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Form 990-PF Department of the Treasury

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

Treated as a Private Foundation Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

orm 990-PF (2011)

For calendar year 2011 or tax year beginning , and ending A Employer identification number Name of foundation 22-6766865 JFI CHARITABLE TRUST Room/suite B Telephone number Number and street (or P O box number if mail is not delivered to street address) 555 MADISON AVE City or town, state, and ZIP code C if exemption application is pending, check here 08701 LAKEWOOD, NJ D 1 Foreign organizations, check here Initial return Initial return of a former public charity G Check all that apply: Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization. E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here Accrual I Fair market value of all assets at end of year J Accounting method: X Cash F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) (from Part II, col. (c), line 16) 9295647. (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and expenses per books (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) income income Ñ/A Miller To make 16000 Contributions, gifts, grants, etc., received مرز د وجودکر If the foundation is not required to attach Sch. B. ഩ STATEMENT Interest on savings and temporary 21664. 8 66841 STÂTEMEÑŤ: 4 Dividends and interest from securities 月時間(187 5a Gross rents A CONTRACTOR OF THE SECOND h Net rental income or (loss) 308624. 62 Net gain or (loss) from sale of assets not on line 10 5009982. 308624. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain TO THE ٠ ا 70 A Income_modifications Gross sales less raturas and allowances RECEIVED 12 m , 4 C, 7 10a 87-1632 44Rb h Less C c Gross 10 2012 11 Other 413129 308624 Add lines_1_through 1: 12 0 0 0 nsation of clicens, directors, trustees, etc. 13 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 0. 3500 3500 b Accounting fees STMT 3 c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 13964. 20186 6222 STMT 4 23 Other expenses 24 Total operating and administrative 9722 13964. 23686 expenses. Add lines 13 through 23 91137. 91137. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 105101 114823 9722 Add lines 24 and 25 Subtract line 26 from line 12: 298306 a Excess of revenue over expenses and disbursements 298902 h Net investment income (if negative, enter -0-) Aller S N/A c Adjusted net income (if negative, enter -0-)

Analysis of Changes in Net Assets or Fund Balances Part III

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	10193728.
2	Enter amount from Part I, line 27a	2	298306.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	10492034.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	10492034.
Ť			Form 000 DE (2011)

11

17 18

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24 Unrestricted

Net Assets or Fund Balances

Form 990-PF (2011) JFI CHARITABLE TRUST

Part IV Capital Gains an	d Losses for Tax on In	vestment	Income				
	e the kind(s) of property sold (e.g. nouse; or common stock, 200 shs			(b) Ho P - F D - I	w acquired Purchase Donation	c) Date acquired (mo., day, yr.)	d (d) Date sold (mo., day, yr.)
1a 2500 US T-BILL					P :	2/29/08	3 04/18/11
b 26000 SH. BP PLO	<u> </u>				()6/07/10	02/24/11
c 500 HESS BOND					(02/02/09	
d 70000 SH. LDK W	ASH SALE					ARIOUS	08/22/11
e 70000 SH. LDK W	ASH SALE					/ARIOUS	08/22/11
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			(h) Gain or (lo (e) plus (f) min	
a 2780150.			278865	9.			<u>-8509.</u>
b 1248252.			98427	5.			263977.
<u>c</u> 565850.			51269				53156.
d 384486.			41573	0.			-31244.
e 31244.							31244.
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69		(I)	Gains (Col. (h) g	ain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col (1), if any		COI.	(k), but not less Losses (from c	ol. (h))
a			·				<u>-8509.</u>
b	 						263977.
C							53156.
d	 						-31244.
<u>e</u>		<u> </u>					31244.
2 Capital gain net income or (net capit	(al loss) $ \begin{cases} & \text{If gain, also enter} \\ & \text{If (loss), enter} \\ & \text{-0} \end{cases} $			}	2	· · · · · ·	308624.
3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co If (loss), enter -0- in Part I, line 8	lumn (c).	, ,		}	3	N	/A
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inve	stment Inc	ome	
(For optional use by domestic private for	oundations subject to the section	4940(a) tax on	net investment in	come.)			
16 1 1040(4)(0) ===1 == 1=== 41==							
If section 4940(d)(2) applies, leave this	part blank.						
Was the foundation liable for the section	n 4942 tax on the distributable am	nount of any ye	ear in the base per	lods			Yes X No
If "Yes," the foundation does not qualify							
1 Enter the appropriate amount in each	ch column for each year; see instr	uctions before	making any entrie	es.			
(a) Base periód years	(b)			(c)			(d) stribution ratio
Calendar year (or tax year beginning	- 1 1		Net value of no		able-use assets) divided by col. (c))
2010	4	26378.			9939550		.042897
2009		42092.			9623063		.004374
2008		07767.			<u>9308839</u>		.022319
2007		46689.			5922517		.041653
2006	1	40999.			<u>3472588</u>	•	.040603
2 Total of line 1, column (d)						2	.151846
3 Average distribution ratio for the 5-y	•	on line 2 by 5,	or by the number	of year	'S		000000
the foundation has been in existenc	e if less than 5 years					3	.030369
4 Enter the net value of noncharitable	-use assets for 2011 from Part X,	line 5				4	9792680.
5 Multiply line 4 by line 3						5	297394.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6	2989.
7 Add lines 5 and 6						7	300383.
Enter qualifiuma distributions from !	Part VII. lung 4					8	105101.
8 Enter qualifying distributions from F	•	. db	alata that are the	40'	tov ret-		100101.
If line 8 is equal to or greater than li	are 1, check the box in Part VI, line	e ib, and comp	nete mai part usir	iya 1%	iax raid.		

