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Form 990-PF

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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

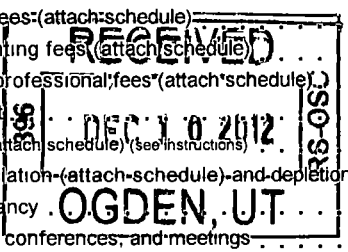
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2011 or tax year beginning , 2011, and ending , 20

Name of foundation: THE ENKES CHARITABLE FOUNDATION TRUST
Employer identification number: 11-6573719
Address: 1748 49TH STREET, BROOKLYN, NY 11204
G Check all that apply: Initial return, Final return, Address change
H Check type of organization: Section 501(c)(3) exempt private foundation
J Accounting method: Cash

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12), Operating and Administrative Expenses (13-26), and Net Investment Income (27).

SCANNED JAN 04 2013 Operating and Administrative Expenses



gla 12

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	24,127.	1,611.	1,611.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶ Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10 a	Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule) ATCH 5	371,571.	378,274.	513,552.
	c	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis ▶ Less accumulated depreciation (attach schedule) ▶	1,000,000. 1,000,000.	1,000,000.	1,000,000.
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ Less accumulated depreciation (attach schedule) ▶			
15	Other assets (describe ▶ ATCH 6)	35,000.	8,000.	8,000.	
16	Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	1,430,698.	1,387,885.	1,523,163.	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)	0	0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>				
	27	Capital stock, trust principal, or current funds			
28	Paid-in or capital surplus, or land, bldg, and equipment fund				
29	Retained earnings, accumulated income, endowment, or other funds	1,430,698.	1,387,885.		
30	Total net assets or fund balances (see instructions)	1,430,698.	1,387,885.		
31	Total liabilities and net assets/fund balances (see instructions)	1,430,698.	1,387,885.		

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)	1,430,698.
2	Enter amount from Part I, line 27a	-43,982.
3	Other increases not included in line 2 (itemize) ▶ ATTACHMENT 7	1,169.
4	Add lines 1, 2, and 3	1,387,885.
5	Decreases not included in line 2 (itemize) ▶	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	1,387,885.

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 shs MLC Co)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	SEE PART IV SCHEDULE			
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a				
b				
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	3,612.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	0

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

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 (col (b) divided by col (c))
2010	221,906.	1,475,007.	0.150444
2009	212,771.	1,446,589.	0.147085
2008	226,942.	1,526,244.	0.148693
2007	148,168.	1,173,155.	0.126299
2006	158,832.	1,114,998.	0.142450
2	Total of line 1, column (d)		2 0.714971
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 0.142994
4	Enter the net value of noncharitable-use assets for 2011 from Part X, line 5		4 1,425,474.
5	Multiply line 4 by line 3		5 203,834.
6	Enter 1% of net investment income (1% of Part I, line 27b)		6 216.
7	Add lines 5 and 6		7 204,050.
8	Enter qualifying distributions from Part XII, line 4 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		8 305,145.

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

Table with 11 rows for excise tax calculations. Includes categories like 'Exempt operating foundations', 'Domestic foundations', 'Tax under section 511', 'Credits/Payments', and 'Tax due'. Total tax due is 216.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political influence, expenditures, and reporting requirements. Includes sub-questions 1a-1c, 2, 3, 4a-4b, 5, 6, 7, 8a-8b, 9, and 10.

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)
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)
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
Website address N/A
14 The books are in care of THE ENKESSE CHARITABLE FOUNDATI Telephone no 212-730-1112
Located at 1748 49TH ST BROOKLYN, NY ZIP + 4 11204
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year
16 At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for 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.
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?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(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)?
(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).
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)? Organizations relying on a current notice regarding disaster assistance check here
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 2011?
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 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? 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)
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?
b If "Yes," did it have excess business holdings in 2011 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 2011)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
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 2011?

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... (2) Influence the outcome of any specific public election... (3) Provide a grant to an individual for travel... (4) Provide a grant to an organization other than a charitable... (5) Provide for any purpose other than religious... b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify... c If the answer is "Yes" to question 5a(4), does the foundation claim exemption... 6a Did the foundation, during the year, receive any funds... 6b Did the foundation, during the year, pay premiums... 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b 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).

