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Form **990-PF** Department of the Treasury Internal Revenue Service

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

For calendar year 2012 or tax year beginning and ending A Employer identification number Name of foundation JAMACHA BLOOM FAMILY FOUNDATION 26-1614525 C/O JAMACHA LLC Room/suite Number and street (or P O box number if mail is not delivered to street address) **B** Telephone number 161 EAGLE ROCK AVENUE (973) 228-1156 City or town, state, and ZIP code C If exemption application is pending, check here ROSELAND, NJ 07068 Initial return Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change 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 Uther taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 3,413,283. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (a) Revenue and (c) Adjusted net (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) expenses per books ıncome income 521,480 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 32 32 STATEMENT 3 80,033. 80,033. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 41,473 220136a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 1,581,277. 41,473 7 Capital gain net income (from Part IV, line 2) Net short-term.capital-gain
Income modifications ECEIVED Gross sales less returns. ၁ ၁ 10a and allowances

b Less Cost of goo ds sold 10 V 1 0 38 c Gross profit or (loss) 11 Other income Total Add ines 1 through 1 643,018. 121,538 0 0. O Compensation of officers, directors, trustees, etc 18,000 18,400 36,400. Other employee salaries and wages 14 15 Pension plans, employee benefits 16a Legal fees 6,100. 2,880. 3,220. STMT 3 **b** Accounting fees c Other professional fees Administrative 17 Interest 4,198. 2,225 1,973. STMT 4 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 197. 146 51 STMT 5 23 Other expenses Operating 24 Total operating and administrative 46,895 23,251 23,644. expenses. Add lines 13 through 23 180,500. 180,500 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 204,144. 227,395 23,251 Add lines 24 and 25 27 Subtract line 26 from line 12: 415,623 2 Excess of revenue over expenses and disbursements 98,287 b Net investment income (if negative, enter -0-) N/A C_Adjusted net income (if negative, enter -0-) Form 990-PF (2012)

LHA For Paperwork Reduction Act Notice, see instructions.

| For | m 99 | 0-PF (2012) C/O JAMACHA LLC | | 26-1 | 1614525 | Page 2 |
|------------------|------|---|-------------------|---|-------------------|------------------|
| <u></u> | | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End of | | |
| Р | art | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market | |
| | 1 | Cash - non-interest-bearing | 150,979. | 319,651. | 319 | ,651. |
| | 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 | | | | |
| | 7 | Other notes and loans receivable | | | - | |
| | | Less: allowance for doubtful accounts | | | | |
| s | 8 | Inventories for sale or use | | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | | |
| As | _ | Investments - U.S. and state government obligations | | | | |
| | 1 | Investments - corporate stock STMT 7 | 1,487,954. | 1,272,333. | 1,602 | .397. |
| | | Investments - corporate bonds STMT 8 | 1,338,370. | 1,480,140. | 1,491 | 235. |
| | l . | Investments - land, buildings, and equipment basis | 1/330/3701 | 2/200/2201 | | , |
| | ' ' | Less accumulated depreciation | | | | |
| | 12 | Investments - mortgage loans | | | | |
| | 13 | Investments - other | | | | |
| | | | | | | |
| | 14 | Land, buildings, and equipment: basis | | | | |
| | 45 | | | | | |
| | 15 | Other assets (describe ►) | | | | |
| | 4. | Tatal and to be appropriated by all filers) | 2,977,303. | 3,072,124. | 3,413 | 283 |
| _ | 1 | Total assets (to be completed by all filers) | 2,311,303. | 3,012,124. | 3,413 | , 205. |
| | 17 | Accounts payable and accrued expenses | | | | |
| | 18 | Grants payable | | | | |
| Liabilıties | 19 | Deferred revenue | | | | |
| Ē | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| Li al | 21 | Mortgages and other notes payable | | | | |
| | 22 | Other liabilities (describe | | | | |
| | | 7.48.4889 (114 4745 - 4500) | 0. | 0. | | |
| _ | 23 | Total liabilities (add lines 17 through 22) | | 0. | | |
| | | Foundations that follow SFAS 117, check here | | | | |
| S | | and complete lines 24 through 26 and lines 30 and 31. | | | | |
| or Fund Balances | 24 | Unrestricted | | | | |
| <u>ala</u> | 25 | Temporarily restricted | | | | |
| d B | 26 | Permanently restricted | | - · · · · · · · · · · · · · · · · · · · | | |
| Ë | | Foundations that do not follow SFAS 117, check here | | | | |
| <u> </u> | | and complete lines 27 through 31. | | . | | |
| | 27 | Capital stock, trust principal, or current funds | 0. | 0. | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | | |
| Ä | 29 | Retained earnings, accumulated income, endowment, or other funds | 2,977,303. | 3,072,124. | | |
| Net | 30 | Total net assets or fund balances | 2,977,303. | 3,072,124. | | |
| | | | 0 055 000 | 2 050 104 | | |
| _ | 31 | Total liabilities and net assets/fund balances | 2,977,303. | 3,072,124. | | |
| P | art | III Analysis of Changes in Net Assets or Fund Ba | lances | | | |
| | | | | | | |
| 1 | | I net assets or fund balances at beginning of year - Part II, column (a), line 3 | 0 | | | 202 |
| | | st agree with end-of-year figure reported on prior year's return) | | 1 | 2,977 | |
| | | r amount from Part I, line 27a | | 2 | 415 | <u>,623.</u> |
| | | r increases not included in line 2 (itemize) | | 3 | | 0. |
| | | lines 1, 2, and 3 | | 4 | 3,392 | |
| 5 | | eases not included in line 2 (itemize) | | TEMENT 6 5 | | <u>,802.</u> |
| <u>6</u> | Tota | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col | umn (b), line 30 | 6 | 3,072 | |
| | | | | | Form 990-F | PF (2012) |