	n 990-PF (2011) JFI CHARITABLE TRUST	0/->	40	40/h) 4040/-\)			6766			Page 4
	art VI Excise Tax Based on Investment Income (Section 494				or 4	948	- see ı	nstru	ictio	1S)
1a	Exempt operating foundations described in section 4940(d)(2), check here and e					R do	, ,			
	Date of ruling or determination letter: (attach copy of letter if ne					٠٠٠٠		·		1
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ ∟	_ and	d enter 1%		_1_			59	<u>78.</u>
	of Part I, line 27b					. :				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49									-
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O)thers (enter	-0-)		2				<u>0.</u>
3	Add lines 1 and 2					3			<u>59</u>	<u>78.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others	enter	r -0-)		4				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					5			<u>59</u>	<u>78.</u>
	Credits/Payments:							· 3. ·	•	,
a	2011 estimated tax payments and 2010 overpayment credited to 2011	_6a	<u> </u>			386	17 mm 2.	Ete≻ ~	- 1	'
þ	Exempt foreign organizations - tax withheld at source	6b				~ ``*		,		, ;
C	Tax paid with application for extension of time to file (Form 8868)	6c				, *****,	Maria Carl	, ,	*	
d	Backup withholding erroneously withheld	6d				څدن	. 3		٧,	,
7	Total credits and payments. Add lines 6a through 6d					7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached				8			_1	45.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				▶ [9			61	23.
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 2012 estimated tax			Refunde	ed▶	11				
Рa	art ₃ VII-A Statements Regarding Activities							· · · · ·		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation	or di	id it participate or in	ervene	ŧΠ		~7,3,**	Yes	No
	any political campaign?							1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (s	ee in:	structions for definit	ion)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities ar	nd cop	oies (of any materials p	ublishe	d or		,-		
	distributed by the foundation in connection with the activities							,	2. i	_
C	Did the foundation file Form 1120-POL for this year?							1c_		_X_
	l Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the							``	%'	
	(1) On the foundation. > \$ (2) On foundation managers	s. 🖊 🤄	\$		0.			15 31	3 3 3	•
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend	liture ta	ax ım	posed on foundatio	n			n m	\$, 1
	managers. ► \$0.									ا
2	Has the foundation engaged in any activities that have not previously been reported to the I	IRS?						2		<u>X</u>
	If "Yes," attach a detailed description of the activities							\$27 st ****	. 3m "/ 1 "2 C. 1	
	Has the foundation made any changes, not previously reported to the IRS, in its governing		ment,	, articles of incorpor	ation, o	r			720.	- : · · ·
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang							3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?						4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?	_				N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year'	?						5		X
	If "Yes," attach the statement required by General Instruction T								•	, ,
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	eitner:						,	, (*
	By language in the governing instrument, or									
	By state legislation that effectively amends the governing instrument so that no mandator amends the square matters of the square product of the	ry airei	CTION	s that conflict with t	ne state	iaw		- **		-
-	remain in the governing instrument?							6	77	X
	Did the foundation have at least \$5,000 in assets at any time during the year?							7	X	· 100 A
	If "Yes," complete Part II, col. (c), and Part XV			NONE					- 25	8.3
oa	Enter the states to which the foundation reports or with which it is registered (see instruction	uns) 🕨		NONE					\$	
h	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	\.	Ca	noral (or decrees)					ľ., <i>É</i>	
U	of each state as required by General Instruction G? If "No," attach explanation	чиогпе	у це	neral (or designate)				. o.	- s	v
0		notion	40.40)(1)(2) or 4040(1)(E)	for oole	ndor		8b	 	X
	Is the foundation claiming status as a private operating foundation within the meaning of so				ioi cale	nuaí		/		v
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," or							9	-	X
IV	Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	ule listir	ng the	ir names and addresses	<u> </u>			10	L LDF /	-