Table with 5 columns: (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. Row 1: ATTACHMENT 8, 0, 0, 0.

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

Table with 5 columns: (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. Row 1: NONE.

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

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."

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, (c) Compensation. Row 1 contains 'NONE'.

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

Part IX-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activities and Expenses. Row 1 contains 'N/A'.

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

Table with 2 columns: Description of investments and Amount. Row 1 contains 'NONE'.

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	428,592.
b	Average of monthly cash balances	1b	18,590.
c	Fair market value of all other assets (see instructions)	1c	1,000,000.
d	Total (add lines 1a, b, and c)	1d	1,447,182.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,447,182.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	21,708.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,425,474.
6	Minimum investment return. Enter 5% of line 5	6	71,274.

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

1	Minimum investment return from Part X, line 6	1	71,274.
2a	Tax on investment income for 2011 from Part VI, line 5	2a	216.
b	Income tax for 2011 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	216.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	71,058.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	71,058.
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	71,058.

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	305,145.
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	
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	305,145.
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	216.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	304,929.

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)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				71,058.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only				
b Total for prior years 20 09, 20 08, 20 07				
3 Excess distributions carryover, if any, to 2011				
a From 2006	158,961.			
b From 2007	148,456.			
c From 2008	226,965.			
d From 2009	212,928.			
e From 2010	148,492.			
f Total of lines 3a through e	895,802.			
4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 305,145.				
a Applied to 2010, 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 2011 distributable amount				71,058.
e Remaining amount distributed out of corpus	234,087.			
5 Excess distributions carryover applied to 2011 (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:	1,129,889.			
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 2010 Subtract line 4a from line 2a Taxable amount - see instructions				
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				
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 2006 not applied on line 5 or line 7 (see instructions)	158,961.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	970,928.			
10 Analysis of line 9				
a Excess from 2007	148,456.			
b Excess from 2008	226,965.			
c Excess from 2009	212,928.			
d Excess from 2010	148,492.			
e Excess from 2011	234,087.			

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

NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Table with columns: Tax year (a) 2011, (b) 2010, Prior 3 years (c) 2009, (d) 2008, (e) Total

b 85% of line 2a

c Qualifying distributions from Part XII, line 4 for each year listed

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c

3 Complete 3a, b or c for the alternative test relied upon

a "Assets" alternative test - enter

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

c "Support" alternative test - enter

(1) Total support other than gross investment income (interest dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

(3) Largest amount of support from an exempt organization

(4) Gross investment income

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

1 Information Regarding Foundation Managers:

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

ANDRE ENGEL

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

ANDRE ENGEL

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

Check here [X] 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

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
<p>a Paid during the year</p> <p>ATTACHMENT 9</p>				
<p>Total ▶ 3a</p>				<p>291,452.</p>
<p>b Approved for future payment</p>				
<p>Total ▶ 3b</p>				

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

2011

Name of the organization THE ENKESSE CHARITABLE FOUNDATION TRUST	Employer identification number 11-6573719
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Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

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

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

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

Name of organization THE ENKES CHARITABLE FOUNDATION TRUST

Employer identification number
11-6573719**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANDRE ENGEL 1748 49TH STREET BROOKLYN, NY 11204	\$ 95,586.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	STAR SNACKS LLC 105 HARBOR DRIVE JERSEY CITY, NJ 07305	\$ 65,625.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
3	GERSHON ENGEL C/O GEL SPICE - 48 HOOK ROAD BAYONNE, NJ 07002	\$ 16,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
4	AARON STAHL C/O GEL SPICE - 48 HOOK ROAD BAYONNE, NJ 07002	\$ 16,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
5	SHERMAN ENGEL C/O GEL SPICE - 48 HOOK ROAD BAYONNE, NJ 07002	\$ 16,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
6	PHILIP ROTH C/O GEL SPICE - 48 HOOK ROAD BAYONNE, NJ 07002	\$ 16,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization THE ENKES CHARITABLE FOUNDATION TRUST	Employer identification number 11-6573719
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	JACOB ENGEL ----- C/O GEL SPICE - 48 HOOK ROAD ----- BAYONNE, NJ 07002 -----	\$ 16,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization **THE ENKES CHARITABLE FOUNDATION TRUST**

