAGLE ROCK AVE, SUITE 100	
Terminated	City or town, state or province, country, and ZIP or foreign postal code	
Amended return	EAST HANOVER, NJ 07936	
Application pending		
F Name and address of principal officer: RODGER L. DEROSE 120 EAGLE ROCK AVE, SUITE 100, EAST HANOVER, NJ 07933	G Gross receipts \$ 76,501,640.	

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527J Website: ► WWW.KESSLERFOUNDATION.ORGK Form of organization: Corporation Trust Association Other ► L Year of formation: **1986** M State of legal domicile: **NJ****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE FOUNDATION HAS TWO PRIMARY MISSIONS: TO CONDUCT WORLD-CLASS MEDICAL REHABILITATION RESEARCH AND TO INDENIFY AND FUND PROGRAMS TO IMPROVE EMPLOYMENT FOR THOSE WITH DISABILITIES.		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	24
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	209
	6 Total number of volunteers (estimate if necessary)	6	20
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b		

Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 12,472,836.	Current Year 16,379,996.
	9 Program service revenue (Part VIII, line 2g)	219,050.	222,300.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,263,248.	16,907,672.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	16,252.	25,007.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,971,386.	33,534,975.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,041,060.	982,664.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	NONE	NONE

Expenses	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	18,174,703.	20,775,855.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	NONE	NONE
	b Total fundraising expenses (Part IX, column (D), line 25) ► 907,435.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	12,296,238.	12,335,338.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	31,512,001.	34,093,857.
	19 Revenue less expenses. Subtract line 18 from line 12	-15,540,615.	-558,882.

Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 261,472,215.	End of Year 283,320,723.
	21 Total liabilities (Part X, line 26)	20,061,416.	20,332,120.
	22 Net assets or fund balances. Subtract line 21 from line 20	241,410,799.	262,988,603.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	► Signature of officer	Date
	► Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name DEVIN DESMOND	Preparer's signature DEVIN DESMOND	Date 09/13/2024	Check <input type="checkbox"/> if self-employed	PTIN P01262203
	Firm's name ► WITHUMSMITH+BROWN, PC	Firm's EIN ► 22-2027092			

Firm's address ► ONE TOWER CENTER BLVD 14TH FL EAST BRUNSWICK, NJ 08816	Phone no. 732-828-1614
--	----------------------------------

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2023)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III

- 1**
- Briefly describe the organization's mission:

THE FOUNDATION HAS TWO PRIMARY MISSIONS: (1) TO CONDUCT WORLD-CLASS MEDICAL REHABILITATION RESEARCH FOCUSED ON FUNCTIONAL GAINS FOR PEOPLE WITH DISABILITIES AND (2) TO IDENTIFY AND FUND PROGRAMS TO IMPROVE EMPLOYMENT OPPORTUNITIES FOR PEOPLE WITH DISABILITIES.

- 2**
- Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

 Yes No

If "Yes," describe these new services on Schedule O.

- 3**
- Did the organization cease conducting, or make significant changes in how it conducts, any program services?

 Yes No

If "Yes," describe these changes on Schedule O.

- 4**
- Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 24,532,821. including grants of \$ _____) (Revenue \$ 240,531.)
SEE SCHEDULE O

4b (Code: _____) (Expenses \$ 1,419,080. including grants of \$ 982,664.) (Revenue \$ _____)
SEE SCHEDULE O

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe on Schedule O.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses 25,951,901.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3 X	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5 X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7 X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8 X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9 X	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a X	
b Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b X	
c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c X	
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 X	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16 X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19 X	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a X	
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b X	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	X

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	107
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	NONE
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	209	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7a	X	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e	X	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	X	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	9a		
9	Sponsoring organizations maintaining donor advised funds.	9b		
10	Section 501(c)(7) organizations. Enter:	10a		
a	Initiation fees and capital contributions included on Part VIII, line 12	10b		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	11a		
11	Section 501(c)(12) organizations. Enter:	11b		
a	Gross income from members or shareholders	12a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	12b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	13a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	13b		
c	Enter the amount of reserves on hand	13c		
13a		14a	X	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14b		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	15	X	
15	Is the organization 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?	16	X	
a	If "Yes," see the instructions and file Form 4720, Schedule N.	17		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			
b	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?			
c	If "Yes," complete Form 6069.			

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 24	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
b	Enter the number of voting members included on line 1a, above, who are independent.	1b 22	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2 <input checked="" type="checkbox"/>	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3 <input checked="" type="checkbox"/>	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4 <input checked="" type="checkbox"/>	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 <input checked="" type="checkbox"/>	
6	Did the organization have members or stockholders?	6 <input checked="" type="checkbox"/>	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a <input checked="" type="checkbox"/>	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b <input checked="" type="checkbox"/>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a <input checked="" type="checkbox"/>	
b	Each committee with authority to act on behalf of the governing body?	8b <input checked="" type="checkbox"/>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.	9 <input checked="" type="checkbox"/>	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a <input checked="" type="checkbox"/>	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a <input checked="" type="checkbox"/>	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a <input checked="" type="checkbox"/>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done		
13	Did the organization have a written whistleblower policy?		
14	Did the organization have a written document retention and destruction policy?		
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official		
b	Other officers or key employees of the organization		
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	CA, CO, DC, FL, NJ, NY, PA,
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	
	<input type="checkbox"/> Own website	<input type="checkbox"/> Another's website
	<input checked="" type="checkbox"/> Upon request	<input type="checkbox"/> Other (explain on Schedule O)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
20	State the name, address, and telephone number of the person who possesses the organization's books and records.	RODGER DEROSSE 120 EAGLE ROCK AVENUE, SUITE 100 EAST HANOVER, NJ 07936

