Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047 **2023**Open to Public Inspection

For c	alen	dar year 2023 or tax year beginning		, and er	nding		· · · · · · · · · · · · · · · · · · ·
Nan	ne of	foundation				A Employer identification	number
		PROVIDENT BANK FOUNDATION		1		04-3739441	
		nd street (or P.O. box number if mail is not delivered to street	address)		Room/suite	B Telephone number	
	_	BOX 1001	a castal and a			862-260-3990	
		own, state or province, country, and ZIP or foreign IN NJ 08830	postal code			C If exemption application is p	ending, check here
		all that apply: Initial return	Initial return of a fo	ormer nublic c	harity	D 1. Foreign organizations	check here
u o	IOON	Final return	Amended return	ormor public c	ilarity		
		Address change	Name change			Foreign organizations me check here and attach co	eting the 85% test, mputation
H C	heck		exempt private foundation			E If private foundation sta	
] Se	ction 4947(a)(1) nonexempt charitable trust	7	ation		under section 507(b)(1)	
I Fai	r ma		iting method: Cash	Accr	ual	F If the foundation is in a	60-month termination
(fro	om F		Other (specify) MODIFIED			under section 507(b)(1)	
	\$ • •	16,659,534. (Part I, colu	ımn (d), must be on cash bas	is.)			T 40
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net in inco		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	3,000.			N/A	
	2	Check X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments			87.		
	4	Dividends and interest from securities			788,939.		
		Gross rents					
		Net rental income or (loss)	316,603.				
e	_	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a					
Revenue	b 	assets on line 6a			316,603.		
Be	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns I					
	b	Less: Cost of goods sold					
	C	Gross profit or (loss)					
	11	Other income			105 600		
\dashv	12	Total. Add lines 1 through 11		1,	105,629.		140 116
	13	Compensation of officers, directors, trustees, etc.			0.		148,116. 124,411.
	14 15	Other employee salaries and wages			· ·		124,411.
တ္တ		Legal fees					
use	h	Accounting fees STMT 1	28,500.		14,250.		14,250.
X	C	Other professional fees STMT 2	108,247.		46,598.		53,745.
Administrative Expenses		Interest					
aţį	18	Taxes STMT 3	17,846.		0.		0.
listr	19	Depreciation and depletion	618.		0.		
<u>Ē</u>	20	Occupancy					
	21	Travel, conferences, and meetings					
and	22	Printing and publications					TO 604
Operating	23	Other expenses STMT 4	78,694.		0.		78,694.
erat	24	Total operating and administrative expenses. Add lines 13 through 23	506,432.		60,848.		419,216.
ŏ	25	0 1 11 11 16 1 11	1,282,533.		00,040.		1,282,533.
	26	Total expenses and disbursements.	=,232,333.				=,232,333.
		Add lines 24 and 25	1,788,965.		60,848.		1,701,749.
\neg	27	Subtract line 26 from line 12:			·		
		Excess of revenue over expenses and disbursements	-680,336.				
		Net investment income (if negative, enter -0-)		1,	044,781.		
		Adjusted net income (if pegative enter -0-)				N/A	

LHA For Paperwork Reduction Act Notice, see instructions.

323501 12-20-23

Form **990-PF** (2023)

P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	-
_		column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	257,157.	189,136.	189,136.
		Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	•	Less: allowance for doubtful accounts			
"	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	39,742.	74,087.	74,087.
Ass	100	Investments II C and state government obligations	05,712.	, , , , ,	, , , , , ,
	104	· · · · · · · · · · · · · · · · · · ·	19,272,299.	16,305,322.	16,305,322.
	ט ו	Investments - corporate stock STMT 5	15,272,255.	10,303,322.	10,303,322.
		Investments - corporate bonds			
	''	Investments - land, buildings, and equipment: basis			
	40	Less: accumulated depreciation			
		Investments - mortgage loans			
		Investments - other			
	14	Land, buildings, and equipment: basis 100,269.	1 605	000	00.000
		Less: accumulated depreciation 99, 280.	1,607.	989.	90,989.
		Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	19,570,805.	16,569,534.	16,659,534.
		Accounts payable and accrued expenses			
		Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
Ś		and complete lines 24, 25, 29, and 30.			
nce	24	Net assets without donor restrictions	19,570,805.	16,569,534.	
or Fund Balance	25	Net assets with donor restrictions			
d B		Foundations that do not follow FASB ASC 958, check here			
Ë		and complete lines 26 through 30.			
ě	26	Capital stock, trust principal, or current funds			
		Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds			
Ϋ́	29	Total net assets or fund balances	19,570,805.	16,569,534.	
ž					
	30	Total liabilities and net assets/fund balances	19,570,805.	16,569,534.	
P	art	Analysis of Changes in Net Assets or Fund Bal	ances		
_	ai t	,	· · · · · 	<u> </u>	
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 29	9		
	•			1	19,570,805.
2	Enter	amount from Part I, line 27a			-680,336.
3	Other	increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	18,890,469.
5	Decre	eases not included in line 2 (itemize) CHANGE IN UNREALIZED VALUE	E OF INVESTMENTS	5	2,320,935.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 29	6	16,569,534.
					Form 990-PF (2023)

Part IV Capital Gains	and Losses for Tax on In	vestment l	ncom	ie					<u> </u>
	the kind(s) of property sold (for example arehouse; or common stock, 200 shs		,		(b) How a P - Puro D - Don	cquired chase lation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECUE	RITIES					P			
b									
С									
d									
е									
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost plus exp						ain or (loss s (f) minus	
a 1,952,729.			1,	636,12	6.				316,603.
b									
С									
d									
е									
Complete only for assets showing	ng gain in column (h) and owned by t	the foundation o	n 12/31/	/69.			(I) Gains (C	Col. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ess of co				òl. (k), but ı	not less tha (from col. (n -0-) or
a									316,603.
b									
С									
d									
e									
	apital loss)	nd (6):			} 2			N/A	316,603.
	sed on Investment Incom	e (Section	4940((a), 494		r 4948	- see in	structio	ns)
	described in section 4940(d)(2), che				A" on line		1		,
	i letter: (at						1		14,522.
	s enter 1.39% (0.0139) of line 27b. Ex					10110110)	}		, -
	l. (b)								
2 Tax under section 511 (domes	tic section 4947(a)(1) trusts and taxa	hle foundations	only. of	hers ente	 er -∩-)		2		0.
									14,522.
	stic section 4947(a)(1) trusts and tax								0.
	ome. Subtract line 4 from line 3. If ze								14,522.
6 Credits/Payments:	and. Subtract mile 1 from mile of 11 20	. 0 01 1000, 011101	•						,
	and 2022 overpayment credited to 20	123	6a			15,00	0.		
	tax withheld at source		6b				0.		
	xtension of time to file (Form 8868)		6c				0.		
	ly withheld						0.		
7 Total credits and payments. Ac							7		15,000.
	yment of estimated tax. Check here $lacksquare$								0.
	and 8 is more than line 7, enter amo								
	e than the total of lines 5 and 8, enter								478.
	be: Credited to 2024 estimated tax		F		478.	Refunde			0.