orn	n 990-PF (2011) JFI CHARITABLE TRUST	22-6766	865		Page 5
Pa	art 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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p	orivileges?			
	If "Yes," attach statement (see instructions)	, i	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
-	Website address ► N/A	L			ı
14	The books are in care of ORGANIZATION Telephone no.				
•	Located at ► LAKEWOOD, NJ	ZIP+4 ▶08	701		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	211-44	<i>/</i> U I	_	
10	and enter the amount of tax-exempt interest received or accrued during the year	l 4e l	NT.	/A	·Ш
16		15		Yes	No
10	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	ı		162	
	securities, or other financial account in a foreign country?	-	16	× 445 +	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign				3.1
<u>D</u> ,	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u></u>	1 7 18		' '
		·····	2/ . *		
	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):		^-		' '
		es 🗶 No	ا کی:	35 ° r ~	, A, 1-5
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			ر راي او	
		es X No	'. , , <u> </u>	14.12.	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	es X No	ا أو يتارين	J. Lu	1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	es X No		, m	387
	(5) Transfer any income or assets to a disqualified person (or make any of either available			c 1%	
	for the benefit or use of a disqualified person)?	es X No		2 1 3	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		3,3.	1	4. A.
	if the foundation agreed to make a grant to or to employ the official for a period after		4.5		* 1.
		es X No	- E	12.12	it to
b	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	:	34.3	, ,	3 .
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶□□	#155 *	, Salah	•
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		300		3
	before the first day of the tax year beginning in 2011?	Ţ.	1c	ot as America	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	ŀ	35	24	C
	defined in section 4942(j)(3) or 4942(j)(5)):	ŀ	3		3. 3
а	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	10	3.0	h. H	Ž,
Ī		es X No			***
	If "Yes," list the years ▶,	35 LAL 140	120		
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrec	.	(**, 1)	32	3
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attact		,		\$ \frac{1}{2} \tag{1} \tag{2}
	statement - see instructions.)	N/A	2 h	4	' '
^	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	N/A	2b	.*	-
٠					
0.	Pud the foundation hold more than 200/ durant and duran		45.	5 %	
Jä	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			- 1	
	·	es X No	55		W.
D	olf "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons af		T. Comment	- 48x	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to commissioner under section 4943(c)(7)) to commissioner under section 4943(c)(7)) to commissioner under section 4943(c)(7).		, S\$4	* ,	3 ¹²
	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	I		1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Form 4720, to determine if the foundation had excess business holdings in 2011.)	N/A	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	ļ	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that	~		
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?		4b		X
		Form	990	-PF (2011)