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
(1) RODGER L. DEROSSE	40.00			X					935,872.	NONE	51,400.
PRESIDENT AND CEO - TRUSTEE	NONE	X		X							
(2) JOHN DELUCA	40.00				X				567,599.	NONE	51,400.
SR. VICE PRESIDENT - RESEARCH	NONE					X					
(3) GUANG YUE	40.00					X			392,059.	NONE	51,400.
LAB DIRECTOR	NONE						X				
(4) NANCY CHIARAVALLOTTI	40.00						X		360,471.	NONE	51,400.
LAB DIRECTOR	NONE							X			
(5) MICHELE PIGNATELLO	40.00							X	282,189.	NONE	47,492.
VP & CDO	NONE										
(6) TREVOR DYSON-HUDSON	40.00							X	277,170.	NONE	47,406.
LAB DIRECTOR	NONE										
(7) JOHN O'NEILL	40.00							X	276,738.	NONE	47,625.
LAB DIRECTOR	NONE										
(8) ELAINE KATZ	40.00							X	270,850.	NONE	46,121.
SR. VP GRANTS & COMMUNICATIONS	NONE										
(9) GAIL FORREST	40.00							X	238,181.	NONE	44,219.
DIRECTOR	NONE										
(10) MICHAEL A. SAFFER	3.00										
CHAIR - TRUSTEE	NONE	X		X					NONE	NONE	NONE
(11) C. WILLIAM WEISSER	3.00										
VICE CHAIR - TRUSTEE	NONE	X		X					NONE	NONE	NONE
(12) BRUCE SCHNELWAR	3.00										
SECRETARY - TRUSTEE	NONE	X		X					NONE	NONE	NONE
(13) MICHAEL P. DAVIS	3.00										
TRUSTEE	NONE	X							NONE	NONE	NONE
(14) M. JOHN GERMAIN	3.00										
TRUSTEE	NONE	X							NONE	NONE	NONE

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)	DAVID LEGOW	3 . 0 0							NONE	NONE	NONE
	TRUSTEE	NONE	X								
(16)	GUY TUFO	3 . 0 0							NONE	NONE	NONE
	TRUSTEE	NONE	X								
(17)	DIANE ZEZZA	3 . 0 0							NONE	NONE	NONE
	TRUSTEE	NONE	X								
(18)	BRIAN CRAWFORD	3 . 0 0							NONE	NONE	NONE
	TRUSTEE - AD HOC NON VOTING	NONE	X								
(19)	DAVID MARGOLIS	3 . 0 0							NONE	NONE	NONE
	TRUSTEE	NONE	X								
(20)	DAVID SCHONBRAUN	3 . 0 0							NONE	NONE	NONE
	TRUSTEE	NONE	X								
(21)	MARY ROSE MIGLIAZZA	3 . 0 0							NONE	NONE	NONE
	TRUSTEE	NONE	X								
(22)	SAUL SIMON	3 . 0 0							NONE	NONE	NONE
	TRUSTEE	NONE	X								
(23)	DEBORAH MELLEN	3 . 0 0							NONE	NONE	NONE
	TRUSTEE	NONE	X								
(24)	ELLEN SALSBURG	3 . 0 0							NONE	NONE	NONE
	TRUSTEE	NONE	X								
(25)	JOSH AVIDAN	3 . 0 0							NONE	NONE	NONE
	TRUSTEE - AD HOC NON VOTING	NONE	X								
1b Sub-total									3,601,129.	NONE	438,463.
c Total from continuation sheets to Part VII, Section A									NONE	NONE	NONE
d Total (add lines 1b and 1c)									3,601,129.	NONE	438,463.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 38

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►		

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
(26)	TERRI GOLDBERG	3 . 0 0							NONE	NONE	NONE	
	TRUSTEE	NONE	X									
(27)	ALYCE HALCHAK	3 . 0 0							NONE	NONE	NONE	
	TRUSTEE	NONE	X									
(28)	MICHAEL HERZ	3 . 0 0							NONE	NONE	NONE	
	TRUSTEE	NONE	X									
(29)	LISA PETERSON	3 . 0 0							NONE	NONE	NONE	
	TRUSTEE	NONE	X									
(30)	WILLIAM GILMAN	3 . 0 0							NONE	NONE	NONE	
	TRUSTEE	NONE	X									
(31)	NEIL GREENSTEIN	3 . 0 0							NONE	NONE	NONE	
	TRUSTEE	NONE	X									
(32)	DARA SBLENDORIO	3 . 0 0							NONE	NONE	NONE	
	TRUSTEE	NONE	X									
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<hr/>												
1b Sub-total												
c Total from continuation sheets to Part VII, Section A												
d Total (add lines 1b and 1c)												

