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

OMB No 1545-0052

2010

Department of the Treasury
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2010, or tax year beginning , 2010, and ending

G Check all that apply ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

JOB HAINES HOME FOR AGED PEOPLE
250 BLOOMFIELD AVENUE
BLOOMFIELD, NJ 07003

A Employer identification number

22-0972180

B Telephone number (see the instructions)

973-743-0792

C If exemption application is pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the 85% test, check here and attach computation. ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. ☐

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

I Fair market value of all assets at end of year (from Part II, column (c), line 16) ☐ Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)

\$ 50,339,319.

Part I Analysis of Revenue and Expenses

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

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE				
1 Contributions, gifts, grants, etc., received (att sch)				
2 Ch <input checked="" type="checkbox"/> if the foundn is not req to att Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	1,955,541.	1,955,541.	1,955,541.	
5a Gross rents				
b Net rental income or (loss)				
6a Net gain/(loss) from sale of assets not on line 10	1,088,309.			
b Gross sales price for all assets on line 6a	7,471,687.			
7 Capital gain net income (from Part IV, line 2)		1,088,309.		
8 Net short-term capital gain			47,670.	
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit/(loss) (att sch)				
11 Other income (attach schedule) See Statement 1	6,879,232.			
12 Total. Add lines 1 through 11	9,923,082.	3,043,850.	2,003,211.	
13 Compensation of officers, directors, trustees, etc.	182,787.			182,787.
14 Other employee salaries and wages	4,171,304.			4,171,304.
15 Pension plans, employee benefits	161,389.			161,389.
16a Legal fees (attach schedule) See St. 2	30,457.			30,457.
b Accounting fees (attach sch) See St. 3	70,691.			70,691.
c Other prof fees (attach sch) See St. 4	77,573.	35,564.	35,564.	42,009.
17 Interest	16,724.			16,724.
18 Taxes (attach schedule)(see instr) See Stm 5	509,194.			509,194.
19 Depreciation (attach sch) and depletion	679,896.			
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) See Statement 6	2,859,317.			2,859,317.
24 Total operating and administrative expenses. Add lines 13 through 23	8,759,332.	35,564.	35,564.	8,043,872.
25 Contributions, gifts, grants paid				
26 Total expenses and disbursements. Add lines 24 and 25	8,759,332.	35,564.	35,564.	8,043,872.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	1,163,750.			
b Net investment income (if negative, enter -0-)		3,008,286.		
c Adjusted net income (if negative, enter -0-)			1,967,647.	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1	Cash — non-interest-bearing		518,612.	818,280.	818,280.
	2	Savings and temporary cash investments		224,230.	230,181.	230,181.
	3	Accounts receivable	329,324.			
		Less: allowance for doubtful accounts	16,921.	213,164.	312,403.	312,403.
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach sch.)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges		149,352.	125,080.	125,080.
	10a	Investments — U.S. and state government obligations (attach schedule)				
	b	Investments — corporate stock (attach schedule)				
	c	Investments — corporate bonds (attach schedule)				
	11	Investments — land, buildings, and equipment: basis				
	Less: accumulated depreciation (attach schedule)					
12	Investments — mortgage loans					
13	Investments — other (attach schedule) Statement 7		31,234,333.	35,974,629.	35,974,629.	
14	Land, buildings, and equipment: basis	18,736,144.				
	Less: accumulated depreciation (attach schedule) See Stmt 8	6,162,113.	12,986,986.	12,574,031.	12,574,031.	
15	Other assets (describe See Statement 9)		271,742.	304,715.	304,715.	
16	Total assets (to be completed by all filers — see instructions Also, see page 1, item I)		45,598,419.	50,339,319.	50,339,319.	
LIABILITIES	17	Accounts payable and accrued expenses		681,800.	809,573.	
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, & other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe See Statement 10)		6,305,000.	6,075,000.	
	23	Total liabilities (add lines 17 through 22)		6,986,800.	6,884,573.	
NET ASSETS OR FUND BALANCES	Foundations that follow SFAS 117, check here. and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/>					
	24	Unrestricted		38,611,619.	43,454,746.	
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here. and complete lines 27 through 31. <input type="checkbox"/>					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, building, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see the instructions)		38,611,619.	43,454,746.	
	31	Total liabilities and net assets/fund balances (see the instructions)		45,598,419.	50,339,319.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	38,611,619.
2	Enter amount from Part I, line 27a	2	1,163,750.
3	Other increases not included in line 2 (itemize) See Statement 11	3	3,679,377.
4	Add lines 1, 2, and 3	4	43,454,746.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	43,454,746.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	EQUITIES	P	Various	Various
b	EQUITIES	P	Various	Various
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	2,242,115.		2,194,445.	47,670.
b	5,229,572.		4,188,933.	1,040,639.
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
a				47,670.
b				1,040,639.
c				
d				
e				