Form 990-PF (2011) JFI CHARITABLE TRUST			<u>22-67668</u>	<u>865 Page 6</u>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)	
5a During the year did the foundation pay or incur any amount to.				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)			es 🗶 No 📗	<u> </u>
(2) Influence the outcome of any specific public election (see section 4955)); or to carry on, directly or indir	ectly,		
any voter registration drive?		Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpos	ses?	Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organiza	tion described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, litera	rv. or educational purposes, or			
the prevention of cruelty to children or animals?	,,,,,,,		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify t	inder the exceptions described			
section 53.4945 or in a current notice regarding disaster assistance (see ins		gaid.iono	N/A	5b
Organizations relying on a current notice regarding disaster assistance check			▶ /	, , ,
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		unad		
expenditure responsibility for the grant?		. —	es No	' '/ '
If "Yes," attach the statement required by Regulations section 53 49		1/A L 11	E2 140	
6a Did the foundation, during the year, receive any funds, directly or indirectly,			•	
a personal benefit contract?	to pay premiums on		es X No a	
•		Y		Z 12, 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	a personal benefit contract?		-	6b X
If "Yes" to 6b, file Form 8870			[]	근하 시간 3
7a At any time during the tax year, was the foundation a party to a prohibited ta		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attr				7b
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	•	anagers, Highly	y	
1 List all officers, directors, trustees, foundation managers and the	ir compensation.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOSEPH INY	TRUSTEE			
600 THREE ISLAND BLVD APT #307B				ĺ
HALLANDALE, FL 33009	10.00	0.	0.	0.
NAAVA ZAFRANI	TRUSTEE			
108 FREEMAN RD				
LAKEWOOD, NJ 08701	2.00	0.	0.	0.
DAVID WILSCHANSKI	TRUSTEE	 		<u>-</u>
555 MADISON AVENUE				
LAKEWOOD, NJ 08701	2.00	0.	0.	0.
2111211000 110 00 101	2.00	·		· ·
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none,	enter "NONE."	l	
(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
NONE	dovoted to position		compensation	unovarious
			·	
		 -		
		 		
	\dashv			
		 		
Total number of other employees paid over \$50,000		1	1	0
i Otal number of other employees paid over φου, υσο			▶	U

Form 990-PF (2011) JFI CHARITABLE TRUST	22-0	6766865	Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compe	nsation
NONE			
Total number of others receiving over \$50,000 for professional services		•	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta number of organizations and other beneficiaries served, conferences convened, research papers pi	tistical information such as the roduced, etc.	Expenses	
1 SUPPORT OF S 501(C)(3) EXEMPT ORGANIZATIONS			
		1051	<u> 101.</u>
2			
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount	
1 N/A			
2			
All other program-related investments. See instructions.			
Total. Add lines 1 through 3	>		0.

Form **990-PF** (2011)