Employer identification number

11-6573719

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

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

Name of organization THE ENKES CHARITABLE FOUNDATION TRUST

Employer identification number

11-6573719

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

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

**FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL CAPITAL GAIN DISTRIBUTIONS					1,044.	
26,709.		MERRILL LYNCH PROPERTY TYPE: SECURITIES 24,141.				P	01/01/2010	12/31/2011
						2,568.		
TOTAL GAIN (LOSS)							<u>3,612.</u>	

ATTACHMENT 1

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
INTEREST & DIVIDENDS FROM SECURITIES	18,256.	18,256.
TOTAL	<u>18,256.</u>	<u>18,256.</u>

ATTACHMENT 2

FORM 990PF, PART I - OTHER INCOME

<u>DESCRIPTION</u>	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
UNRECAP SEC 1250 GAIN	227.	227.
TOTALS	<u>227.</u>	<u>227.</u>

ATTACHMENT 3

FORM 990PF, PART I - TAXES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
FOREIGN TAXES WITHHELD	521.	521.
EPTL FILING FEE	250.	
EXCISE TAX	168.	
TOTALS	<u>939.</u>	<u>521.</u>

ATTACHMENT 4

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS
INSURANCE	13,693.
BANK CHARGES	1,920.
TOTALS	<u>15,613.</u>

CHARITABLE PURPOSES	13,693.
	<u>13,693.</u>

ATTACHMENT 5

FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
MERRILL LYNCH NORTHWESTERN MUTUAL JEFFREY MATTEWS	378,274.	513,552.
TOTALS	<u>378,274.</u>	<u>513,552.</u>

ATTACHMENT 6

FORM 990PF, PART II - OTHER ASSETS

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
VARIOUS LOANS RECEIVABLE	8,000.	8,000.
TOTALS	<u>8,000.</u>	<u>8,000.</u>

ATTACHMENT 7FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
DISTRIBUTION - RETURN OF PRINCIPAL	1,169.
TOTAL	<u>1,169.</u>

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 8

TITLE AND AVERAGE HOURS PER
WEEK DEVOTED TO POSITION

NAME AND ADDRESS

ANDRE ENGEL
1748 49TH STREET
BROOKLYN, NY 11204

0

0

0

GRAND TOTALS

FORM 990FF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 9

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

SEE ATTACHED SCHEDULE

NONE

TO FUND CHARITABLE EXEMPT PURPOSE

291,452.

SEE ATTACHED SCHEDULE

CHARITY

TOTAL CONTRIBUTIONS PAID

291,452.

**SCHEDULE D
(Form 1041)**

Capital Gains and Losses

OMB No 1545-0092

2011

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).**

Name of estate or trust

THE ENKESS CHARITABLE FOUNDATION TRUST

Employer identification number

11-6573719

Note: Form 5227 filers need to complete *only* Parts I and II

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a					

b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b	1b	16.
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	2	
3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts	3	
4 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2010 Capital Loss Carryover Worksheet	4	()
5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back ▶	5	16.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a					

b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b	6b	2,568.
7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824	7	
8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts	8	
9 Capital gain distributions	9	1,044.
10 Gain from Form 4797, Part I	10	
11 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2010 Capital Loss Carryover Worksheet	11	()
12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back ▶	12	3,612.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2011

Part III Summary of Parts I and II		(1) Beneficiaries' (see instr)	(2) Estate's or trust's	(3) Total
Caution: Read the instructions before completing this part.				
13	Net short-term gain or (loss)	13		16.
14	Net long-term gain or (loss):			
a	Total for year	14a		3,612.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b		
c	28% rate gain	14c		
15	Total net gain or (loss). Combine lines 13 and 14a	15		3,628.

Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary

Part IV Capital Loss Limitation	
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of a The loss on line 15, column (3) or b \$3,000
16	()

Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part **only** if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero
Caution: Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if
 • Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or
 • Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part **only** if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero

17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17		
18	Enter the smaller of line 14a or 15 in column (2) but not less than zero	18		
19	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	19		
20	Add lines 18 and 19	20		
21	If the estate or trust is filing Form 4952, enter the amount from line 4g, otherwise, enter -0-	21		
22	Subtract line 21 from line 20 If zero or less, enter -0-	22		
23	Subtract line 22 from line 17 If zero or less, enter -0-	23		
24	Enter the smaller of the amount on line 17 or \$2,300	24		
25	Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> Yes. Skip lines 25 and 26, go to line 27 and check the "No" box <input type="checkbox"/> No. Enter the amount from line 23.	25		
26	Subtract line 25 from line 24.	26		
27	Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> No. Enter the smaller of line 17 or line 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
29	Subtract line 28 from line 27	29		
30	Multiply line 29 by 15% (15)	30		
31	Figure the tax on the amount on line 23 Use the 2011 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	31		
32	Add lines 30 and 31	32		
33	Figure the tax on the amount on line 17 Use the 2011 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	33		
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36)	34		

**THE ENKESSE CHARITABLE FOUNDATION TRUST
LIST OF CONTRIBUTIONS, GIFTS, GRANTS PAID
FOR THE YEAR ENDED DECEMBER 31, 2011**

<u>CHECK NUMBER</u>	<u>CHARITABLE ORGANIZATION</u>	<u>AMOUNT</u>	<u>Total</u>
1000	ADNEY KODESH	2,280	<u>2,280</u>
795	AHAVAS CHESES	2,000	
989	AHAVAS CHESES	1,000	
1079	AHAVAS CHESES	250	
1098	AHAVAS CHESES	360	
	Subtotal	<u>3,610</u>	<u>3,610</u>
693	ALIM LITRUFA	360	
953	ALIM LITRUFA	180	
1084	ALIM LITRUFA	360	
	Subtotal	<u>900</u>	<u>900</u>
661	AMERICAN FRIENDS OF OHEV	18,000	<u>18,000</u>
756	AMERICAN FRIEDNS OF YESHIVA	180	
869	AMERICAN FRIEDNS OF YESHIVA	180	
	Subtotal	<u>360</u>	<u>360</u>
675	ANSHA MAMED	360	<u>360</u>
1011	ATERES MOSHE	250	<u>250</u>
905	ATERES YISSOCHOR DOV	254	<u>254</u>
893	BELZ INSTITUTIONS	1,000	
895	BELZ INSTITUTIONS	5,000	
909	BELZ INSTITUTIONS	50	
923	BELZ INSTITUTIONS	180	
930	BELZ INSTITUTIONS	4,000	
1016	BELZ INSTITUTIONS	2,500	
	Subtotal	<u>12,730</u>	<u>12,730</u>
697	BETH MEDROSH OF MONSEY	275	<u>275</u>
1035	BETH SHMUEL TAWI	250	<u>250</u>
826	BONEI OLAM	250	
1036	BONEI OLAM	500	

	Subtotal	750	750
705	CHAIM VCHESED	<u>360</u>	<u>360</u>
812	CHESED BELZ	180	
899	CHESED BELZ	101	
937	CHESED BELZ	180	
1028	CHESED BELZ	<u>250</u>	
	Subtotal	711	711
769	CONG BAIS MALKA	1,000	
850	CONG BAIS MALKA	<u>25,000</u>	
	Subtotal	26,000	26,000
1046	CONG BAIS YISROEL	<u>1,800</u>	<u>1,800</u>
781	CONG BEIR MAYIM	180	
1095	CONG BEIR MAYIM	180	
969	CONG BEIR MAYIM	<u>250</u>	
	Subtotal	610	610
679	CONG BELZ	250	
680	CONG BELZ	100	
757	CONG BELZ	100	
768	CONG BELZ	180	
842	CONG BELZ	100	
1034	CONG BELZ	180	
1054	CONG BELZ	50	
787	CONG BELZ	1,000	
863	CONG BELZ	250	
1021	CONG BELZ	<u>1,150</u>	
	Subtotal	3,360	3,360
918	CONG BETH HALEVY	250	
970	CONG BETH HALEVY	250	
1100	CONG BETH HALEVY	<u>250</u>	
	Subtotal	750	750
906	CONG BETH MORDCHE	500	
1050	CONG BETH MORDCHE	500	
807	CONG BETH MOTDCHE	<u>750</u>	
	Subtotal	1,750	1,750
708	CONG BETH YECHIEL	250	
945	CONG BETH YECHIEL	<u>250</u>	
	Subtotal	500	500