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►	NONE	

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts					
1a Federated campaigns	1a				
b Membership dues	1b				
c Fundraising events	1c	182,935.			
d Related organizations	1d				
e Government grants (contributions)	1e	9,177,655.			
f All other contributions, gifts, grants, and similar amounts not included above	1f	7,019,406.			
g Noncash contributions included in lines 1a-1f	1g	\$ 18,386.			
h Total. Add lines 1a-1f		16,379,996.			
Program Service Revenue		Business Code			
2a IMAGING REVENUE		541900	222,300.	222,300.	
b					
c					
d					
e					
f All other program service revenue					
g Total. Add lines 2a-2f		222,300.			
Other Revenue					
3 Investment income (including dividends, interest, and other similar amounts)			2,191,298.		2,191,298.
4 Income from investment of tax-exempt bond proceeds			NONE		
5 Royalties			6,776.		6,776.
6a Gross rents	6a	(i) Real			
b Less: rental expenses	6b				
c Rental income or (loss)	6c	NONE	NONE		
d Net rental income or (loss)			NONE		
7a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other		
	7a	57,635,476.			
b Less: cost or other basis and sales expenses	7b	42,919,102.			
c Gain or (loss)	7c	14,716,374.			
d Net gain or (loss)			14,716,374.		14,716,374.
8a Gross income from fundraising events (not including \$ 182,935. of contributions reported on line 1c). See Part IV, line 18	8a	47,563.			
	8b	47,563.			
b Less: direct expenses			NONE		NONE
c Net income or (loss) from fundraising events					
9a Gross income from gaming activities. See Part IV, line 19	9a	NONE			
	9b	NONE			
b Less: direct expenses					
c Net income or (loss) from gaming activities			NONE		
10a Gross sales of inventory, less returns and allowances	10a	NONE			
	10b	NONE			
b Less: cost of goods sold					
c Net income or (loss) from sales of inventory.			NONE		
Miscellaneous Revenue		Business Code			
11a OTHER INCOME		900099	18,231.	18,231.	
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		18,231.			
12 Total revenue. See instructions		33,534,975.	240,531.		16,914,448.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	982,664.	982,664.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	NONE			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	2,461,601.	1,474,329.	987,272.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	NONE			
7 Other salaries and wages	13,394,020.	11,820,423.	1,128,626.	444,971.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	898,292.	716,194.	150,165.	31,933.
9 Other employee benefits	2,997,620.	2,456,445.	454,462.	86,713.
10 Payroll taxes	1,024,322.	830,854.	163,837.	29,631.
11 Fees for services (nonemployees):				
a Management	NONE			
b Legal	398,251.	321,284.	76,207.	760.
c Accounting	100,106.		100,106.	
d Lobbying	NONE			
e Professional fundraising services. See Part IV, line 17.	NONE			
f Investment management fees	2,436,372.		2,436,372.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	2,383,582.	2,343,368.		40,214.
12 Advertising and promotion	NONE			
13 Office expenses	989,736.	427,261.	428,387.	134,088.
14 Information technology	711,677.	247,385.	373,258.	91,034.
15 Royalties	NONE			
16 Occupancy	1,746,642.	1,343,280.	403,362.	
17 Travel	298,638.	250,983.	44,174.	3,481.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	227,520.	60,772.	122,827.	43,921.
20 Interest	85,924.		85,924.	
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization	1,595,514.	1,595,514.		
23 Insurance	430,675.	214,300.	216,375.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a SUBJECT RESEARCH COSTS	579,077.	579,077.		
b RESEARCH AND PROGRAM EXPENSE	307,635.	287,768.	19,178.	689.
c GRANT ALLOCATION	43,989.		43,989.	
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	34,093,857.	25,951,901.	7,234,521.	907,435.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
	1 Cash - non-interest-bearing	1,887,181.	1	2,089,926.
	2 Savings and temporary cash investments.	4,319,189.	2	4,389,584.
	3 Pledges and grants receivable, net	7,895,109.	3	6,300,334.
	4 Accounts receivable, net	202,766.	4	295,519.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
		NONE	5	NONE
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONE
	7 Notes and loans receivable, net	NONE	7	NONE
	8 Inventories for sale or use	NONE	8	NONE
	9 Prepaid expenses and deferred charges SEE SCHEDULE O	701,542.	9	1,010,530.
Assets	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 23,247,174.		
	b Less: accumulated depreciation	10b 14,177,821.	10c	9,069,353.
	11 Investments - publicly traded securities SEE SCHEDULE O	189,375,502.	11	212,348,063.
	12 Investments - other securities. See Part IV, line 11	37,278,068.	12	39,020,488.
	13 Investments - program-related. See Part IV, line 11	NONE	13	NONE
	14 Intangible assets	NONE	14	NONE
	15 Other assets. See Part IV, line 11	9,474,673.	15	8,796,926.
	16 Total assets. Add lines 1 through 15 (must equal line 33)	261,472,215.	16	283,320,723.
	17 Accounts payable and accrued expenses	3,536,121.	17	3,537,259.
	18 Grants payable	957,235.	18	1,194,605.
	19 Deferred revenue SEE SCHEDULE O	2,188,528.	19	4,336,909.
	20 Tax-exempt bond liabilities	NONE	20	NONE
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
Liabilities	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
		NONE	22	NONE
	23 Secured mortgages and notes payable to unrelated third parties	1,974,539.	23	659,240.
	24 Unsecured notes and loans payable to unrelated third parties	NONE	24	NONE
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	11,404,993.	25	10,604,107.
	26 Total liabilities. Add lines 17 through 25	20,061,416.	26	20,332,120.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. <input checked="" type="checkbox"/>			
	27 Net assets without donor restrictions	229,993,179.	27	252,129,116.
	28 Net assets with donor restrictions	11,417,620.	28	10,859,487.
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. <input type="checkbox"/>			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	241,410,799.	32	262,988,603.
	33 Total liabilities and net assets/fund balances	261,472,215.	33	283,320,723.