Part X Minimum	nvestment Return (All domestic fou	indations must complete this part	Foreign foundations, see	instructions)
1 Fair market value of assets	s not used (or held for use) directly in carrying	out charitable, etc., purposes.		
a Average monthly fair mark	et value of securities		1a	2276861
b Average of monthly cash I	palances		15	7664946
c Fair market value of all oth	er assets		1c	
d Total (add lines 1a, b, and	c)		1d	9941807
e Reduction claimed for blo	ckage or other factors reported on lines 1a and		ξ.	
1c (attach detailed explana	ation)	1e	0.	
2 Acquisition indebtedness	applicable to line 1 assets		2	0
3 Subtract line 2 from line 1	d		3	9941807
4 Cash deemed held for cha	ritable activities. Enter 1 1/2% of line 3 (for grea	ater amount, see instructions)	4	149127
	e-use assets Subtract line 4 from line 3. Enter		5	9792680
6 Minimum investment retu			6	489634
Părt XI Distributat foreign organiza	Die Amount (see instructions) (Section 4 itions check here		oundations and certain	
1 Minimum investment retu	n from Part X, line 6		11	489634
2a Tax on investment income	for 2011 from Part VI, line 5	2a	5978.	
b Income tax for 2011 (This	does not include the tax from Part VI.)	2b	<u> </u>	
c Add lines 2a and 2b	,		2c	5978
3 Distributable amount befo	re adjustments. Subtract line 2c from line 1		3	483656
4 Recoveries of amounts tre	ated as qualifying distributions		4	0 .
5 Add lines 3 and 4			5	483656
6 Deduction from distributal	ole amount (see instructions)		6	0 .
7 Distributable amount as a	djusted. Subtract line 6 from line 5. Enter here	and on Part XIII, line 1	7	483656
Part XII Qualifying	Distributions (see instructions)			
1 Amounts paid (including a	dministrative expenses) to accomplish charitat	ole, etc., purposes:	2	
a Expenses, contributions, g	ufts, etc total from Part I, column (d), line 26		1a	105101
b Program-related investme	nts - total from Part IX-B		1b	0 .
2 Amounts paid to acquire a	ssets used (or held for use) directly in carrying	out charitable, etc., purposes	2	
3 Amounts set aside for spe	cific charitable projects that satisfy the:		A	
a Suitability test (prior IRS a	pproval required)		3a	
b Cash distribution test (atta	ch the required schedule)		3b	
4 Qualifying distributions.	Add lines 1a through 3b. Enter here and on Part	t V, line 8, and Part XIII, line 4	4	105101
	nder section 4940(e) for the reduced rate of tax			
income. Enter 1% of Part	, line 27b		5	0.
6 Adjusted qualifying distri	butions. Subtract line 5 from line 4		6	105101.
Note The amount on line	6 will be used in Part V, column (b), in subsequ	uent years when calculating whether th	e foundation qualifies for the	section

Form **990-PF** (2011)

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		,	,	483656.
2 Undistributed income, if any, as of the end of 2011		,		
a Enter amount for 2010 only	,	•	104646.	
b Total for prior years:		0		.; ◆
3 Excess distributions carryover, if any, to 2011		0.		
a From 2006	, , , , , ,	. 4.		. , *
b From 2007		, .	*	*
c From 2008				*
d From 2009	,	,		
e From 2010	, , ,	3 * * * .	, , , , ,	-
f Total of lines 3a through e	0.		<i>"</i> ,	· '*
4 Qualifying distributions for 2011 from			,	**
Part XII, line 4: ► \$ 105101 .				5.3
a Applied to 2010, but not more than line 2a		The state of the s	104646	
b Applied to undistributed income of prior	7		104040.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	, **** , **		1	
(Election required - see instructions)	0.	1 2 11 m		
d Applied to 2011 distributable amount	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2 220	, , ,	455.
e Remaining amount distributed out of corpus	0.	, , , , , , , , , , , , , , , , , , , ,	* *	433.
5 Excess distributions carryover applied to 2011	0.	1 27 7		0.
(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	0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
b Prior years' undistributed income. Subtract			**	Selection same of the selection of the
line 4b from line 2b		0.	· ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		***
d Subtract line 6c from line 6b. Taxable	·		* \$ * * * * * * * * * * * * * * * * * *	's ", ") ' ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
amount - see instructions	~ »	0.	. "	
e Undistributed income for 2010. Subtract line				2 -, 40-
4a from line 2a. Taxable amount - see instr.	2 7	5 at 2 .	0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
f Undistributed income for 2011. Subtract	37.43	100	4 44 4	
lines 4d and 5 from line 1. This amount must	x, ' ,			
be distributed in 2012	* , ,	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	× .	483201.
7 Amounts treated as distributions out of				4 7 8
corpus to satisfy requirements imposed by		· San San .	€् स	· ****
section 170(b)(1)(F) or 4942(g)(3)	0.	-	* .	
8 Excess distributions carryover from 2006				, ,
not applied on line 5 or line 7	0.			* ^,
9 Excess distributions carryover to 2012.		* * * * * * * * * * * * * * * * * * * *	, , , ,	*
Subtract lines 7 and 8 from line 6a	0.	,	* * .	*, *, *
O Analysis of line 9:	* ,	* * ,	, , , ,	w> *** *** ***
a Excess from 2007		**.		
b Excess from 2008				* ** **
c Excess from 2009		* *	* ** *	s * * *
d Excess from 2010	,	** '		·
e Excess from 2011			\$	5 000 DE (00.11)