676	CONG CHASIDEI BELZ	380	
682	CONG CHASIDEI BELZ	250	
748	CONG CHASIDEI BELZ	180	
1073	CONG CHASIDEI BELZ	130	
972	CONG CHASIDEI BELZ	1,360	
	Subtotal	<u>2,300</u>	<u>2,300</u>
813	CONG KAHAL YESHAYE	5,000	
870	CONG KAHAL YESHAYE	250	
929	CONG KAHAL YESHAYE	250	
	Subtotal	<u>5,500</u>	<u>5,500</u>
809	CONG MACHAIKEL HADAS	360	<u>360</u>
847	CONG NACHLAS MOSHE	180	
1041	CONG NACHLAS MOSHE	250	
	Subtotal	<u>430</u>	<u>430</u>
741	CONG NAIS MORDCHAI	100	
691	CONG NAIS MORDCHAI	500	
	Subtotal	<u>600</u>	<u>600</u>
836	CONG NETZACH YISROEL	5,000	
904	CONG NETZACH YISROEL	5,000	
		<u>10,000</u>	<u>10,000</u>
1072	CONG OF QUAKER HILL	360	<u>360</u>
737	CONG OHEL YESHUA	250	
745	CONG OHEL YESHUA	360	
859	CONG OHEL YESHUA	250	
957	CONG OHEL YESHUA	5,000	
961	CONG OHEL YESHUA	360	
1022	CONG OHEL YESHUA	180	
	Subtotal	<u>6,400</u>	<u>6,400</u>
709	CONG OHR SHULEM	250	
922	CONG OHR SHULEM	275	
	Subtotal	<u>525</u>	<u>525</u>
689	CONG OR YOSEF	250	<u>250</u>
659	CONG SAR SHULEM	100	
694	CONG SAR SHULEM	180	
695	CONG SAR SHULEM	100	
719	CONG SAR SHULEM	100	
728	CONG SAR SHULEM	180	

731	CONG SAR SHULEM	360	
738	CONG SAR SHULEM	500	
751	CONG SAR SHULEM	180	
800	CONG SAR SHULEM	100	
852	CONG SAR SHULEM	50	
854	CONG SAR SHULEM	50	
860	CONG SAR SHULEM	50	
908	CONG SAR SHULEM	100	
1086	CONG SAR SHULEM	500	
	Subtotal	<u>2,550</u>	<u>2,550</u>
946	CONG SHOMREY EMUNIM	<u>250</u>	<u>250</u>
808	EIZER BRUCHA	<u>1,000</u>	<u>1,000</u>
992	GRAND RABBI ROKEACH	<u>360</u>	<u>360</u>
867	HATOLAH OF BORO PARK	18,000	
901	HATOLAH OF BORO PARK	<u>7,000</u>	
	Subtotal	<u>25,000</u>	<u>25,000</u>
1058	HEICHAL YITZCHOK SANKA	<u>250</u>	<u>250</u>
1002	HEICHEL YITZCHOK	<u>250</u>	<u>250</u>
977	IZER BRUCHA	<u>360</u>	<u>360</u>
1092	KAHAL TORAS CHAIM	<u>5,000</u>	<u>5,000</u>
936	KAHAL YETEV LEV	<u>800</u>	<u>800</u>
814	KEREN MENACHEM	<u>500</u>	<u>500</u>
938	KINYAN SEFORIM	<u>250</u>	<u>250</u>
902	KIPAS BLEV ECHAD	<u>360</u>	<u>360</u>
825	KOLEL CHIBAS YERUSHLOTIM	250	
916	KOLEL CHIBAS YERUSHLOTIM	<u>4,000</u>	
	Subtotal	<u>4,250</u>	<u>4,250</u>
699	KOLEL BELZ	180	
891	KOLEL BELZ	500	
955	KOLEL BELZ	100	
	Subtotal	<u>780</u>	<u>780</u>