Form 990 (2023)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI

1 Total revenue (must equal Part VIII, column (A), line 12)	1	33,534,975.
2 Total expenses (must equal Part IX, column (A), line 25)	2	34,093,857.
3 Revenue less expenses. Subtract line 2 from line 1	3	-558,882.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	241,410,799.
5 Net unrealized gains (losses) on investments	5	22,136,686.
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain on Schedule O)	9	
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	262,988,603.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII.

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
2b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	X
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b	X

Form 990 (2023)

SCHEDULE A
(Form 990)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
 10 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 f Enter the number of supported organizations
 g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

JSA
3E1210 1.000

Schedule A (Form 990) 2023

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11,659,442.	11,586,874.	21,841,703.	12,472,836.	16,379,996.	73,940,851.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3 The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4 Total. Add lines 1 through 3	11,659,442.	11,586,874.	21,841,703.	12,472,836.	16,379,996.	73,940,851.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						7,469,064.
6 Public support. Subtract line 5 from line 4						66,471,787.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	11,659,442.	11,586,874.	21,841,703.	12,472,836.	16,379,996.	73,940,851.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,841,952.	1,613,534.	2,122,605.	1,347,748.	2,198,074.	10,123,913.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	141,698.	1,447.	189,542.	8,490.	18,231.	359,408.
11 Total support. Add lines 7 through 10						84,424,172.
12 Gross receipts from related activities, etc. (see instructions)					12	992,999.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	78.74 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	80.09 %
16a 33 1/3 % support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3 % support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		<input type="checkbox"/>

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

1 Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*

2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).*

3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*

b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.*

c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in Part VI what controls the organization put in place to ensure such use.*

4a Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*

b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*

c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*

5a Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*

b **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?

c **Substitutions only.** Was the substitution the result of an event beyond the organization's control?

6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*

7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*

8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*

9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*

b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*

c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*

10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*

b Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*

Part IV Supporting Organizations (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?
 - A family member of a person described on line 11a above?
 - A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in **Part VI**.

Yes	No
11a	
11b	
11c	

Section B. Type I Supporting Organizations

- 1** Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Yes	No
1	
2	

Section C. Type II Supporting Organizations

- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Yes	No
1	

Section D. All Type III Supporting Organizations

- 1** Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3** By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.

Yes	No
1	
2	
3	

Section E. Type III Functionally Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- The organization satisfied the Activities Test. Complete **line 2** below.
 - The organization is the parent of each of its supported organizations. Complete **line 3** below.
 - The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).

Yes	No
-----	----

- 2** Activities Test. **Answer lines 2a and 2b below.**
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
 - Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in **Part VI**.
 - Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

2a	
2b	
3a	
3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See **instructions**. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2019	2020	2021	2022	2023	TOTAL
OTHER INCOME	141,698.	1,447.	181,469.	1,218.	14,936.	340,768.
LIBRARY USE FEE	NONE	NONE	8,073.	7,272.	3,295.	18,640.
 TOTALS	 141,698.	 1,447.	 189,542.	 8,490.	 18,231.	 359,408.
	=====	=====	=====	=====	=====	=====

**Schedule B
(Form 990)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

Employer identification number

KESSLER FOUNDATION, INC.

31-1562134

Organization type (check one):**Filers of:****Section:**

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

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

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

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

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

Name of organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$ 2,751,881.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	N/A	\$ 2,954,518.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	N/A	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	N/A	\$ 640,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	N/A	\$ 5,790,537.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	N/A	\$ 377,122.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	N/A	\$ 778,266.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____

Name of organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

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

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

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023**Open to Public
Inspection**

Name of the organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/>	Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/>	Yes <input type="checkbox"/> No

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).	
<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	Held at the End of the Tax Year
b Total acreage restricted by conservation easements	2a _____
c Number of conservation easements on a certified historic structure included on line 2a	2b _____
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2c _____
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	2d _____
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
(i) Revenue included on Form 990, Part VIII, line 1. \$ _____
(ii) Assets included in Form 990, Part X. \$ _____
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:
a Revenue included on Form 990, Part VIII, line 1. \$ _____
b Assets included in Form 990, Part X. \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