	RITABLE TRU				766865 Page
Part XIV Private Operating Fo		- 		N/A	
1 a If the foundation has received a ruling or	determination letter tha	t 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 founda	ition is a private operati	ng foundation described	in section	4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a			 		
c Qualifying distributions from Part XII,		-		· - · · · ·	
line 4 for each year listed					
d Amounts included in line 2c not					
· ·					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 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			<u> </u>		·
Part XV. Supplementary Infor	mation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during th			ii die iodiidadoi	11100 40,000 01 11	1010 111 433013
					
 Information Regarding Foundation List any managers of the foundation who year (but only if they have contributed me 	have contributed more		ntributions received by the	e foundation before the cl	ose of any tax
JOSEPH INY					
b List any managers of the foundation who other entity) of which the foundation has			ı (or an equally large port	ion of the ownership of a	partnership or
NONE					
2 Information Regarding Contribution					
Check here the foundation on the foundation makes gifts, grants, etc. (s			e organizations and does under other conditions, o		
a The name, address, and telephone numb	er of the person to who	m applications should b	e addressed:		
JOSEPH INY 600 THREE ISLANDS BLV	ZD. HATITANT	DALE, FL 33	009		
b The form in which applications should be					
c Any submission deadlines:					
d Any restrictions or limitations on awards,	, such as by geographic	cal areas, charitable field:	s, kınds of ınstitutions, or	other factors:	

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Sommon	
BAIS KAILA	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	1036
BEIT EDMUND SAFRA SYNAGOGUE	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	324
BEIT MIDRASH & MESIVTA OF BALTIMORE	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3)	
			ORGANIZATION	13000
CONG OHEL MOSHE	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	1000
CONGREGATION BEIT YAACOB	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	302.
CONGREGATION BNEI YESHIVA	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	4380.
CONGREGATION OHEL YAACOV	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	556,
KHAL BNEI TORAH	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	1606
AMERICAN FRIENDS OF MISHKAN MEIR	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	27000,
OR HACHAYIM INSTITUTIONS	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	304
Total from continuation sheets				87236

JFI CHARITABLE TRUST

3 Grants and Contributions Paid During the	Year (Continuation)			
' Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
SEPHARDIC CONGREGATION OF HALLANDALE	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	2924
THE WASHINGTON ADVENTIST HOSPITAL FOUNDATION	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	2000
YAD YOSEF	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	4000
YESHIVAS MIR YERUSHALAYIM	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	3400
YESHIVA GEDOLAH LUBAVITCH	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	2500
YESHIVAS TORAS CHAIM	NONE	DIIRI.TC CHARITY	SUPPORT OF 501(C)(3)	
999 RIDGE AVE LAKEWOOD, NJ 08701			ORGANIZATION	10000
YESHIVAT KETER TORAH	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	1000
VARIOUS 501 (C)(3) ORGANIZATIONS	NONE	PUBLIC CHARITY	SUPPORT OF 501(C)(3) ORGANIZATION	11904
Total from continuation sheets				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income	Exclu	uded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
	Code		5520		
b					
c			<u> </u>		
d			<u> </u>	-	
e			 		
1			 		
g Fees and contracts from government agencies					
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash		· · · · · · · · · · · · · · · · · · ·	· · · · ·		
investments			14	21664.	
4 Dividends and interest from securities			14	66841.	
5 Net rental income or (loss) from real estate:	£ ' ', ',	THE STATE OF THE S			The state of the s
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			1		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	308624.	
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)	1 (1 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /	0.	\$, .\$	397129.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	397129.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	cemp	t Purposes	
Line No Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-A	contril	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than t				, , , , , , , , , , , , , , , , , , , ,	•
	-	 			
					