Form **990-PF** (2023)

4/24/2024

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		162	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly) for political purposes? See the instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$0. (2) On foundation managers. \$0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	Х	
7		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructionsNONE			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation SEE STATEMENT 6	8b		х
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII	9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
•	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
-	If "Yes," attach statement. See instructions	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address WWW.THEPROVIDENTBANKFOUNDATION.ORG	_ 10		
14	The books are in care of CARMINE TORRECUSO. THE FDN. Telephone no. 862-260-	3990		
. 7	Located at 10 WOODBRIDGE CENTER DRIVE, 3RD FLOOR, WOODBRIDGE, NJ ZIP+4 07			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			$\overline{\Box}$
.0	and anticother consent of the consent interest consent of consent devices the conse	N/	Ά	
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	assumition on other flagmental assumet in a fermion assume.	16	. 55	Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10		
	foreign country			
		orm 99 0)-PF	(2022)
	TI.	,,,,,,		(2020)

323531 12-20-23

Form 990-PF (2023) THE PROVIDENT BANK FOUNDATION	04-3739441		Page !
Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Ye	s No
1a During the year, did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<u>1a</u>	(1)	Х
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?	1a	(2)	Х
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<u>1a</u>	(3) X	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<u>1a</u>	(4) X	
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?	<u>1a</u>	(5)	Х
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)	<u>1a</u>	(6)	Х
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	<u>_1</u>	b	Х
c Organizations relying on a current notice regarding disaster assistance, check here	🔲 📗		
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2023?	<u>_</u> 1	d	Х
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
defined in section 4942(j)(3) or 4942(j)(5)):			
a At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines			
6d and 6e) for tax year(s) beginning before 2023?	2	a	Х
If "Yes," list the years , , , , , , ,			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions.)	N/A 2	b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?	3	a	Х
b If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to disp	ose		
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
Schedule C, to determine if the foundation had excess business holdings in 2023.)	N/A 3	b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		a	Х
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose the			
had not been removed from jeopardy before the first day of the tax year beginning in 2023?	4	b	х

Form **990-PF** (2023)

Form 990-PF (2023) THE PROVIDENT BANK FOUNDATION Part VI-B Statements Regarding Activities for Which F	orm 4720 May Bo D	oquirod	04-373944	1	ı	Page 6
· · · · · · · · · · · · · · · · · · ·	Offit 4720 May be h	equired (contin	ued)		Yes	No
5a During the year, did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section)	n 4045(a)\ 2			5a(1)	163	X
(2) Influence the outcome of any specific public election (see section 4955); of				σα (1)		
any voter registration drive?				5a(2)		Х
(3) Provide a grant to an individual for travel, study, or other similar purposes	:::::::::::::::::::::::::::::::::::			5a(3)		Х
(4) Provide a grant to an organization other than a charitable, etc., organization						
4945(d)(4)(A)? See instructions				5a(4)		х
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f	or				v
the prevention of cruelty to children or animals?	dentale and a second and the second	- December		5a(5)		Х
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		-	NT / 7	-L		
section 53.4945 or in a current notice regarding disaster assistance? See instr	UCTIONS		N/A	5b		
 c Organizations relying on a current notice regarding disaster assistance, check d If the answer is "Yes" to question 5a(4), does the foundation claim exemption f 						
19			N/A	5d		
expenditure responsibility for the grant?				Ju		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	nav nremiums on					
a personal benefit contract?				6a		Х
b Did the foundation, during the year, pay premiums, directly or indirectly, on a property of the property o				6b		X
If "Yes" to 6b, file Form 8870.						
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?			7a		Х
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$						
excess parachute payment(s) during the year?				8		Х
Part VII Information About Officers, Directors, Truston Paid Employees, and Contractors	ees, Foundation Mar	nagers, Highly				
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plan and deferred) ((e) Exp	ense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	" ac	ccount, allowai	
		Í				
]					
SEE STATEMENT 7		148,116.	0			0.
	_					
	1					
	1					
O Company of five highest poid ampleyees (ather them these ins	luded on line 4) If none	nter INONE II				
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	1 1	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plan and deferred	l at	count,	other
	devoted to position		compensation	+	allowai	ices
	+					
KRISTY KOOS	ASSOCIATE PROGRAM D	TPECTOP				
P.O. BOX 1001, ISELIN, NJ 08830-1001	37.50	79,769.	0			0.
	77.55	,,,,,,,,		+		
	†					
		1				
	1					
	1					
Total number of other employees paid over \$50,000						0
. , , , , , , , , , , , , , , , , , , ,			For	m 99 0)-PF	(2023)

Part VII	Information About Officers, Directors, Trustees, Fo Paid Employees, and Contractors (continued)	undation Managers, Highly EE STATEMENT 8	i ago i
3 Five highes	t-paid independent contractors for professional services. If none	e, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
THE PROVIDE		(2) 31	
PO BOX 1001	, ISELIN, NJ 08830	SEE STMT. 8	368,870.
	,		,
-			
Total number of	others receiving over \$50,000 for professional services Summary of Direct Charitable Activities		1
	· · · · · · · · · · · · · · · · · · ·		
	ion's four largest direct charitable activities during the tax year. Include releva nizations and other beneficiaries served, conferences convened, research pap		Expenses
		ers produced, etc.	
1N/2	<u>. </u>		
-			
2			
3			
4			
	Summary of Program-Related Investments		T
	o largest program-related investments made by the foundation during the tax	year on lines 1 and 2.	Amount
1N/2	A		
2			
All other program	m-related investments. See instructions.		
3	in-related investments. See instructions.		
<u> </u>			
-			
Total. Add lines	s 1 through 3		0.

0. Form **990-PF** (2023)

P	art IX Minimum Investment Return (All domestic foundation	ns must compl	ete this part. Foreign fo	oundations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charita	ble, etc., purpos	es:		
а	Average monthly fair market value of securities			1a	16,675,622.
b	Average of monthly cash balances			1b	183,260.
	Fair market value of all other assets (see instructions)			1c	
	Total (add lines 1a, b, and c)			1d	16,858,882.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	16,858,882.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater and $\frac{1}{2}$) of lin			4	252,883.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3			5	16,605,999.
6_	Minimum investment return. Enter 5% (0.05) of line 5			6	830,300.
Р	art X Distributable Amount (see instructions) (Section 4942(j))		ate operating foundations	and certain	
	foreign organizations, check here and do not complete this pa	art.)			
1	Minimum investment return from Part IX, line 6			1	830,300.
2a	Tax on investment income for 2023 from Part V, line 5	2a	14,522.		
b	Income tax for 2023. (This does not include the tax from Part V.)				
C	Add lines 2a and 2b			2c	14,522.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	815,778.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	815,778.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa	rt XII, line 1		7	815,778.
P	art XI Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	1,701,749.
b	Program-related investments - total from Part VIII-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	able, etc., purpos	ses	2	
3	Amounts set aside for specific charitable projects that satisfy the:				
а	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4			4	1,701,749.