JSA

3E1268 1.000

Schedule D (Form 990) 2023

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- a Public exhibition
- b Scholarly research
- c Preservation for future generations

- d Loan or exchange program
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	3,071,209.	3,867,425.	3,588,140.	3,151,326.	2,818,146.
b Contributions	7,347.	7,337.	2,400.		
c Net investment earnings, gains, and losses	399,799.	-709,866.	365,565.	353,284.	415,980.
d Grants or scholarships	97,371.	93,687.	88,680.	-83,530.	82,800.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	3,380,984.	3,071,209.	3,867,425.	3,588,140.	3,151,326.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment NONE %

b Permanent endowment 57.1800 %

c Term endowment 42.8200 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

Yes	No
3a(i)	X
3a(ii)	X
3b	

(i) Unrelated organizations?

(ii) Related organizations?

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		8,692,589.	2,361,130.	6,331,459.
d Equipment		14,554,585.	11,816,691.	2,737,894.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) 9,069,353.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) RE AND PRIVATE EQUITIES	39,020,488.	FMV
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B)) . . .	39,020,488.	

Part VIII Investments - Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)) . . .		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)). . .	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1) Federal income taxes		
(2) LEASE LIABILITY		10,604,107.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)). . .		10,604,107.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	54,576,439.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	22,136,686.
b	Donated services and use of facilities	2b	1,341,150.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	23,477,836.
3	Subtract line 2e from line 1	3	31,098,603.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,436,372.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	2,436,372.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	33,534,975.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	32,998,635.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,341,150.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,341,150.
3	Subtract line 2e from line 1	3	31,657,485.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,436,372.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	2,436,372.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	34,093,857.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE SUPPLEMENTAL PAGE

Part XIII Supplemental Information (continued)

FORM 990, SCHEDULE D, PART X, LINE 2

THE FOUNDATION FOLLOWS THE ACCOUNTING PRONOUNCEMENT DEALING WITH UNCERTAIN TAX POSITIONS. THE FOUNDATION HAD NO UNRECOGNIZED TAX BENEFITS AT DECEMBER 31, 2023 AND 2022. THERE WERE NO TAX RELATED INTEREST OR PENALTIES INCLUDED IN THE FINANCIAL STATEMENTS PRESENTED.

FORM 990, SCHEDULE D, PART V, LINE 4

ORGANIZATION'S ENDOWMENT FUNDS ARE USED TO SUPPORT RESEARCH AND EDUCATION.

**SCHEDULE G
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

2023Open to Public
Inspection

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | | | |
|----------------------------|----------------------------------|----------------------------|---------------------------------------|
| a <input type="checkbox"/> | Mail solicitations | e <input type="checkbox"/> | Solicitation of non-government grants |
| b <input type="checkbox"/> | Internet and email solicitations | f <input type="checkbox"/> | Solicitation of government grants |
| c <input type="checkbox"/> | Phone solicitations | g <input type="checkbox"/> | Special fundraising events |
| d <input type="checkbox"/> | In-person solicitations | | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total					

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a) Event #1 STROLL N' ROLL (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	182,935.		182,935.
	2 Less: Contributions	135,372.		135,372.
	3 Gross income (line 1 minus line 2)	47,563.		47,563.
Direct Expenses	4 Cash prizes			
	5 Noncash prizes			
	6 Rent/facility costs			
	7 Food and beverages			
	8 Entertainment			
	9 Other direct expenses	47,563.		47,563.
	10 Direct expense summary. Add lines 4 through 9 in column (d)			47,563.
	11 Net income summary. Subtract line 10 from line 3, column (d)			

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue			
Direct Expenses	2 Cash prizes			
	3 Noncash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7 Direct expense summary. Add lines 2 through 5 in column (d)			
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities:

- a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

- 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers?
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?
- 13 Indicate the percentage of gaming activity conducted in:
- | | |
|-----|---|
| 13a | % |
| 13b | % |
- a The organization's facility
- b An outside facility
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.
- c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ASSOCIATION OF UNIVERSITY CENTERS ON DISABI 1100 WAYNE AVENUE SILVER SPRING, MD 20910	23-7189098	501(C)(3)	25,000.				FOUNDATION DIRECTED
(2) MONTCLAIR STATE UNIVERSITY FOUNDATION COLLEGE OF THE ARTS MONTCLAIR, NJ 07043	22-6017209	501(C)(3)	20,000.				SPECIAL INITIATIVES
(3) UNIVERSITY OF NEW HAMPSHIRE 51 COLLEGE ROAD DURHAM, NH 03824	02-6000937	501(C)(3)	250,000.				FOUNDATION DIRECTED
(4) UNIVERSITY OF MASSACHUSETTS BOSTON 100 MORRISSEY BLVD BOSTON, MA 02125	04-3167352	501(C)(3)	250,000.				SIGNATURE EMPLOYMENT
(5) NATIONAL RESTAURANT ASSOCIATION EDUCATION F 2055 L ST NW, SUT 700, WASHINGTON, DC 20036	36-6103388	501(C)(3)	250,000.				SIGNATURE EMPLOYMENT
(6) JOHN J. HELDRICH CENTER FOR WORK FORCE DEVE 30 LIVINGSTONE AVE, 2ND FLOOR, NJ 08901	23-7318742	501(C)(3)	101,409.				EVALUATION
(7) NORTH JERSEY MASTERS-ROAD RUNNERS CLUB OF A PO BOX 56 RIDGEWOOD, NJ 07451	22-2335554	501(C)(3)	6,000.				PROMOTION AND AWARENESS
(8) WORKFORCE MATTERS 89 SOUTH STREET SUITE 603 BOSTON, MA 02111	27-3033048	501(C)(3)	75,000.				FOUNDATION DIRECTED
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 8