2	Capital gain net income or (net capital loss). [If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7]	2	1,088,309.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): [If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8]	3	47,670.

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☐ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2009			
2008			
2007			
2006			
2005			

2	Total of line 1, column (d)	2	
3	Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years.	3	
4	Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	
5	Multiply line 4 by line 3	5	
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	
7	Add lines 5 and 6	7	
8	Enter qualifying distributions from Part XII, line 4	8	

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

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

1 a Exempt operating foundations described in section 4940(d)(2), check here <input checked="" type="checkbox"/> and enter 'N/A' on line 1. Date of ruling or determination letter: <u>1/14/74</u> (attach copy of letter if necessary – see instr.)		1	N/A
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	
3 Add lines 1 and 2		3	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	
6 Credits/Payments			
a 2010 estimated tax prmts and 2009 overpayment credited to 2010	6a		
b Exempt foreign organizations – tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7		
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		X
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		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation... ▶ \$ <u>0</u> . (2) On foundation managers... ▶ \$ <u>0</u> .		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers... ▶ \$ <u>0</u> .		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? ... If 'Yes,' attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes...		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see the instructions). <u>NJ</u>		
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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part XIV.	X	
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.		X

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Part VII-A Statements Regarding Activities (Continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions).	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>www.job-haines.org</u>	13	X	
14	The books are in care of <u>JOB HAINES HOME</u> Telephone no. <u>973-743-0792</u> Located at <u>250 BLOOMFIELD AVENUE BLMFLD, NJ BLOOMFIELD NJ</u> ZIP + 4 <u>07003</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <u>N/A</u> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u> <u>N/A</u>			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country.				

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

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

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? <input type="checkbox"/> <u>1b</u> <u>N/A</u>		
	Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010? <u>1c</u> <u>X</u>		
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 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
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 the instructions.) <u>2b</u> <u>N/A</u>		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.) <u>3b</u> <u>N/A</u>		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <u>4a</u> <u>X</u>		
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010? <u>4b</u> <u>X</u>		

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b N/A

Organizations relying on a current notice regarding disaster assistance check here

☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?N/A ☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No

6b X

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No

7b

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 12				
		165,176.	12,611.	5,000.

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ANGELA YEARWOOD	ADMINISTRATOR			
BLOOMFIELD, NJ 07003	40	107,932.	7,883.	0.
EVELLYN LEMY	DIR NURSING			
250 BLOOMFIELD AVE	40	128,660.	9,595.	0.
BLOOMFIELD, NJ 07003				
DEVON GROSS	DIR AL NURSI			
BLOOMFIELD, NJ 07003	40	109,559.	8,017.	0.
JAEQUINE COLLINS	NURSE SUPERVI			
250 BLOOMFIELD AVE	40	84,635.	5,958.	0.
BLOOMFIELD, NJ 07003				
NHINIKA NDICHIE	NURISING STAF			
250 BLOOMFIELD AVE	40	82,926.	5,817.	0.
BLOOMFIELD, NJ 07003				

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SYNERTX THERAPIES 7540 NORTH 19TH AVENUE SUITE 200 PHOENIX, AZ 85021	THERAPY	334,348.
Total number of others receiving over \$50,000 for professional services		0

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1 PROVIDING HEALTH AND RESIDENT CARE FOR THE ELDERLY	
2	
3	
4	

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

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

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	32,216,859.
b Average of monthly cash balances	1b	387,310.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	32,604,169.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	32,604,169.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	489,063.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	32,115,106.
6 Minimum investment return. Enter 5% of line 5	6	1,605,755.