1,701,749. Form **990-PF** (2023)

Part XII Undistributed Income (see instructions)

	•			
	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X,	35, put	1 0 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1		
line 7				815,778.
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only			0.	
b Total for prior years:		0		
Excess distributions carryover, if any, to 2023:		0.		
a From 2018 210,296.				
b From 2019 499,827.				
c From 2020 452,993.				
d From 2021 469,681.				
e From 2022 1,192,201.				
f Total of lines 3a through e	2,824,998.			
4 Qualifying distributions for 2023 from				
Part XI, line 4: \$ 1,701,749.				
a Applied to 2022, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Floation required and instructions)	0.			
d Applied to 2023 distributable amount	٠,			815,778.
	885,971.			013,770.
e Remaining amount distributed out of corpus	003,371.			
5 Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	3,710,969.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		- •		
amount - see instructions		0.		
e Undistributed income for 2022. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2023. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2024				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2018	•••			
not applied on line 5 or line 7	210,296.			
	210,250.			
Cubinat lines 7 and 0 from line Co	3,500,673.			
10 Analysis of line 9:	3,330,073.			
a Excess from 2019 499,827. b Excess from 2020 452,993.				
c Excess from 2021 469,681.				
d Excess from 2022 1,192,201.				
e Excess from 2023 885,971.				Form 990-PF (2022)

323581 12-20-23

Form **990-PF** (2023)

Part Aiii Private Operating Fo	Junuations (see ins	structions and Part VI-A	A, question 9)	N/A			
1 a If the foundation has received a ruling or							
foundation, and the ruling is effective for							
b Check box to indicate whether the found		g foundation described in		4942(j)(3) or 4	942(j)(5)		
2 a Enter the lesser of the adjusted net	Tax year (a) 2023	(b) 2022	Prior 3 years (c) 2021	(d) 2020	(e) Total		
income from Part I or the minimum	(a) 2023	(0) 2022	(6) 2021	(u) 2020	(c) Iolai		
investment return from Part IX for							
each year listed							
b 85% (0.85) of line 2a							
c Qualifying distributions from Part XI,							
line 4, for each year listed							
d Amounts included in line 2c not							
used directly for active conduct of							
exempt activities							
e Qualifying distributions made directly							
for active conduct of exempt activities.							
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets							
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)							
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year							
listed							
c "Support" alternative test - enter:							
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)							
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)							
(3) Largest amount of support from							
an exempt organization							
(4) Gross investment income							
Part XIV Supplementary Infor			the foundation	had \$5,000 or mo	re in assets		
at any time during th	ne year-see instru	uctions.)					
Information Regarding Foundation a List any managers of the foundation who year (but only if they have contributed m NONE	have contributed more t		butions received by the	foundation before the clos	se of any tax		
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	on of the ownership of a pa	artnership or		
NONE							
2 Information Regarding Contribution Check here if the foundation the foundation makes gifts, grants, etc.,	only makes contributions	s to preselected charitable	e organizations and doe	s not accept unsolicited re b, c, and d.	quests for funds. If		
a The name, address, and telephone numb							
SEE STATEMENT 9							
b The form in which applications should be	e submitted and informati	ion and materials they sh	ould include:				
c Any submission deadlines:							
d Any restrictions or limitations on awards	, such as by geographica	l areas, charitable fields, l	kinds of institutions, or	other factors:			

Form 990-PF (2023) THE PROVIDENT BAN Part XIV Supplementary Information			04-3739441	Page 1
	,			
3 Grants and Contributions Paid During the	If recipient is an individual,	Payment	 	
Recipient Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
• Didd to the	Of Substantial Continuutor	recipient		
Paid during the year				
180 TURNING LIVES AROUND, INC.	NONE	₽C	TRANSITIONAL/RAPID	
1 BETHANY ROAD HAZLET, NJ 07730			RE-HOUSING (TH-RRH)	15,00
200 CLUB OF MIDDLESEX COUNTY P.O. BOX 387	NONE	₽C	2023 GOLD SPONSORSHIP (SHARED WITH PROVIDENT	
WOODBRIDGE, NJ 07095			BANK)	5,000
ADLER APHASIA CENTER	NONE	PC	GENERAL OPERATING	
60 WEST HUNTER AVENUE	NONE		SUPPORT	
MAYWOOD, NJ 07607				5,000
AMERICA'S GROW-A-ROW, INC. 150 PITTSTOWN ROAD	NONE	PC	FRESH PRODUCE INITIATIVE	
PITTSTOWN, NJ 08867	+			20,000
ANCHOR HOUSE INC. 482 CENTRE STREET	NONE	PC	PROGRAMS FOR HOMELESS YOUTH	
TRENTON, NJ 08611				10,000
	INUATION SHEET(S)		3a	1,282,533
b Approved for future payment				
NONE				
Tatal				(
Total	······		3b	990-PF (20)

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)	
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue:	code	Amount	sion code	Amount	function income	
a						
b						
c						
d						
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14	87.		
4 Dividends and interest from securities			14	788,939.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property 7 Other investment income			+			
7 Other investment income			+			
8 Gain or (loss) from sales of assets other than inventory			18	316,603.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a						
b						
C						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		0.		1,105,629.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,105,629.	
(See worksheet in line 13 instructions to verify calculations.)						

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

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

Form **990-PF** (2023)

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below? See instr. and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign Here X Yes Signature of officer or trustee Title Date Check Print/Type preparer's name Preparer's signature Date

	Tring Type property a name	1 Toparor 5 Signature	Dato	self- employed	.
Paid	ALEXANDER LAZZARUOLO	Alexander Lazzaruolo	1	John Chilphoyeu	P01775353
Preparer Use Only	I II III 3 Hailio	NTY & DONNELLY LLE		Firm's EIN	13-3628255
,	Firm's address one battery park p	LAZA, 7TH FL.			
	NEW YORK, NY 10004			Phone no. 2	12-661-7777

Form **990-PF** (2023)

No

3a Grants and Contributions Paid During the Year	_			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BERGEN COUNTY'S UNITED WAY 6 FOREST AVENUE, SUITE 220 PARAMUS, NJ 07652	NONE	PC	AFFORDABLE HOUSING	10,000.
BERGEN VOLUNTEER MEDICAL INITIATIVE, INC. 75 ESSEX STREET, SUITE 100 HACKENSACK, NJ 07601	NONE	₽C	EXPANDING ACCESS TO CARE FOR WORKING, LOW-INCOME BERGEN RESIDENTS	15,000.
BIG BROTHERS BIG SISTERS OF COASTAL & NORTHERN NEW JERSEY 305 BOND STREET, 2ND FLOOR ASBURY PARK, NJ 07712	NONE	PC	ONE-TO-ONE PLUS MENTORING - CARES PROGRAM	10,000.
BIG BROTHERS BIG SISTERS OF MERCER COUNTY 535 EAST FRANKLIN STREET TRENTON, NJ 08610	NONE	PC	WORKPLACE MENTORING PROGRAM	7,500.
BOYS & GIRLS CLUB OF CLIFTON 822 CLIFTON AVENUE CLIFTON, NJ 07013	NONE	PC	EDUCATIONAL INITIATIVES	2,500.
CAMELOT FOR CHILDREN 2354 W. EMMAUS AVE ALLENTOWN, PA 18103	NONE	PC	GENERAL OPERATING SUPPORT	4,000.
CARING CONTACT P.O. BOX 2376 WESTFIELD, NJ 07091	NONE	PC	988: EXPANDING THE MENTAL HEALTH SAFETY NET	10,000.
Total from continuation sheets				1,227,533.