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2023

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

SCHEDULE I, PAGE 1, PART I, LINE 2

THE ORGANIZATION REQUIRES PERIODIC REPORTS FROM GRANTEES ON PROGRESS
TOWARDS MEETING THE GOALS OF THE PROJECTS IT FUNDS AS WELL AS THE
EXPENDITURES OF THE FUNDS. LARGER GRANTS REQUIRE AN OUTSIDE EVALUATOR TO
ASSESS THE ACHIEVEMENTS OF THE PROJECTS.

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023**Open to Public
Inspection**

Name of the organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

First-class or charter travel
 Travel for companions
 Tax indemnification and gross-up payments
 Discretionary spending account

Housing allowance or residence for personal use
 Payments for business use of personal residence
 Health or social club dues or initiation fees
 Personal services (such as maid, chauffeur, chef)

Yes	No

1b

- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

- 3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

Compensation committee
 Independent compensation consultant
 Form 990 of other organizations

Written employment contract
 Compensation survey or study
 Approval by the board or compensation committee

2

- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
b Participate in or receive payment from a supplemental nonqualified retirement plan?
c Participate in or receive payment from an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

4a X**4b** X**4c** X**5a** X**5b** X**6a** X**6b** X**7** X**8** X**9****Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

- 5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

- 7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

- 8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

- 9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
RODGER L. DEROSSE 1 PRESIDENT AND CEO - TRUSTEE	(i) 935,872.	NONE	NONE	26,400.	25,000.	987,272.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOHN DELUCA 2 SR. VICE PRESIDENT - RESEARCH	(i) 567,599.	NONE	NONE	26,400.	25,000.	618,999.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
MICHELE PIGNATELLO 3 VP & CDO	(i) 282,189.	NONE	NONE	22,492.	25,000.	329,681.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
NANCY CHIARAVALLOTTI 4 LAB DIRECTOR	(i) 360,471.	NONE	NONE	26,400.	25,000.	411,871.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
GUANG YUE 5 LAB DIRECTOR	(i) 392,059.	NONE	NONE	26,400.	25,000.	443,459.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
TREVOR DYSON-HUDSON 6 LAB DIRECTOR	(i) 277,170.	NONE	NONE	22,406.	25,000.	324,576.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
GAIL FORREST 7 DIRECTOR	(i) 238,181.	NONE	NONE	19,219.	25,000.	282,400.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOHN O'NEILL 8 LAB DIRECTOR	(i) 276,738.	NONE	NONE	22,625.	25,000.	324,363.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
ELAINE KATZ 9 SR. VP GRANTS & COMMUNICATIONS	(i) 270,850.	NONE	NONE	21,121.	25,000.	316,971.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

**SCHEDULE O
(Form 990 or 990-EZ)**Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2023**Open to Public
Inspection**

Name of the organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

FORM 990, PAGE 6, PART VI, SECTION B, LINE 11B

FORM 990 IS REVIEWED AND APPROVED BY THE AUDIT COMMITTEE AND THE BOARD OF TRUSTEES BEFORE IT IS FILED. ALL TRUSTEES RECEIVE A COPY OF THE FORM 990.

FORM 990, PAGE 6, PART VI, SECTION B, LINE 12C

TO REGULARLY AND CONSISTENTLY MONITOR AND ENFORCE COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY, THE ORGANIZATION REQUIRES OFFICERS TRUSTEES, AND ALL EMPLOYEES TO ANNUALLY DISCLOSE INTERESTS THAT COULD GIVE RISE TO CONFLICTS, ALONG WITH REQUIRING THEM TO ANNUALLY SIGN A CONFLICT OF INTEREST QUESTIONNAIRE. CONFLICTS OF INTEREST AMONG TRUSTEES ARE REVIEWED BY THE EXECUTIVE COMMITTEE AND TRUSTEES RECUSE THEMSELVES FROM DISCUSSION RELATED TO MATTERS WHERE A CONFLICT MAY EXIST. EMPLOYEE CONFLICTS OF INTEREST ARE REVIEWED AND MONITORED BY MANAGEMENT TO ENSURE THAT THESE CONFLICTS DO NOT POSE A HARDSHIP TO THE ORGANIZATION NOR GAIN TO THE EMPLOYEE.