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

1 Minimum investment return from Part X, line 6 N/A	1	
2a Tax on investment income for 2010 from Part VI, line 5	2a	
b Income tax for 2010 (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	8,043,872.
b Program-related investments — total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . .	2	266,941.
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4. . . .	4	8,310,813.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,310,813.

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

Part XIII Undistributed Income (see instructions)

N/A

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7.				
2 Undistributed income, if any, as of the end of 2010:				
a Enter amount for 2009 only				
b Total for prior years: 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e				
4 Qualifying distributions for 2010 from Part XII, line 4. \$				
a Applied to 2009, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2010 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount — see instructions.				
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount — see instructions.				
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a.				
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

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

1 If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling 1/14/74

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

	Prior 3 years				(e) Total
	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					N/A
b 85% of line 2a					N/A
c Qualifying distributions from Part XII, line 4 for each year listed	8,310,813.	8,073,292.	7,066,801.	6,623,961.	30,074,867.
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	8,310,813.	8,073,292.	7,066,801.	6,623,961.	30,074,867.
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test – enter:					
(1) Value of all assets					N/A
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					N/A
b 'Endowment' alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	1,070,503.	933,511.	1,105,258.	1,666,566.	4,775,838.
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)					N/A
(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					N/A
(4) Gross investment income					N/A

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year – see instructions.)

1 Information Regarding Foundation Managers:

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

None

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

None

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

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

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

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

c Any submission deadlines:

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

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

N/A

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
Total.				3a
b Approved for future payment				
Total.				3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1	Program service revenue.					
a	See Statement 13				6,879,232.	
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					
4	Dividends and interest from securities			3	1,955,541.	
5	Net rental income or (loss) from real estate.					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			3	1,088,309.	
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)				9,923,082.	
13	Total. Add line 12, columns (b), (d), and (e).					9,923,082.

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

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

[illegible]

JOB HAINES HOME FOR AGED PEOPLE

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Statement 1
Form 990-PF, Part I, Line 11
Other Income

	(a) Revenue per Books	(b) Net Investment Income	(c) Adjusted Net Income
CO INSURANCE	\$ 13,781.		
GIFTS AND LEGACIES	365.		
MEDICAIDE RIEMBURSEMENTS	937,350.		
MEDICAIDE OFFSETS	-155,055.		
MEDICARE A	1,544,638.		
MEDICARE PART B	28,261.		
MISCELANEOUS	21,307.		
PER DIEM INCOME	4,382,673.		
RESIDENT FEES	36,739.		
ROOM AND BOARD HOSPICE	69,173.		
Total	\$ 6,879,232.	\$ 0.	\$ 0.

Statement 2
Form 990-PF, Part I, Line 16a
Legal Fees

	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
.....	\$ 30,457.			\$ 30,457.
Total	\$ 30,457.	\$ 0.	\$ 0.	\$ 30,457.

Statement 3
Form 990-PF, Part I, Line 16b
Accounting Fees

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
AUDIT	\$ 21,763.			\$ 21,763.
CONSULTANT	48,928.			48,928.
Total	\$ 70,691.	\$ 0.	\$ 0.	\$ 70,691.

Statement 4
Form 990-PF, Part I, Line 16c
Other Professional Fees

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
COMPUTER FEES	\$ 14,749.			\$ 14,749.
CUSTODY FEES	35,564.	\$ 35,564.	\$ 35,564.	
ENERGY CONSULTANT	15,280.			15,280.
HEALTHCARE RESOURCES	9,940.			9,940.

JOB HAINES HOME FOR AGED PEOPLE

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Statement 4 (continued)
Form 990-PF, Part I, Line 16c
Other Professional Fees

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
PENSION FEES...	\$ 2,040.			\$ 2,040.
Total	\$ 77,573.	\$ 35,564.	\$ 35,564.	\$ 42,009.

Statement 5
Form 990-PF, Part I, Line 18
Taxes

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
NJ PROVIDER ASSESSMENT.	\$ 131,665.			\$ 131,665.
PAYROLL	377,529.			377,529.
Total	\$ 509,194.	\$ 0.	\$ 0.	\$ 509,194.