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CASA SHAW 148 MAIN STREET, BUILDING D1 LEBANON, NJ 08833	NONE	PC	ADVOCACY FOR ABUSED AND NEGLECTED CHILDREN	12,500.
CBC DEVELOPMENT CENTER 66 SOUTH GROVE STREET EAST ORANGE, NJ 07018	NONE	PC	FOOD DISTRIBUTION & NUTRITION	5,000.
CENTRAL JERSEY HOUSING RESOURCE CENTER CORP. (CJHRC) 92 EAST MAIN STREET, SUITE 407 SOMERVILLE, NJ 08876	NONE	PC	HOUSING RESOURCE CENTER PROGRAM	10,000.
CHILD CARE RESOURCES OF MONMOUTH COUNTY INC. 3301C ROUTE 66 NEPTUNE, NJ 07754-1234	NONE	₽C	DIAPER BANK AT CHILD CARE RESOURCES OF MONMOUTH COUNTY INC.	8,500.
CHILDREN'S AID AND FAMILY SERVICES, INC. 200 ROBIN ROAD PARAMUS, NJ 07652-1414	NONE	PC	MOBILITY MENTORING PROGRAM	12,500.
CHILDREN'S SPECIALIZED HOSPITAL FOUNDATION, INC. 150 NEW PROVIDENCE ROAD MOUNTAINSIDE, NJ 07092	NONE	₽C	FAMILY FOOD VOUCHER PROGRAM	10,000.
COMMUNITY ACTION LEHIGH VALLEY 1337 EAST 5TH STREET BETHLEHEM, PA 18015	NONE	PC	SIXTH STREET SHELTER CASE MANAGER EXPANSION	15,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CONTACT OF OCEAN & MONMOUTH COUNTIES P.O. BOX 1121 TOMS RIVER, NJ 08754	NONE	PC	CONTACT'S 24-HR CRISIS INTERVENTION AND INFORMATION/REFERRAL HOTLINES	10,000.
COUNCIL OF NEW JERSEY GRANTMAKERS 1977 OLDEN AVENUE; SUITE 238 EWING, NJ 08618	NONE	PC	DOING GOOD BETTER: DEEPENING PHILANTHROPIC AND NONPROFIT PARTNERSHIPS IN NJ	10,000.
COUNTY COLLEGE OF MORRIS FOUNDATION 214 CENTER GROVE ROAD RANDOLPH, NJ 07869	NONE	PC	COLLEGE PROMISE PROGRAM AT MORRISTOWN HIGH SCHOOL	12,500.
CUMAC P.O. BOX 2721 PATERSON, NJ 07509	NONE	PC	CREATING HEALING-CENTERED COMMUNITIES	33,333.
DEFY VENTURES 5 PENN PLAZA 19TH FLOOR NEW YORK, NY 10001	NONE	PC	CEO OF YOUR NEW LIFE PROGRAM FOR JUSTICE IMPACTED YOUTH	10,000.
DIABETES FOUNDATION INC. 45 WHITNEY ROAD, #2M MAHWAH, NJ 07430	NONE	PC	ACCESS TO DIABETES MANAGEMENT AND PREVENTION RESOURCES	7,500.
DOMESTIC ABUSE & SEXUAL ASSAULT INTERVENTION SERVICES P.O. BOX 805 NEWTON, NJ 07860	NONE	PC	COGNITIVE BEHAVIORAL THERAPY EXPANSION	10,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FAIRLEIGH DICKINSON UNIVERSITY 1000 RIVER ROAD, H-DH3-13 TEANECK, NJ 07666	NONE	₽C	PRECOLLEGIATE STEM DISCOVERY PROGRAM	10,000.
FAMILY PROMISE OF BERGEN COUNTY 100 DAYTON STREET RIDGEWOOD, NJ 07450	NONE	PC	2023 FAMILY PROMISE ANNUAL GALA: PROMISE SPONSOR	5,000.
FAMILY PROMISE OF HUNTERDON COUNTY INC. 8 BARTLES CORNER ROAD, SUITE 11 FLEMINGTON, NJ 08822	NONE	₽C	NEW HOUSING CARE MODEL & STAFF CAPACITY BUILDING	100,000.
FAMILY PROMISE OF SUSSEX COUNTY 19 CHURCH STREET NEWTON, NJ 07860	NONE	PC	BRIDGING SUPPORTS TO SELF-SUFFICIENCY	12,500.
FLEMINGTON FOOD PANTRY, INC. 154 ROUTE 31 NORTH P.O. BOX 783 FLEMINGTON, NJ 08822	NONE	₽C	NUTRITION & HEALTH PROGRAM	5,000.
FOUNDATION FOR EDUCATIONAL ADMINISTRATION (FEA) 12 CENTRE DRIVE MONROE TOWNSHIP, NJ 08831	NONE	PC	HEALING CENTERED ENGAGEMENT INITIATIVE	20,000.
FREEDOM HOUSE 2004 NJ ROUTE 31, SUITE 9 CLINTON, NJ 08809	NONE	PC	ADDICTION RECOVERY PROGRAM	10,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year	_			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GREATER LIFE INC. P.O. BOX 8447 NEWARK, NJ 07108	NONE	₽C	FINANCIAL LITERACY FOR NEWARK YOUTH & ADULTS FOR COMMUNITY EMPOWERMENT	2,500.
GREATER NEWARK CONSERVANCY 32 PRINCE STREET NEWARK, NJ 07103	NONE	₽C	HELPING NEWARK YOUTH LIVE HEALTHIER LIVES THROUGH THE FARM TO SCHOOL PROGRAM	10,000.
HANDICAPPED HIGH RIDERS CLUB 145 ROUTE 526 ALLENTOWN, NJ 08501	NONE	₽C	GENERAL OPERATING SUPPORT	2,500.
HOMELESS SOLUTIONS 3 WING DRIVE, SUITE 245 CEDAR KNOLLS, NJ 07927	NONE	₽C	HOMELESS SOLUTIONS HOUSING RETENTION PROGRAM	10,000.
HUDSON COMMUNITY ENTERPRISES 68-70 TUERS AVENUE JERSEY CITY, NJ 07306	NONE	₽C	THE CENTER FOR EMPLOYMENT AND INCLUSION FOR THE DEAF AND HARD OF HEARING (CEI)	100,000.
HUDSON COUNTY COMMUNITY COLLEGE FOUNDATION 168 SIP AVENUE JERSEY CITY, NJ 07306	NONE	₽C	HUDSON SCHOLARS PROGRAM	100,000.
HUNTERDON HELPLINE INC. P.O. BOX 246 FLEMINGTON, NJ 08822	NONE	₽C	HHELPLINE DIVISION OF SENIOR AND DISABILITY SERVICES	10,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HUNTERDON LAND TRUST 111 MINE STREET FLEMINGTON, NJ 08822	NONE	PC	GENERAL OPERATING SUPPORT	2,500.
INTERFAITH FOOD PANTRY, INC. 2 EXECUTIVE DRIVE MORRIS PLAINS, NJ 07950	NONE	PC	HEALTHY FOOD FOR EXPANDING MARKETPLACES AND MOBILE NETWORKS	15,000.
JACOB A. RIIS NEIGHBORHOOD SETTLEMENT 10-25 41ST AVENUE LONG ISLAND CITY, NY 11101	NONE	PC	GENERAL OPERATING SUPPORT	5,000.
JEWISH FAMILY & CHILDREN'S SERVICE OF GREATER MERCER COUNTY 707 ALEXANDER ROAD SUITE 102 PRINCETON, NJ 08540	NONE	PC	MOBILE FOOD PANTRY	10,000.
JEWISH FAMILY & CHILDREN'S SERVICE OF GREATER MONMOUTH COUNTY 705 SUMMERFIELD AVENUE ASBURY PARK, NJ 07712	NONE	PC	FOOD IS MEDICINE, NOURISH ASBURY FOOD PANTRY	12,500.
JFK MEDICAL CENTER FOUNDATION 65 JAMES STREET EDISON, NJ 08820	NONE	PC	PLAINFIELD HEALTH CONNECTIONS	10,000.
KINDERSMILE FOUNDATION 10 BROAD STREET BLOOMFIELD, NJ 07003	NONE	PC	KSOHP - LINK TO A DENTAL HOME AT KSCOHC NEWARK, LOCATED WITHIN THE BGCN	5,000.
			LOCATED WITHIN THE BGCN	5,(