FORM 990, PAGE 6, PART VI, SECTION B, LINE 15A & B

CEO SALARY IS DETERMINED BY THE COMPENSATION COMMITTEE AND APPROVED BY THE BOARD OF TRUSTEES. OTHER STAFF COMPENSATION IS RECOMMENDED BY MANAGERS, APPROVED BY THE CEO AND REVIEWED IN THE AGGREGATE BY THE COMPENSATION COMMITTEE. THE FOUNDATION PERIODICALLY ENGAGES AN INDEPENDENT THIRD PARTY TO CONDUCT A REVIEW OF COMPARABILITY OF COMPENSATION OF THE CEO AND OTHER KEY POSITIONS. THE COMPENSATION COMMITTEE ANNUALLY REVIEWS CEO PERFORMANCE AND THE CEO'S EMPLOYMENT CONTRACT. THE FOUNDATION PERIODICALLY ENGAGES A MAJOR COMPENSATION CONSULTANT TO CONDUCT A STUDY TO DETERMINE REASONABLENESS OF SALARY, CASH COMPENSATION AND TOTAL COMPENSATION FOR ALL KEY POSITIONS, INCLUDING

**SCHEDULE O
(Form 990 or 990-EZ)**Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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MANAGERS, DIRECTORS, AND EXECUTIVE MANAGEMENT. ALL SALARIES WERE DEEMED TO BE REASONABLE. THE COMPANY ENGAGES AN INDEPENDENT THIRD PARTY ON AN ANNUAL BASIS TO PERFORM A REVIEW OF THE REASONABILITY OF CEO COMPENSATION. THE 2023 REVIEW DEEMED CEO COMPENSATION TO BE REASONABLE WHEN COMPARED WITH PEER ORGANIZATIONS.

FORM 990, PAGE 6, PART VI, SECTION C, LINE 19

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST. THE ORGANIZATION ALSO MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.

Name of the organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

FORM 990, PART III - PROGRAM SERVICE

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LINE 4A, PROGRAM SERVICE

RESEARCH CENTER: KESSLER FOUNDATION RESEARCHERS IMPROVE THE QUALITY OF LIFE FOR PEOPLE WITH PHYSICAL AND COGNITIVE DISABILITIES THROUGH REHABILITATION RESEARCH IN ITS TEN (10) SPECIALIZED CENTERS UNDER THE LEADERSHIP OF NOTED RESEARCH DIRECTORS: MOBILITY AND REHABILITATION ENGINEERING RESEARCH; NEUROPSYCHOLOGY & NEUROSCIENCE RESEARCH; EMPLOYMENT AND DISABILITY RESEARCH; SPINAL CORD INJURY RESEARCH; STROKE REHABILITATION RESEARCH; TRAUMATIC BRAIN INJURY RESEARCH; OUTCOMES AND ASSESSMENT RESEARCH; AUTISM RESEARCH; TIM & CAROLINE REYNOLDS CENTER FOR SPINAL STIMULATION AND ROCCO ORTENZIO NEUROIMAGING CENTER. WHILE THE STAFF OF EACH CENTER HAS EXPERTISE IN PARTICULAR AREAS, COLLABORATION AMONG FOUNDATION RESEARCHERS AS WELL AS WITH COLLABORATORS FROM AROUND THE US AND THE WORLD, ENHANCES PROGRESS TOWARD FINDING WAYS TO OVERCOME THE OBSTACLES FACED BY PEOPLE WITH DISABILITIES CAUSED BY BRAIN INJURY, SPINAL CORD INJURY, MULTIPLE SCLEROSIS, ARTHRITIS, AND OTHER CHRONIC NEUROLOGICAL AND ORTHOPEDIC CONDITIONS. THE FOUNDATION HAS THE DISTINCTION OF HAVING THE ONLY 3T MRI SCANNER SOLELY DEVOTED TO REHABILITATION RESEARCH IN THE UNITED STATES. SINCE 1998, THE FOUNDATION HAS INVESTED \$161 MILLION IN RESEARCH, IN ADDITION TO \$150 MILLION FOR RESEARCH FUNDED BY FEDERAL, STATE AND PRIVATE SOURCES. IN 2023, THE FOUNDATION RECEIVED OVER \$22 MILLION IN NEW FEDERAL, STATE, AND PRIVATE GRANTS AND CONTRACTS. TWO FEDERAL MODEL SYSTEM GRANTS ESTABLISH KESSLER FOUNDATION AS A CENTER OF EXCELLENCE FOR BOTH TRAUMATIC BRAIN INJURY (TBI) AND SPINAL CORD INJURY (SCI) RESEARCH. MODEL SYSTEMS ARE COMPREHENSIVE NETWORKS THAT PROMOTE INDEPENDENT AND COLLABORATIVE RESEARCH THAT WILL IMPROVE THE NATIONAL STANDARD OF CARE FOR INDIVIDUALS WITH THESE DEVASTATING INJURIES. MODEL SYSTEMS ARE FUNDED BY LARGE, MULTI-YEAR GRANTS SPONSORED BY THE NATIONAL INSTITUTE ON DISABILITY, INDEPENDENT LIVING AND REHABILITATION RESEARCH. KESSLER FOUNDATION IS ONE OF ONLY SIX CENTERS IN THE UNITED STATES TO HAVE DUAL MODEL SYSTEMS: NORTHERN NEW JERSEY SCI SYSTEM AND NORTHERN NEW JERSEY TBI SYSTEM. THESE MODEL SYSTEMS ARE COLLABORATIVE EFFORTS WITH RUTGERS UNIVERSITY-NJ MEDICAL SCHOOL AND KESSLER INSTITUTE FOR REHABILITATION. IN 2018, THE BOARD OF TRUSTEES APPROVED A STRATEGIC AREA OF RESEARCH IN THE FIELD OF TRANSCUTANEOUS AND EPIDURAL STIMULATION TO IMPROVE FUNCTION FOR PEOPLE WITH SPINAL CORD INJURIES. IN EARLY 2020, THE FOUNDATION COMPLETED CONSTRUCTION OF THE TIM & CAROLINE REYNOLDS CENTER, A 11,000