Statement 6
Form 990-PF, Part I, Line 23
Other Expenses

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
ACTIVITY EXPENSE.	\$ 21,001.			\$ 21,001.
ADVERTISING AND HELP WANTED.	1,420.			1,420.
AUTO AND TRAVEL.	2,961.			2,961.
BOND FEES.	90,959.			90,959.
BOOKS AND JOURNALS.	1,596.			1,596.
CABLE SERVICES.	12,112.			12,112.
COMPUTER SOFTWARE	23,955.			23,955.
FURNISHINGS.	1,098.			1,098.
HEALTH CARE RESIDENT COSTS.	261,759.			261,759.
HEALTH INSURANCE	657,582.			657,582.
HOUSEKEEPING.	39,384.			39,384.
INSURANCE LIABILITY.	165,237.			165,237.
INSURANCE WORKMENS COMP	108,434.			108,434.
LAUNDRY SERVICES	51,891.			51,891.
LICENSES AND DUES.	13,693.			13,693.
MARKETING EXPENSE	35,030.			35,030.
OFFICE SUPPLIES.	18,934.			18,934.
OTHER ADMIN EXPENSES.	13,843.			13,843.
OTHER EXECUTIVE EXPENSES.	16,001.			16,001.
PROVISIONS AND SERVICES	305,220.			305,220.
REPAIRS AND MAINTENANCE.	254,204.			254,204.
RESERVE FOR BAD DEBTS.	16,921.			16,921.
SECURITY	84,701.			84,701.
SEMINARS AND EDUCATION.	11,759.			11,759.
SMALL EQUIPMENT.	2,445.			2,445.
TELEPHONE	42,103.			42,103.
THERAPIES.	310,714.			310,714.

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Statement 6 (continued)
Form 990-PF, Part I, Line 23
Other Expenses

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
UTILITIES...	\$ 294,360.			\$ 294,360.
Total	<u>\$ 2,859,317.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 2,859,317.</u>

Statement 7
Form 990-PF, Part II, Line 13
Investments - Other

	Valuation Method	Book Value	Fair Market Value
Other Publicly Traded Securities			
EQUITIES AND BONDS	Mkt Val	\$ 35,974,629.	\$ 35,974,629.
Total		<u>\$ 35,974,629.</u>	<u>\$ 35,974,629.</u>

Statement 8
Form 990-PF, Part II, Line 14
Land, Buildings, and Equipment

Category	Basis	Accum. Deprec.	Book Value	Fair Market Value
Auto./Transportation Equip.	\$ 76,641.	\$ 30,619.	\$ 46,022.	\$ 46,022.
Furniture and Fixtures	1,132,773.	763,869.	368,904.	368,904.
Machinery and Equipment	1,172,578.	664,075.	508,503.	508,503.
Buildings	15,333,179.	4,531,834.	10,801,345.	10,801,345.
Improvements	898,510.	151,646.	746,864.	746,864.
Miscellaneous	122,463.	20,070.	102,393.	102,393.
Total	<u>\$ 18,736,144.</u>	<u>\$ 6,162,113.</u>	<u>\$ 12,574,031.</u>	<u>\$ 12,574,031.</u>

Statement 9
Form 990-PF, Part II, Line 15
Other Assets

	Book Value	Fair Market Value
PERSONAL NEEDS.	\$ 7,499.	\$ 7,499.
RESIDENT ESCROW.	297,216.	297,216.
Total	<u>\$ 304,715.</u>	<u>\$ 304,715.</u>

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Statement 10
Form 990-PF, Part II, Line 22
Other Liabilities

Tax Exempt Bond LiabilitiesBalance Due

Purpose of Issue: BUILDING EXPANSION
 Third Party Information:
 Third Party % of Space Used: 0
 Issue Date: 11/15/1998
 Original Issue Amount: 8,000,000.
 Type of Form 8038 Filed: Form 8038
 Form 8038 Filing Date:
 Bond Retirement Date: 2/28/2028
 Project Completion Date: 12/31/2000
 Unexpended Bond Proceeds: 0.
 Outstanding Issue Amount: \$ 6,075,000.

Total \$ 6,075,000.

Statement 11
Form 990-PF, Part III, Line 3
Other Increases

UNREALIZED GAIN \$ 3,679,377.
 Total \$ 3,679,377.