Part XIV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LET'S WORK FOR GOOD 140 ETHEL ROAD WEST, SUITE M PISCATAWAY, NJ 08854	NONE	PC	GENERAL OPERATING SUPPORT	2,500.
LITERACY VOLUNTEERS OF MORRIS COUNTY 16 ELM STREET MORRISTOWN, NJ 07960	NONE	₽C	GENERAL OPERATING SUPPORT	2,500.
LUNCH BREAK, INC. P.O. BOX 2215 RED BANK, NJ 07701	NONE	₽C	CLIENT CHOICE PANTRY	15,000.
MAHWAH ENVIRONMENTAL VOLUNTEERS ORGANIZATION, INC. 1024 ASH DRIVE MAHWAH, NJ 07430	NONE	₽C	FRESH ROOTS FARMING PROGRAM	1,000.
MEALS ON WHEELS OF MERCER COUNTY INC. 320 HOLLOWBROOK DRIVE EWING, NJ 08638	NONE	PC	FARM FRESH PRODUCE PROGRAM	7,500.
MEETING ESSENTIAL NEEDS WITH DIGNITY, INC. (MEND) P.O. BOX 1304 MAPLEWOOD, NJ 07040	NONE	₽C	MEND ON THE MOVE	7,500.
MENTAL HEALTH ASSOCIATION OF MONMOUTH COUNTY 106 APPLE STREET, SUITE 110 TINTON FALLS, NJ 07724	NONE	PC	RED BANK RESOURCE NETWORK	5,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year	T	T		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
MERCY CENTER	NONE	PC	MERCY CENTER FOOD PANTRY	
1106 MAIN STREET	NONE		EERCI CENIER FOOD FANIRI	
ASBURY PARK, NJ 07712				12,500.
MOVE FOR HUNGER	NONE	PC	BRIDGING THE GAP BETWEEN HUNGER AND FOOD WASTE	
7 3RD AVENUE				
NEPTUNE, NJ 07753				12,500.
NAMI MERCER NJ INC.	NONE	PC	NAMI MERCER HYBRID EDUCATION, SUPPORT AND OUTREACH	
1235 WHITEHORSE MERCERVILLE ROAD BUILDING				F 000
C, SUITE 303 HAMILTON, NJ 08619				5,000.
NATIONAL COUNCIL OF JEWISH WOMEN, ESSEX	NONE	PC	CFW CAREER SERVICES	
COUNTY SECTION				
70 SOUTH ORANGE AVENUE, SUITE 120				
LIVINGSTON, NJ 07039				10,000.
NEW BETHANY, INC.	NONE	PC	CHOICE FOOD PANTRY	
333 WEST 4TH STREET BETHLEHEM, PA 18015				12,500.
BHIIIBHIM, IA 10013				12,500.
NEW BRUNSWICK TOMORROW	NONE	₽C	NEW BRUNSWICK TOMORROW HOUSING INITIATIVES	
390 GEORGE STREET, 2ND FLOOR	NONE		NEW ENGINEER TOMORROW HOUSENG INTITUTED	
NEW BRUNSWICK, NJ 08901				12,500.
·				
NEW CITY KIDS	NONE	₽C	RUBINGH CENTER FOR YOUTH DEVELOPMENT BUILDING	
240 FAIRMOUNT AVENUE			RENOVATIONS	
JERSEY CITY, NJ 07306				40,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year	_			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NEW JERSEY CENTER FOR NONPROFITS 3635 QUAKERBRIDGE ROAD, SUITE 35 MERCERVILLE, NJ 08619	NONE	PC	WORKSHOPS & 2023 NJ NONPROFIT CONFERENCE SUPPORT	10,000.
NEW JERSEY CHAMBER OF COMMERCE FOUNDATION 216 WEST STATE STREET, THIRD FLOOR TRENTON, NJ 08608	NONE	PC	JOBS FOR AMERICA'S GRADUATES - NEW JERSEY (JAG NJ)	5,000.
NEW JERSEY COMMUNITY DEVELOPMENT CORPORATION P.O. BOX 6976 PATERSON, NJ 07509	NONE	PC	MAKE THE GRADE ACADEMY	7,500.
NEW MILFORD EDUCATION FOUNDATION 145 MADISON AVENUE NEW MILFORD, NJ 07646	NONE	PC	NEW MILFORD HIGH SCHOOL HOLOCAUST STUDY TOUR PROGRAM	1,500.
NEWARK TRUST FOR EDUCATION 494 BROAD STREET, SUITE LL30 NEWARK, NJ 07102	NONE	PC	NEWARK READS LITERACY CAMPAIGN	10,000.
NONPROFIT NEW YORK 320 EAST 43RD STREET, 3RD FLOOR NEW YORK, NY 10017	NONE	₽C	GENERAL OPERATING & STRATEGIC PLAN SUPPORT	10,000.
NORWESCAP 350 MARSHALL STREET PHILLIPSBURG, NJ 08865	NONE	PC	ENGAGEMENT PARTNERS ? CONNECTING FAMILIES TO COMPREHENSIVE SERVICES	12,500.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year		_		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
OASIS - A HAVEN FOR WOMEN AND CHILDREN	NONE	PC	AFTER-SCHOOL ACADEMY (ASA)	
59 MILL STREET				
PATERSON, NJ 07501				10,000.
PARTNERS	NONE	₽C	PARTNERS PRO BONO PROGRAM FOR SURVIVORS OF DOMESTIC	
650 BLOOMFIELD AVENUE, SUITE 209			AND SEXUAL VIOLENCE	
BLOOMFIELD, NJ 07003				15,000.
PASSAIC COUNTY HABITAT FOR HUMANITY	NONE	PC	NORTH MAIN STREET PROJECT	
P.O. BOX 2585	NONE	FC	NORTH MAIN STREET PROJECT	
PATERSON, NJ 07509				10,000.
				,
PENNSYLVANIA ASSOCIATION OF NONPROFIT	NONE	PC	RACIAL JUSTICE LEARNINGS: DATA ANALYSIS &	
ORGANIZATIONS (PANO) 4801 LINDLE ROAD			EARLY-ADOPTER FUNDER CONVERSATION	
HARRISBURG, PA 17111				10,000.
PLATINUM MINDS, INC.	NONE	PC	GENERAL OPERATING SUPPORT FOR FIVE-INITIATIVE PROGRAM	
95 WEST MAIN STREET SUITE 5-166				
CHESTER, NJ 07930				2,500.
PRESCHOOL ADVANTAGE, INC.	NONE	PC	FULL-DAY FOURS: HIGH QUALITY EARLY EDUCATION FOR FAMILIES IN NEED	
25 LINDSLEY DRIVE, SUITE 307 MORRISTOWN, NJ 07960			FAMILIES IN NEED	12,500.
MONITORIA, NO 07500				12,300.
PROJECT SELF-SUFFICIENCY	NONE	₽C	THE FOOD PROJECT: NOURISHING OUR NEIGHBORS	
127 MILL STREET				
NEWTON, NJ 07860				12,500.
Total from continuation sheets				