1071	KOLEL OHEL YESOSCHOR	<u>3,600</u>	<u>3,600</u>
995	KR SERVICES	<u>300</u>	<u>300</u>
868	MACHAIKEI TORAH	<u>500</u>	<u>500</u>
678	MACHAUKEI HADAS	500	
830	MACHAUKEI HADAS	<u>360</u>	
	Subtotal	860	860
890	MACHON LEREBUNIM	1,000	
669	MECHON LEREBUNIM	<u>1,000</u>	
	Subtotal	2,000	2,000
749	MEIR BAL HANES	<u>250</u>	<u>250</u>
866	MERKAZ HAKOLILIM	<u>500</u>	<u>500</u>
641	MERKAZ OLUMI	18,000	
827	MERKAZ OLUMI	1,450	
843	MERKAZ OLUMI	1,500	
840	MERKAZ OLUMI	25,000	
997	MERKAZ OLUMI	<u>1,800</u>	
	Subtotal	47,750	47,750
740	NACHAS YISROEL	<u>360</u>	<u>360</u>
718	OHHEL SHIMON	<u>250</u>	<u>250</u>
993	OHHEL YESHUA	<u>1,800</u>	<u>1,800</u>
1057	OHEV YISROEL	<u>250</u>	<u>250</u>
1029	PEER RIVKA FUND	<u>500</u>	<u>500</u>
791	RABBI FRANKEL	250	
980	RABBI FRANKEL	250	
1096	RABBI FRANKEL	<u>250</u>	
	Subtotal	750	750
722	RABBI JJ WEINBERGER	50	
775	RABBI JJ WEINBERGER	36	
865	RABBI JJ WEINBERGER	50	
932	RABBI JJ WEINBERGER	50	
1031	RABBI JJ WEINBERGER	36	
1097	RABBI JJ WEINBERGER	<u>36</u>	
	Subtotal	258	258

887	RABBI MAYER MAYES	4,000	
888	RABBI MAYER MAYES	3,000	
889	RABBI MAYER MAYES	3,000	
	Subtotal	<u>10,000</u>	<u>10,000</u>
988	RABBI SH ROSENGARTEN	<u>1,000</u>	<u>1,000</u>
754	RABBI SHLOME GROSS	<u>250</u>	<u>250</u>
991	RABBI USHER SWARTZ	<u>250</u>	<u>250</u>
755	RABBI ZELTENREICH	<u>250</u>	<u>250</u>
747	RAV CHESES	1,000	
802	RAV CHESES	100	
805	RAV CHESES	180	
815	RAV CHESES	250	
984	RAV CHESES	100	
1048	RAV CHESES	100	
	Subtotal	<u>1,730</u>	<u>1,730</u>
1032	RAV LEHOTSHIA	220	
739	RAV LEHOTSHIA	<u>500</u>	
	Subtotal	<u>720</u>	<u>720</u>
896	RCCS	<u>300</u>	<u>300</u>
835	REB RUBIN	<u>250</u>	<u>250</u>
964	SHINEVER CONG	<u>250</u>	<u>250</u>
848	SHVILIM	<u>250</u>	<u>250</u>
730	TORAH VEMUNAH	<u>500</u>	<u>500</u>
934	TORAS YISROEL	<u>250</u>	<u>250</u>
677	TZEDUKE VCHESED	50	
681	TZEDUKE VCHESED	180	
726	TZEDUKE VCHESED	50	
727	TZEDUKE VCHESED	50	
729	TZEDUKE VCHESED	50	
734	TZEDUKE VCHESED	180	
752	TZEDUKE VCHESED	180	
753	TZEDUKE VCHESED	250	
763	TZEDUKE VCHESED	36	