| Part IV Capital Gains | and Lo | sses for Tax on In | vestment | Income | | · | | | |
|---|---------------------------|--|---------------------------------------|------------------------------------|---------------|-------------------------------------|---------------|-----------------------------------|------------------------------------|
| (a) List and des 2-story brick w | cribe the ki arehouse; | nd(s) of property sold (e.g. or common stock, 200 shs | , real estate, . MLC Co.) | | (b) H | ow acquired Purchase Donation | | ate acquired ., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a ' | | | | _ | <u> </u> | | | | |
| b SEE ATTACHEI | STA' | rements | | | | | | | |
| | | | | | - | | | | |
| d | | | | | | | | | |
| <u>e</u> | T | | | | | • | <u> </u> | | |
| (e) Gross sales price | (1) | Depreciation allowed (or allowable) | | t or other basis xpense of sale | | | |) Gain or (loss plus (f) minus | |
| <u>a</u> | <u> </u> | _ | | | | | | | |
| <u>b</u> | | | | | | | | | |
| <u>c</u> | - | | | | + | | | | |
| d 1,581,277. | + | | | 1,539,80 | 14 | | | | 41,473. |
| complete only for assets show | | column (h) and owned by t | | | ** | | (I) Gains | (Col. (h) gain | |
| Complete only for assets show | 1 | (j) Adjusted basis | | cess of col. (I) | | C | òl. (k), b | ut not less tha | n -0-) or |
| (i) F.M.V. as of 12/31/69 | | as of 12/31/69 | | col. (j), if any | | | Loss | ses (from col. | (h)) |
| <u>a</u> | - | | | | | | | | |
| <u>b</u> | - | | | | | | | | |
| <u>C</u> | - | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| <u>d</u> | | | | | | ·- | _ | , | 41,473. |
| <u>e</u> | | | | | $\overline{}$ | | | | 41,475. |
| 2 Capital gain net income or (net o | apital loss | If gain, also enter $\left\{ \begin{array}{l} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{array} \right.$ | in Part I, line in Part I, line | 7 7 | } | 2 | | | 41,473. |
| 3 Net short-term capital gain or (lo | oss) as def | ned in sections 1222(5) an | d (6): | | | | | | |
| If gain, also enter in Part I, line 8 | | c). | | | | | | 37 / 3 | |
| Part V Qualification | Indor S | Section 4940(e) for | Poducod | Tay on Net | lpv4 | 3 estment lr | come | N/A | |
| If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qu Enter the appropriate amount in | ction 4942 alify under | tax on the distributable am section 4940(e). Do not co | mplete this pa | rt. | | | | | Yes X No |
| (a) | 1 00011 0010 | (b) | 1011 00110110 001 | or o making any o | (c) | | | | (d) |
| Base periód years Calendar year (or tax year begint | ווחם וח) | Adjusted qualifying dist | tributions | Net value of no | | table-use asse | ets | | bùtión ratio vided by col. (c)) |
| 2011 | | 22 | 5,243. | | 2 | 967,94 | 4. | | .075892 |
| 2010 | | | 9,498. | | | 945,54 | | | .050754 |
| 2009 | • • | 15 | 9,236. | | 2 | 741,04 | 7. | | .058093 |
| 2008 | | 12 | 6,848. | | 3 | 167,94 | .8. | | .040041 |
| 2007 | | | 0. | | 1_ | <u>,489,41</u> | 2. | | .000000 |
| 2 Total of line 1, column (d) | | | | | | | 2 | 2 | .224780 |
| 3 Average distribution ratio for the the foundation has been in exist | | | on line 2 by 5, | or by the number | r of yea | ars | | 3 | .044956 |
| 4 Enter the net value of noncharita | able-use as | sets for 2012 from Part X, | line 5 | | | | | 1 | 2,826,917. |
| 5 Multiply line 4 by line 3 | | | | | | | į | 5 | 127,087. |
| 6 Enter 1% of net investment inco | me (1% o | Part I, line 27b) | | | | | | 5 | 983. |
| 7 Add lines 5 and 6 | , | . , | | | | | | , | 128,070. |
| 8 Enter qualifying distributions fro | om Part XII | , line 4 | | | | | | 3 | 204,144. |
| If line 8 is equal to or greater the See the Part VI instructions. | | | 1b, and comp | lete that part usir | ng a 1% | % tax rate. | | | |
| | | | | | | | | 1 | orm QQ0-DE (2012) |