3a Grants and Contributions Paid During the Yea	ar _			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
RAISING HANDS TUTORING 24 NORTH THIRD AVENUE, SUITE 100 HIGHLAND PARK, NJ 08904	NONE	PC	TEACHER CERTIFICATION PROGRAM	4,200.
RARITAN VALLEY COMMUNITY COLLEGE FOUNDATION 118 LAMINGTON ROAD BRANCHBURG, NJ 08876	NONE	₽C	THE ACHIEVEMENT CENTER AT RVCC	20,000.
RESCUING LEFTOVER CUISINE 25 BROADWAY 12TH FLOOR NEW YORK, NY 10004	NONE	PC	EXPAND OUR FOOD RESCUE MISSIONS	12,500.
RIPPLE COMMUNITY INC. 1335 WEST LINDEN STREET ALLENTOWN, PA 18102	NONE	PC	RCI VILLAGE HOUSING PROGRAM	15,000.
SAFE+SOUND SOMERSET P.O. BOX 835 SOMERVILLE, NJ 08876	NONE	₽C	COUNSELING FOR VICTIMS OF CSA AND PSB UNDER 13 IN SOMERSET COUNTY	10,000.
SANAR WELLNESS INSTITUTE P.O. BOX 32353 NEWARK, NJ 07102	NONE	₽C	ADDRESSING COMPLEX TRAUMA	10,000.
SPECIAL DRAGONS 77 TIONA AVENUE BELLEVILLE, NJ 07109	NONE	PC	GENERAL OPERATING SUPPORT	2,500.
Total from continuation sheets				

3a Grants and Contributions Paid During the Yea	ar			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
STRETTO YOUTH CHAMBER ORCHESTRA	NONE	PC	GENERAL OPERATING SUPPORT	
611 LAKE DRIVE				
PRINCETON, NJ 08540				2,500.
SUSSEX COUNTY COMMUNITY COLLEGE	NONE	PC	ADVANCED SCIENTIFIC EQUIPMENT	
ONE COLLEGE HILL ROAD	[]			
NEWTON, NJ 07860				10,000.
SUSSEX COUNTY HABITAT FOR HUMANITY	NONE	PC	BUILDING OUR NEXT HOME	
82 MOUNT VIEW STREET				E 000
NEWTON, NJ 07860				5,000.
THE ARC OF ESSEX COUNTY	NONE	₽C	GENERAL OPERATING SUPPORT FOR THE ARC'S CAMP HOPE	
123 NAYLON AVENUE				
LIVINGSTON, NJ 07039-1005				2,500.
THE CENTER FOR GREAT EXPECTATIONS	NONE	₽C	PREGNANT & PARENTING RESIDENTIAL PROGRAMS EARLY	
19 DELLWOOD LANE	None		RELATIONAL HEALTH COUNSELING	
SOMERSET, NJ 08873				10,000.
THE MIDLAND FOUNDATION	NONE	PC	GENERAL OPERATING SUPPORT	
P.O. BOX 5026				
NORTH BRANCH, NJ 08876				5,000.
THE NEIGHBORHOOD CENTER	NONE	₽C	GENERAL OPERATING SUPPORT	
526 N. ST. CLOUD STREET #308	[
ALLENTOWN, PA 18104				2,500.
Total from continuation sheets				

Part XIV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
TURNING POINT OF LEHIGH VALLEY, INC. 444 E. SUSQUEHANNA STREET ALLENTOWN, PA 18103	NONE	₽C	DOMESTIC VIOLENCE SURVIVOR RESILIENCE PROGRAM	12,500.
UNION COUNTY EDUCATIONAL SERVICES FOUNDATION 45 CARDINAL DRIVE WESTFIELD, NJ 07090	NONE	₽C	HEALTH & PHYSICAL EDUCATION PROGRAM AT WESTLAKE SCHOOL	5,000.
UNITED WAY OF CENTRAL JERSEY, INC. 32 FORD AVENUE MILLTOWN, NJ 08850	NONE	PC	PERTH AMBOY FOC OPERATIONS SUPPORT	15,000.
UNITED WAY OF MONMOUTH AND OCEAN COUNTIES 4814 OUTLOOK DRIVE WALL TOWNSHIP, NJ 07753	NONE	₽C	GENERAL OPERATING SUPPORT	5,000.
UNITED WAY OF NORTHERN NEW JERSEY P.O. BOX 6835 BRIDGEWATER, NJ 08807	NONE	₽C	UNITED FOR ALICE@WORK IN NEW JERSEY	30,000.
VALLEY YOUTH HOUSE COMMITTEE, INC. 3400 HIGH POINT BOULEVARD BETHLEHEM, PA 18017	NONE	₽C	SUPPORT FOR FAMILIES WITH CHILDREN EXPERIENCING HOMELESSNESS	10,000.
VIA OF THE LEHIGH VALLEY, INC. 336 WEST SPRUCE STREET BETHLEHEM, PA 18018	NONE	₽C	COMMUNITY EMPLOYMENT SERVICES	5,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
VISION TO LEARN P.O BOX 196 188 JEFFERSON STREET NEWARK, NJ 07105	NONE	PC	FREE VISION SCREENS, EYE EXAMS, PRESCRIPTION GLASSES-JERSEY CITY* PUBLIC SCHOOLS	15,000.
WASHINGTON PARK LITTLE LEAGUE 3 CHARLES STREET JERSEY CITY, NJ 07307	NONE	PC	EQUIPMENT PURCHASE	2,500.
WOMANSPACE, INC. 1530 BRUNSWICK PIKE LAWRENCEVILLE, NJ 08648	NONE	₽C	DOMESTIC VIOLENCE SERVICES IN EAST/WEST WINDSOR, HIGHTSTOWN & ROBBINSVILLE	10,000.
WOMENRISING, INC. 270 FAIRMOUNT AVENUE JERSEY CITY, NJ 07306	NONE	PC	SUPPORTING STABILITY AND GROWTH FOR FORMERLY UNHOUSED FAMILIES IN HUDSON COUNTY	12,500.
YMCA OF METUCHEN, EDISON, WOODBRIDGE & SOUTH AMBOY 483 MIDDLESEX AVENUE METUCHEN, NJ 08840	NONE	₽C	SUMMER LEARNING LOSS PROGRAM	2,500.
YORK STREET PROJECT 89 YORK STREET JERSEY CITY, NJ 07302	NONE	PC	ST. JOSEPH?S HOUSING & SUPPORTIVE SERVICES	10,000.
YOUTH CONSULTATION SERVICE, INC. 25 EAST SALEM STREET, 3RD FLOOR HACKENSACK, NJ 07601	NONE	PC	CASE MANAGEMENT SERVICES AT YCS CLINICS	10,000.
Total from continuation sheets				

Form 990-PF THE PROVIDENT BANK FOUNDATION 04-3739441 Page 11

3a Grants and Contributions Paid During the Year	1	Т		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	/ imount
YWCA UNION COUNTY	NONE	PC	DOMESTIC VIOLENCE COUNSELING & CASE MANAGEMENT	
P.O. BOX 462			SERVICES	
KENILWORTH, NJ 07033				12,500.
Total from continuation sheets	·····			

Form **2220**

THE PROVIDENT BANK FOUNDATION

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

ORM 990-PF

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form2220 for instructions and the latest information.