Name of the organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

FORM 990, PART III - PROGRAM SERVICE

=====

SQUARE FOOT SCIENCE BUILDING TO HOUSE STAFF, LABORATORIES AND STATE-OF-THE-ART EQUIPMENT.

LINE 4B, PROGRAM SERVICE

PROGRAM CENTER: KESSLER FOUNDATION FOCUSES ON INCREASING EMPLOYMENT OPPORTUNITIES FOR PEOPLE WITH DISABILITIES THROUGH ITS SIGNATURE EMPLOYMENT AND COMMUNITY EMPLOYMENT GRANTMAKING PROGRAMS WHICH FUND LOCAL AND NATIONAL PROGRAMS AIMED TO INCREASE THE PERCENTAGE OF AMERICANS WITH DISABILITIES IN THE WORKFORCE. SPECIAL INITIATIVE GRANTS, AN INVITATION ONLY PROGRAM, ARE AWARDED TO PROJECTS AND ORGANIZATIONS THAT OPERATE WITHIN THE BROAD SPECTRUM OF REHABILITATION AND PHYSICAL DISABILITIES PRIMARILY IN NEW JERSEY. RATES OF UNEMPLOYMENT AND UNDEREMPLOYMENT ARE UNACCEPTABLY HIGH AMONG THE MILLIONS OF PEOPLE WITH DISABILITIES IN THE UNITED STATES. BY WORKING FULL OR PART-TIME, WITH TRAINING AND SUPPORT, MANY PEOPLE CAN FIND MEANINGFUL EMPLOYMENT AND REAP THE BENEFITS OF GREATER INDEPENDENCE AND SELF-ESTEEM. HAVING A JOB ENHANCES SOCIAL INTERACTION AND ACCEPTANCE IN THE COMMUNITY, WHICH CONTRIBUTE TO A BETTER QUALITY OF LIFE. ALTHOUGH INDIVIDUALS LIVING WITH DISABILITIES REPRESENT THE LARGEST MINORITY GROUP SEEKING EMPLOYMENT IN TODAY'S MARKETPLACE, THEY ARE OFTEN NOT CONSIDERED AN INTEGRAL COMPONENT OF CORPORATE DIVERSITY PROGRAMS. THROUGH OUR STRATEGIC FOCUS ON EMPLOYMENT, KESSLER FOUNDATION HAS INVESTED OVER \$57 MILLION SINCE 1998 IN ORGANIZATIONS THAT WORK TO CREATE JOB OPPORTUNITIES FOR PEOPLE WITH DISABILITIES. PROJECTS FUNDED INCLUDE PLACEMENT, TRAINING AND EDUCATION, SOCIAL ENTERPRISE, ENTREPRENEURSHIP, EMERGENCY GRANTS AND INSTITUTIONAL SUPPORT. THIS FUNDING HAS ENABLED PEOPLE WITH DISABILITIES TO OVERCOME THE OBSTACLES THAT OFTEN FACE THEM AND MEET THE WORKFORCE NEEDS OF AMERICAN BUSINESS. INNOVATIVE GRANT MAKING HAS INTRODUCED CREATIVE SOLUTIONS TO HELP ELIMINATE BARRIERS THAT PREVENT PEOPLE WITH DISABILITIES FROM WORKING.

Name of the organization

KESSLER FOUNDATION, INC.

Employer identification number

31-1562134

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

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DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
PREPAID EXPENSES	123,306.	330,906.
PREPAID INSURANCE	347,446.	402,332.
PREPAID SERVICE CONTRACTS	230,790.	277,292.
 TOTALS	 ----- 701,542. =====	 ----- 1,010,530. =====

Name of the organization

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Employer identification number

31-1562134

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

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DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	COST OR FMV
CORPORATE STOCKS	172,016,720.	202,560,236.	FMV
HEDGE FUNDS	17,358,782.	9,787,827.	FMV
TOTALS	----- 189,375,502. =====	----- 212,348,063. =====	

Name of the organization

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31-1562134

FORM 990, PART X - DEFERRED REVENUE

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DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
DEFERRED REVENUE	2,188,528.	4,336,909.
TOTALS	2,188,528.	4,336,909.

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