	0-PF (201	1) JFI	CHARITABL:	E TRUST	1		22-67	766865	Pa	age 13
Part	XVII	Information I Exempt Orga		nsfers To a	and Transactions a	and Relation	ships With Nonc	haritable		
1 Dic	the organ			u of the followin	ng with any other organization	an decorbed in cor	otton 501(a) of	1.5	Yes	No
					27, relating to political organ		2001 30 1(C) 01		. **	110
			ndation to a noncharit			nzation3.		21.47621.		7.93
	Cash	g /ou	To a nononam	adio oxompt or	gamzation of.			ىنىدىداد (1a(1)	25 82	X
٠,	Other as:	sets						1a(2)	 	X
	ner transac							200 T 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	~,	
	Sales of	assets to a nonchar	ritable exempt organiz	ation				1b(1)	- 400 x .	X
			noncharitable exempt					1b(2)		X
		facilities, equipmer		J				1b(3)		Х
(4)	Reimbur	sement arrangemer	nts					1b(4)		X
(5)	Loans or	loan guarantees						1b(5)		Х
(6)	Performa	ance of services or i	membership or fundra	aising solicitatio	ons			1b(6)		X
c Sh	aring of fac	cilities, equipment, r	mailing lists, other ass	sets, or paid em	ployees			1c		X
					edule. Column (b) should alv				sets,	
					ed less than fair market valu	ie in any transactio	on or sharing arrangeme	nt, show in		
			ls, other assets, or ser			1				
(a) Line r	10 (D)	Amount involved	(c) Name (e exempt organization	(d) Description	on of transfers, transactions,	and sharing a	rangeme	ents
				N/A						
		····-								
										
		· · · · · · · · · · · · · · · · · · ·			· · · · · · -		· · · · · · · · · · · · · · · · · · ·			
			 							
				-			•			
						-				
					or more tax-exempt organi	zations described		1		_
			her than section 501(c)(3)) or in sect	tion 527?			Yes	LX	☐ No
<u>b II "</u>	Yes," comp	olete the following s (a) Name of o		-	(h) Type of organization	T	(a) Decoription of rolati	onchin		
		N/A		-	(b) Type of organization		(c) Description of relati	OHERH		
		N/A	<u> </u>							
						 				
										
			·-· ,							
					ng accompanying schedules and			May the IRS	dicours	thic
Sign	and belief,	lief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all informati				return wit				rer
Here		TU2 (1)	; D.					Yes		No
	Signatu	ire of officer or trus	tee-		Date	Title				
	Pi	rınt/Type preparer's	name	Preparer's s	ignature	Date	Check if P1	'IN		
_							self- employed			
Paid			···	<u> L</u>				200845		
Prep	1	rm's name 🕨 DA	VID WILSC:	HANSKI,	CPA		Fırm's EIN ► 22-	-33402	57	
Use (Only 📗									

Form **990-PF** (2011)

Phone no.

Firm's address ► 555 MADISON AVE.

LAKEWOOD, NJ 08701

Schedule B

(Form 990, 990-EZ, or 99Q-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization **Employer identification number** 22-6766865 JFI CHARITABLE TRUST Organization type (check one) Section: Filers of: 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) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Employer identification number

JFI CHARITABLE TRUST

22-6766865

Part l	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	JOSEPH INY 600 THREE ISLAND BLVD HALLANDALE, FL 33009	\$16000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Moncash Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)			

Name of organization

Employer identification number

JFI CHARITABLE TRUST

22-6766865

Part II	Noncash Property (see instructions) Use duplicate copies of P	'art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		(See insuluctions)	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
		\$	
(a)		, .	
No. from	(b)	(c) FMV (or estimate)	(d)
Part I	Description of noncash property given	(see instructions)	Date received
		\$	990, 990-EZ, or 990-PF) (

Schedule B	(Form 990, 990-EZ, or 990-PF) (2011)		Page					
Name of orga	anization		Employer identification number					
JFI CH	HARITABLE TRUST		22-6766865					
Part III		he following line entry. For organizations c., contributions of \$1,000 or less for th), (8), or (10) organizations that total more than \$1,000 for the completing Part III, enter					
(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, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-								
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					