Employer identification number 04-3739441

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

P	art i Required Annual Payment							
_	Total tay (and instructions)							14,522.
'	Total tax (see instructions)					····	1	14,322.
2 a	Personal holding company tax (Schedule PH (Form 1120), line	e 26)	included on line 1	2a				
	Look-back interest included on line 1 under section 460(b)(2)							
	contracts or section 167(g) for depreciation under the income			2b				
	(6)							
C	Credit for federal tax paid on fuels (see instructions)			2c				
	Total. Add lines 2a through 2c					2	d.	
	Subtract line 2d from line 1. If the result is less than \$500, do							
	does not owe the penalty		•			:	3	14,522.
4	Enter the tax shown on the corporation's 2022 income tax retu							
	or the tax year was for less than 12 months, skip this line and	entei	the amount from line 3 c	n line 5			4	23,846.
5	Required annual payment. Enter the smaller of line 3 or line	4. If	the corporation is require	d to skip line 4,				
	enter the amount from line 3						5	14,522.
Р	Part II Reasons for Filing - Check the boxes belo	w tha	at apply. If any boxes are o	checked, the corpo	ration	must file Form 2220		
	even if it does not owe a penalty. See instructions.							
6	The corporation is using the adjusted seasonal installr	nent	method.					
7	X The corporation is using the annualized income install	ment	method.					
8	X The corporation is a "large corporation" figuring its firs	st req	uired installment based o	n the prior year's t	ax.			
Р	art III Figuring the Underpayment							
			(a)	(b)		(c)		(d)
9	$\textbf{Installment due dates}. \ Enter in \ columns \ (a) \ \ through \ (d) \ the$							
	15th day of the 4th (Form 990-PF filers: Use 5th month),							
	6th, 9th, and 12th months of the corporation's tax year \dots	9	05/15/23	06/15/23		09/15/23		12/15/23
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,							
	enter 25% (0.25) of line 5 above in each column	10						
11	Estimated tax paid or credited for each period. For							
	column (a) only, enter the amount from line 11 on line 15.							
	See instructions	11	6,000.			4,00	0.	5,000.
	Complete lines 12 through 18 of one column							
	before going to the next column.							
12	Enter amount, if any, from line 18 of the preceding column	12		6,	000.	6,00	0.	10,000.
13	Add lines 11 and 12	13		6,	000.	10,00	0.	15,000.
14	Add amounts on lines 16 and 17 of the preceding column	14						
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	6,000.	6,	000.	10,00	0.	15,000.
16	If the amount on line 15 is zero, subtract line 13 from line							
	14. Otherwise, enter -0-	16						
17	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next							
	column. Otherwise, go to line 18	17						
18	Overpayment. If line 10 is less than line 15, subtract line 10							
	from line 15. Then go to line 12 of the next column	18	6 000.	6	000.	10 00	٥. ا	

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2023)

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

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
20	Number of days from due date of installment on line 9 to the date shown on line 19	20				
21	Number of days on line 20 after 4/15/2023 and before 7/1/2023	21				
22	Underpayment on line 17 x Number of days on line 21 x 7% (0.07)	22	\$	\$	\$	\$
23	Number of days on line 20 after 6/30/2023 and before 10/1/2023	23				
24	Underpayment on line 17 x Number of days on line 23 x 7% (0.07)	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2023 and before 1/1/2024	25				
26	Underpayment on line 17 x Number of days on line 25 x 8% (0.08)	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2023 and before 4/1/2024	27				
28	Underpayment on line 17 x Number of days on line 27 x 8% (0.08)	28	\$	\$	\$	\$
29	Number of days on line 20 after 3/31/2024 and before 7/1/2024	29				
30	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
31	Number of days on line 20 after 6/30/2024 and before 10/1/2024	31				
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2024 and before 1/1/2025	33				
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2024 and before 3/16/2025	35				
36	Underpayment on line 17 x Number of days on line 35 x *% 365	36	\$	\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
38	Penalty. Add columns (a) through (d) of line 37. Enter the to line for other income tax returns	tal he	ere and on Form 1120, lin	e 34; or the comparable	38	\$ 0.

Form **2220** (2023)

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

Form 2220 (2023) FORM 990-PF Page 3

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2020	1a [
b Tax year beginning in 2021	1b				
c Tax year beginning in 2022	1c				
2 Enter taxable income for each period for the tax year beginning in					
2023. See the instructions for the treatment of extraordinary items	2				
3 Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2020	3a				
b Tax year beginning in 2021	3b				
c Tax year beginning in 2022	3c				
4 Divide the amount in each column on line 1a by the					
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the					
amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
7 Add lines 4 through 6	7				
8 Divide line 7 by 3.0	8				
9a Divide line 2 by line 8	9a				
b Extraordinary items (see instructions)	9b				
c Add lines 9a and 9b	9c				
10 Figure the tax on the amt on In 9c using the instr for Form	30				
1120, Sch J, line 1, or comparable line of corp's return	10				
11a Divide the amount in columns (a) through (c) on line 3a	10				
by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b	114				
by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c					
by the amount in column (d) on line 3c	11c				
12 Add lines 11a through 11c	12				
	13				
13 Divide line 12 by 3.0	13				
by columns (a) through (c) of line 13. In column (d), enter					
the amount from line 10, column (d)	14				
15 Enter any alternative minimum tax (trusts only) for each	 '				
payment period. See instructions	15				
16 Enter any other taxes for each payment period. See instr.	16				
17 Add lines 14 through 16	17				
18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	18				
19 Total tax after credits. Subtract line 18 from line 17. If					
zero or less, enter -0-	19			1	

Form **2220** (2023)

FORM 990-PF Form 2220 (2023) Page 4

Part II Annualized Income Installment Method

		(a)	(b)	(c)	(d)
		First 2	First 4	First 7	First 10
20 Annualization periods (see instructions)	20	months	months	months	months
21 Enter taxable income for each annualization period. See					
instructions for the treatment of extraordinary items $\ \dots$	21				
22 Annualization amounts (see instructions)	22	6.000000	3.000000	1.714290	1.200000
23a Annualized taxable income. Multiply line 21 by line 22	23a				
b Extraordinary items (see instructions)	23b				
c Add lines 23a and 23b	23c				
24 Figure the tax on the amount on line 23c using the					
instructions for Form 1120, Schedule J, line 1,					
or comparable line of corporation's return	24				
25 Enter any alternative minimum tax (trusts only) for each					
payment period. See instructions	25				
26 Enter any other taxes for each payment period. See instr.	26				
27 Total tax. Add lines 24 through 26	27				
28 For each period, enter the same type of credits as allowed					
on Form 2220, lines 1 and 2c. See instructions	28				
29 Total tax after credits. Subtract line 28 from line 27. If					
zero or less, enter -0-	29				
30 Applicable percentage	30	25%	50%	75%	100%
31 Multiply line 29 by line 30	31				
Part III Required Installments					
Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th

rart III nequired installments	1				
Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
before completing the next column.		installment	installment	installment	installment
32 If only Part I or Part II is completed, enter the amount in					
each column from line 19 or line 31. If both parts are					
completed, enter the smaller of the amounts in each					
column from line 19 or line 31	32	0.	0.	0.	0.
33 Add the amounts in all preceding columns of line 38.					
See instructions	33				
34 Adjusted seasonal or annualized income installments.					
Subtract line 33 from line 32. If zero or less, enter -0	34				
35 Enter 25% (0.25) of line 5 on page 1 of Form 2220 in					
each column. Note: "Large corporations," see the					
instructions for line 10 for the amounts to enter	35	3,631.	3,630.	3,631.	3,630.
36 Subtract line 38 of the preceding column from line 37 of					
the preceding column	36		3,631.	7,261.	10,892.
97. Add lines 2F and 2C	37	3,631.	7,261.	10,892.	14,522.
37 Add lines 35 and 36	3/	3,031.	7,201.	10,052.	11,522.
38 Required installments. Enter the smaller of line 34 or					
line 37 here and on page 1 of Form 2220, line 10.	_	0		0	0
See instructions	38	0.	0.	0.	0.