Statement 12
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
GEMMA SULLIVAN 250 BLOOMFIELD AVE BLOOMFIELD, NJ 07003	President 0	\$ 0.	\$ 0.	\$ 0.
JOHN REDMAN 250 BLOOMFIELD AVE BLOOMFIELD, NJ 07003	Vice President 0	0.	0.	0.
LARRY RIELLY 259 BLOOMFIELD AVE BLOOMFIELD, NJ 07003	Secretary 0	0.	0.	0.
MICHAEL BRISTOL 250 BLOOMFIELD AVE BLOOMFIELD, NJ 07003	Treasurer 0	0.	0.	0.

JOB HAINES HOME FOR AGED PEOPLE

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Statement 12 (continued)
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
H. BARTLETT BROWN 250 BLOOMFIELD AVE BLOOMFIELD, NJ 07003	ASST TREASURER 0	\$ 0.	\$ 0.	\$ 0.
NOREEN HAVERON 250 BLOOMFIELD AVE BLOOMFIELD, NJ 07003	Executive Direc 45.00	165,176.	12,611.	5,000.
Total		\$ 165,176.	\$ 12,611.	\$ 5,000.

Statement 13
Form 990-PF, Part XVI-A, Line 1
Program Service Revenue

Program Service Revenue	(A) Busi- ness Code	(B) Unrelated Business Amount	(C) Exclu- sion Code	(D) Excluded Amount	(E) Related or Exempt Function
CO INSURANCE			3	\$ 13,781.	
GIFTS AND LEGACIES			3	365.	
MEDICAIDE RIEMBURSEMENTS			3	937,350.	
MEDICAIDE OFFSETS			3	-155,055.	
MEDICARE A			3	1,544,638.	
MEDICARE PART B			3	28,261.	
MISCELANEOUS			3	21,307.	
PER DIEM INCOME			3	4,382,673.	
RESIDENT FEES			3	36,739.	
ROOM AND BOARD HOSPICE			3	69,173.	
Total		\$ 0.		\$ 6,879,232.	\$ 0.

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization		Employer identification number
	JOB HAINES HOME FOR AGED PEOPLE		22-0972180
	Number, street, and room or suite number. If a P.O. box, see instructions.		
	250 BLOOMFIELD AVENUE		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	BLOOMFIELD, NJ 07003		

Enter the Return code for the return that this application is for (file a separate application for each return) **04**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of. ► JOB HAINES HOME

FAX No. ► 973-743-1182

business in the United States, check this box ☐

digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐ and attach a list with the names and EINs of all members

ation required to file Form 990-T) extension of time
organization return for the organization named above.

, and ending _____, 20 ____

This, check reason: ☐ Initial return ☐ Final return

720, or 6069, enter the tentative tax, less any	3a	\$	0.
6069, enter any refundable credits and estimated tax allowed as a credit	3b	\$	0.
or payment with this form, if required, by using instructions	3c	\$	0.

Caution. If you are going to make an electronic filing, follow the instructions on this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Paperwork Reduction Act Notice, see Instructions.Form **8868** (Rev. 1-2011)

Affidavit from
The Progress
Caldwell, New Jersey

STATE OF NEW JERSEY}
COUNTY OF ESSEX } ss.:

Mary Carroll, being duly sworn according
to law on her oath, saith that she is a clerk
in the office of THE PROGRESS, a public
newspaper which is published in Caldwell,
in the County of Essex, and that the notice
of which the annexed is a copy, was
published in said newspaper on:


APR 28 2011


Mary Carroll

Sworn to and subscribed before me this

APR 28 2011

day of



Diane Howard
Notary Public
New Jersey
My Commission Expires April 23, 2014

PUBLIC NOTICES

Public Notice

**NOTICE OF AVAILABILITY OF
ANNUAL REPORT OF JOB HAINES HOME**

TO WHOM IT MAY CONCERN: I take notice that the annual report for the Job Haines Home for the year ending December 31, 2010 required by Section 8056 of the International Revenue Code is available for inspection at the principal office of the Job Haines Home, 250 Bloomfield Avenue, Bloomfield, NJ during regular business hours, by any citizen who requests it within 18 days after the publication of this Notice of Availability.

Requests to inspect the annual report should be made to the undersigned President of Job Haines Home at the principal office as above stated.

Be it also known that the Job Haines Home does not discriminate as to sex, race, color, or creed.

Noreen Haveron,
President
06/03/11

P.F.\$11.73