764	TZEDUKE VCHESED	36	
777	TZEDUKE VCHESED	50	
811	TZEDUKE VCHESED	100	
829	TZEDUKE VCHESED	200	
845	TZEDUKE VCHESED	50	
849	TZEDUKE VCHESED	50	
950	TZEDUKE VCHESED	100	
962	TZEDUKE VCHESED	180	
976	TZEDUKE VCHESED	100	
994	TZEDUKE VCHESED	50	
1004	TZEDUKE VCHESED	50	
1040	TZEDUKE VCHESED	100	
1059	TZEDUKE VCHESED	100	
1070	TZEDUKE VCHESED	50	
1081	TZEDUKE VCHESED	50	
1082	TZEDUKE VCHESED	100	
	Subtotal	<u>2,392</u>	<u>2,392</u>
828	UNION OF JEWISH COMM	<u>500</u>	<u>500</u>
712	UTA	50	
742	UTA	180	
799	UTA	100	
861	UTA	50	
926	UTA	100	
959	UTA	100	
1003	UTA	100	
	Subtotal	<u>680</u>	<u>680</u>
900	VAD MIHMERET MITZVOS	<u>500</u>	<u>500</u>
990	YAGDIL TORAH	<u>400</u>	<u>400</u>
796	YESHIVA DARKEY ISH	180	
975	YESHIVA DARKEY ISH	180	
	Subtotal	<u>360</u>	<u>360</u>
1042	YESHIVA KOL ARYE	<u>250</u>	<u>250</u>
690	YESHIVA MACHZIKEI HADAS	18,000	
798	YESHIVA MACHZIKEI HADAS	5,000	
844	YESHIVA MACHZIKEI HADAS	500	
884	YESHIVA MACHZIKEI HADAS	100	
912	YESHIVA MACHZIKEI HADAS	750	
996	YESHIVA MACHZIKEI HADAS	360	
999	YESHIVA MACHZIKEI HADAS	4,550	

1001	YESHIVA MACHZIKEI HADAS	3,350	
1085	YESHIVA MACHZIKEI HADAS	5,000	
1099	YESHIVA MACHZIKEI HADAS	8,000	
	Subtotal	<u>45,610</u>	<u>45,610</u>
723	YESHIVA NITRA	100	
915	YESHIVA NITRA	100	
940	YESHIVA NITRA	100	
1044	YESHIVA NITRA	180	
	Subtotal	<u>480</u>	<u>480</u>
862	YESHIVA OF BAYONNE	80	
1045	YESHIVA OF BAYONNE	1,800	
	Subtotal	<u>1,880</u>	<u>1,880</u>
1093	WOMENS BIKUR CHOLEM	250	
		<u>250</u>	<u>250</u>
688	ZICHRON SHROME	100	
1037	ZICHRON SHROME	180	
	Subtotal	<u>280</u>	<u>280</u>
VAR	VARIOUS MISCELLANOUS	<u>17,397</u>	<u>17,397</u>
			<u><u>291,452</u></u>

Application for Extension of Time To File an Exempt Organization Return

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.

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. THE ENKESSE CHARITABLE FOUNDATION TRUST	Employer identification number (EIN) or <input checked="" type="checkbox"/> 11-6573719
	Number, street, and room or suite no. If a P.O. box, see instructions. 1748 49TH STREET	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BROOKLYN, NY 11204	

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

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	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 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 ► THE ENKESSE CHARITABLE FOUNDATI

Telephone No ► 212 730-1112 FAX No. ► _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2012, to file the exempt organization return for the organization named above. The extension is for the organization's return for

► calendar year 2011 or

► tax year beginning _____, 20____, and ending _____, 20____.

2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**
- Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print <small>File by the due date for filing your return See instructions</small>	Name of exempt organization or other filer, see instructions	<small>Enter filer's identifying number, see instructions</small>	
	THE ENKESSE CHARITABLE FOUNDATION TRUST	<input checked="" type="checkbox"/>	Employer identification number (EIN) or 11-6573719
	Number, street, and room or suite no. If a P O box, see instructions. 1748 49TH STREET	<input type="checkbox"/>	Social security number (SSN)
	City, town or post office, state, and ZIP code For a foreign address, see instructions BROOKLYN, NY 11204		

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

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

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of THE ENKESSE CHARITABLE FOUNDATI
Telephone No 212 730-1112 FAX No
 - If the organization does not have an office or place of business in the United States, check this box
 - If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for
- 4 I request an additional 3-month extension of time until 11/15, 20 12
- 5 For calendar year 2011, or other tax year beginning _____, 20____, and ending _____, 20____.
- 6 If the tax year entered in line 5 is for less than 12 months, check reason. Initial return Final return
 Change in accounting period
- 7 State in detail why you need the extension THE TAXPAYER IS AWAITING PERTINENT TAX INFORMATION TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a	\$ 0
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$ 0
8c Balance Due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFPS (Electronic Federal Tax Payment System). See instructions	8c	\$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature Title Date