Form **2220** (2023)

^{**} ANNUALIZED INCOME INSTALLMENT METHOD USING OPTION 1

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
CONDON O'MEARA MCGINTY & DONNELLY LLP - AUDIT & TAX SERVICES	28,500.	14,250.		14,250.	
TO FORM 990-PF, PG 1, LN 16B	28,500.	14,250.		14,250.	
FORM 990-PF (OTHER PROFES	SIONAL FEES	S	TATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED	(D) CHARITABLE PURPOSES	
SALESFORCE EXPENSES	7,904.	0.		0.	
ADMINISTRATIVE SERVICES (SEE STMT. 8) FIDUCIARY TRUST FEES (SEE	63,229.	9,484.		53,745.	
STMT. 8)	37,114.	37,114.		0.	
TO FORM 990-PF, PG 1, LN 16C	108,247.	46,598.		53,745.	
FORM 990-PF	TAX	ES	S	TATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED	(D) CHARITABLE PURPOSES	
EXCISE TAX	17,846.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	17,846.	0.		0.	
=					

FORM 990-PF	OTHER E	OTHER EXPENSES				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
COMMUNICATIONS OTHER ADMINISTRATIVE	48,233.	0.		48,233.		
SERVICES	14,758.	0.		14,758.		
INSURANCE	3,823.	0.		3,823.		
OTHER MISCELLANEOUS EXPENSES	11,880.	0.		11,880.		
TO FORM 990-PF, PG 1, LN 23	78,694.	0.		78,694.		

FORM 990-PF	CORPORATE STOCK		STATEMENT 5	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
PROVIDENT FINANCIAL SVCS INC COM	Ţ.	12,516,426.	12,516,426.	
ISHARES CORE S&P SMALL		203,185.	203,185.	
ISHARES GOLD ETF		186,173.	186,173.	
PACER BNCHMRK DT		227,404.	227,404.	
VANGUARD FTSE DEVELOPED		555,065.	555,065.	
VANGUARD FTSE EMERGING		223,872.	223,872.	
VANGUARD TOTAL STOCK MARKET ETF		682,008.	682,008.	
VANGUARD DIVIDEND		505,406.	505,406.	
VANGUARD SHORT TERM CORE		295,708.	295,708.	
JPMORGAN ULTRA SHORT		289,626.	289,626.	
ISHARES CORE-US AGG BOND ETF		401,566.	401,566.	
ISHARES 1-3YR. SHY		218,883.	218,883.	
TOTAL TO FORM 990-PF, PART II, I	INE 10B	16,305,322.	16,305,322.	

FORM 990-PF	EXPLANATION	CONCERNING	PART	VI-A,	LINE	8B	STATEMENT 6

EXPLANATION

IN ACCORDANCE WITH THE REQUIREMENTS OF THE NEW JERSEY CHARITIES REGISTRATION ACT, THE FOUNDATION IS NOT REQUIRED TO SUBMIT THE FORM 990-PF TO NEW JERSEY BECAUSE THE FOUNDATION DOES NOT SOLICIT CONTRIBUTIONS FROM NEW JERSEY RESIDENTS.

FORM 990-PF PART VII - LIST TRUSTEES AND	OF OFFICERS, D	STATEMENT 7		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DR. CARLOS HERNANDEZ, PH.D. 250 MADISON AVENUE MORRISTOWN, NJ 07960	CHAIRMAN 1.00	0.	0.	0.
CHRISTOPHER MARTIN 250 MADISON AVENUE MORRISTOWN, NJ 07960	PRESIDENT AND 2.00	DIRECTOR 0.	0.	0.
JOHN KUNTZ 250 MADISON AVENUE MORRISTOWN, NJ 07960	SECRETARY 2.00	0.	0.	0.
CARMINE TORRECUSO (SEE STMT. 8) 250 MADISON AVENUE MORRISTOWN, NJ 07960	TREASURER 5.00	17,792.	0.	0.
SAMANTHA PLOTINO (SEE STMT. 8) 250 MADISON AVENUE MORRISTOWN, NJ 07960	EXECUTIVE DIR		0.	0.
KAREN MCMULLEN 250 MADISON AVENUE MORRISTOWN, NJ 07960	DIRECTOR 1.00	4,000.	0.	0.
JEFFRIES SHEIN 250 MADISON AVENUE MORRISTOWN, NJ 07960	DIRECTOR 1.00	4,000.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VII	148,116.	0.	0.

FORM 990-PF

FIVE HIGHEST PAID CONTRACTORS FOR PROFESSIONAL SERVICES COMPENSATION EXPLANATION PART VII, LINE 3

STATEMENT 8

CONTRACTOR'S NAME

THE PROVIDENT BANK

COMPENSATION EXPLANATION

THE PROVIDENT BANK PAID (OR WAS REIMBURSED BY THE FOUNDATION) IN THE AMOUNT OF \$368,870, AS REPORTED ON PART VIII, LINE 3, FOR THE FOLLOWING SERVICES:

- 1. \$140,116 CARMINE TORRECUSO TREAS., & SAMANTHA PLOTINO, EXEC. DIR. (STMT. #7);
- 2. \$128,411 OTHER EMPLOYEE SALARIES AND WAGES (PART I, LINE 14);
- 3. \$37,114 FIDUCIARY TRUST FEES (STMT#2); AND
- 4. \$63,229 ADMINISTRATIVE SERVICES (STMT #2)

FORM 990-PF

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

STATEMENT 9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SAMANTHA PLOTINO, EXECUTIVE DIRECTOR THE PROVIDENT BANK FOUNDATION, P.O. BOX 1001 ISELIN, NJ 08830

TELEPHONE NUMBER

(862) - 260 - 3990

EMAIL ADDRESS

SAMANTHA.PLOTINO@PROVIDENT.BANK

FORM AND CONTENT OF APPLICATIONS

IF YOUR ORGANIZATION IS SEEKING A GRANT, THE BEST PLACE TO START IS TO REVIEW PBF GRANT GUIDELINES. PLEASE REFER TO WWW.THEPROVIDENTBANKFOUNDATION.ORG FOR INFORMATION.

IF YOU HAVE QUESTIONS, CONTACT THE PBF OFFICE AT FOUNDATION@PROVIDENT.BANK TO SCHEDULE A TIME TO REVIEW YOUR QUESTIONS.

AFTER REVIEWING THE GUIDELINES, APPLICATION LINKS CAN BE ACCESSED THROUGH THE APPLICATION SECTION OF THE ABOVE REFERENCED WEBSITE.

ANY SUBMISSION DEADLINES

PLEASE REFER TO DETAILS INDICATED ON WWW.THEPROVIDENTBANKFOUNDATION.ORG IN THE APPLICATION SECTION.

RESTRICTIONS AND LIMITATIONS ON AWARDS

ORGANIZATIONS SEEKING FUNDING FROM THE PROVIDENT BANK FOUNDATION MUST BE CERTIFIED AS A TAX EXEMPT PUBLIC CHARITY UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND CLASSIFIED AS "NOT A PRIVATE FOUNDATION" UNDER SECTION 509(A)(1) OR 509(A)(2). PBF SEEKS GRANTEE ORGANIZATIONS THAT SHOW PASSION FOR THEIR MISSION AND MEET HIGH STANDARDS OF GOVERNANCE, ACCOUNTABILITY, AND FISCAL MANAGEMENT.