FORM 990-PF INTEREST ON SAVI	NGS A	ND TEM	PORARY C	ASH II	IVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
MERRILL LYNCH TD AMERITRADE						216	21. 43.
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMN A		:	216	64.
FORM 990-PF DIVIDENT	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT	.)
TD AMERITRADE TD AMERITRADE-OID TD AMERITRADE-T-BILLS	•		8400. 25427. 33014.		0. 0. 0.	84 254 330	
TOTAL TO FM 990-PF, PART I, I	.N 4		66841.		0.	668	41.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	S 3500. 3500.				0.		
TO FORM 990-PF, PG 1, LN 16B		3500.		3500.			0.
FORM 990-PF	0	THER E	XPENSES			STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-			
EXPENSES FOR CHARITABLE PURPOSE BANK CHARGES OFFICE EXPENSES		13964. 4953. 1269.		0. 4953. 1269.		139	64. 0. 0.
TO FORM 990-PF, PG 1, LN 23		20186.		6222.		139	64.
							

FORM 990-PF CORPORATE STO	OCK	STATEMENT 5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
57000 SH LDK 53000 SH LDK 120000 SH LDK	635698. 670707. 853682.	238830. 222070. 502800.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2160087.	963700.

Form **8868**

(Rev January 2012)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box					
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form)				
Do not c	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	ly filed For	rm 8868			
Electron	ic filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tin	ne to file (6	months for a co	orporation		
required :	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fi	le Form 88	368 to request a	n extension		
of time to	file any of the forms listed in Part I or Part II with the exi	ception of	Form 8870, Information Return for 1	ransfers A	Associated With	Certain		
	Benefit Contracts, which must be sent to the IRS in pap	-						
	rs gov/efile and click on e-file for Chanties & Nonprofits		,		•			
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded).				
	ation required to file Form 990-T and requesting an autor							
Part I onl				•				
All other	corporations (including 1120-C filers), partnerships, REM ome tax returns	IICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time			
Туре ог	Name of exempt organization or other filer, see instru	ctions		Employer	ployer identification number (EIN)			
print	JFI CHARITABLE TRUST			X	22-6766	22-6766865		
File by the due date for filing your	Number, street, and room or suite no If a P O box, s 555 MADISON AVE	ee instruc	tions.	Social se	curity number (S	SN)		
return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions LAKEWOOD, NJ 08701							
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4		
Applicati	ion	Return	Application			Return		
Is For_		Code	Is For			Code		
Form 990)	01	Form 990-T (corporation)			07		
Form 990		02	Form 1041-A			08		
Form 990		01	Form 4720			09		
Form 990		04	Form 5227			10		
	0-T (sec 401(a) or 408(a) trust)	05	Form 6069	·····		11		
	O-T (trust other than above)	06	Form 8870			12		
	ORGANIZATION	1						
• The be	ooks are in the care of LAKEWOOD, NJ -	087	01					
	none No		FAX No ▶					
• If the	organization does not have an office or place of business	s in the Ur	nited States, check this box					
	is for a Group Return, enter the organization's four digit			f this is fo	r the whole grou	p, check this		
box 🛌	If it is for part of the group, check this box	-						
1 re	quest an automatic 3-month (6 months for a corporation							
			tion return for the organization name		The extension			
ıs f	or the organization's return for							
	X calendar year 2011 or							
	tax year beginning	, an	d ending		_			
2 If t	he tax year entered in line 1 is for less than 12 months, o Change in accounting period			Fınal retur				
	his application is for Form 990-BL, 990-PF, 990-T, 4720, nrefundable credits. See instructions	3a	\$	0.				
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	- Ju	-			
					\$, O.		
	lance due. Subtract line 3b from line 3a Include your pa			1 55	<u> </u>			
	using EFTPS (Electronic Federal Tax Payment System)			3с	\$	0.		
	If you are going to make an electronic fund withdrawal							
	For Privacy Act and Paperwork Reduction Act Notice,					Rev 1-2012)		