| | | <u>6-161</u> | | | Page 4 |
|----|--|---------------------|----------------|----------|----------|
| Pa | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c) | 18 - see | instru | ction | ns) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1% | 1 | | 9 | 83. |
| | of Part I, line 27b | | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | | 0. |
| 3 | Add lines 1 and 2 | 3 | | <u> </u> | 83. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | 0. |
| 5 | Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | 9 | 83. |
| 6 | Credits/Payments: | | | | |
| a | 2012 estimated tax payments and 2011 overpayment credited to 2012 6a 2,796. | | | | |
| b | Exempt foreign organizations - tax withheld at source | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) | | | | |
| d | Backup withholding erroneously withheld | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | | 2,7 | 96. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | • | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | |
| 10 | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | 1,8 | 13. |
| 11 | Enter the amount of line 10 to be: Credited to 2013 estimated tax | 11 | | | 0. |
| Pa | rt VII-A Statements Regarding Activities | | _ | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | | Yes | No |
| | any political campaign? | | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published | or | | | |
| | distributed by the foundation in connection with the activities. | | | | |
| C | Did the foundation file Form 1120-POL for this year? | | 1c | | X_ |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | |
| | (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0. | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | |
| | managers. ▶ \$ 0 . | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | X |
| | If "Yes," attach a detailed description of the activities. | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | | | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | 3 | | _X_ |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | N/A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | | X |
| | If "Yes," attach the statement required by General Instruction T | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | |
| | By language in the governing instrument, or | | | . | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la | w | ļ | | |
| | remain in the governing instrument? | | 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | 7 | X | |
| | If "Yes," complete Part II, col (c), and Part XV. | | | | 1 |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | . | | 1 |
| | NJ | | . | | 1 |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | - | 1 |
| | of each state as required by General Instruction G? If "No," attach explanation | | 8b | Х | <u> </u> |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend | ar | | | 1 |
| | year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV | | _ 9 | | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | _10 | | X |
| | | Fr | orm 990 | -PF (| 2012) |

| orm | 990-PF (2012) | C/0 | JAMACHA | LLC | 26-161 | 4525 | Р | age <u>5</u> |
|-----|-------------------------------------|-----------------------|----------------------|--|--------------------------------------|------------------|-------|--------------|
| | | | | ctivities (continued) | | | | |
| 11 | At any time dui | ring the year, did | he foundation, di | rectly or indirectly, own a controlled entity within the meaning |) of | | | _ |
| | section 512(b) | (13)? If "Yes," atta | ch schedule (see | instructions) | | 11 | | X |
| 12 | Did the foundar | ition make a distril | oution to a donor | advised fund over which the foundation or a disqualified pers | son had advisory privileges? | | | |
| | If "Yes," attach | statement (see in | structions) | | | 12 | | <u>X</u> _ |
| 13 | Did the foundar | ition comply with | the public inspect | ion requirements for its annual returns and exemption applica | ation? | 13 | | <u>X</u> |
| | | ss ▶ <u>N/A</u> | | | | | | |
| 14 | | ın care of 🕨 💆 | | | Telephone no. $\triangleright 973-2$ | | 56 | |
| | | | | AVE - 2ND FLR, ROSELAND, NJ | ZIP+4 ▶ <u>0</u> | 7068 | | |
| 15 | • | ,, , | | ling Form 990-PF in lieu of Form 1041 - Check here | | | ▶ | |
| | | | | ved or accrued during the year | ▶ 15 | N/ | | |
| 16 | | _ | | indation have an interest in or a signature or other authority o | over a bank, | 1 1 | Yes | No |
| | | other financial acco | | | | 16_ | | <u>X</u> _ |
| | _ | ctions for exceptio | ns and filing requ | rements for Form TD F 90-22.1. If "Yes," enter the name of th | ne foreign | | | |
| Б. | country | tatamanta [| Dogording A | ctivities for Which Form 4720 May Be Re | auirod | | | |
| Pè | | | | | quireu | - I | Yes | No |
| ۵. | | - | | ne "Yes" column, unless an exception applies. | | | 162 | NO |
| 18 | | ir did the foundation | | | Yes X No | | | |
| | | | • . | property with a disqualified person? wise extend credit to (or accept it from) | L 165 LA INU | | | |
| | | fied person? | ioney to, or other | wise exterior credit to (or accept it from) | Yes X No | | | |
| | • | • | facilities to (or ac | cept them from) a disqualified person? | Yes X No | | | |
| | | | | e expenses of, a disqualified person? | Yes X No | | | |
| | | | | d person (or make any of either available | | | | |
| | | nefit or use of a di | | | Yes X No | | ŀ | |
| | | | | nent official? (Exception. Check "No" | | | | |
| | | | | to employ the official for a period after | | | | |
| | | _ | - | ting within 90 days.) | Yes X No | | | |
| b | | | | acts fail to qualify under the exceptions described in Regulation | ons | | i | |
| | = | | | ling disaster assistance (see instructions)? | N/A | 1b | | |
| | | | | g disaster assistance check here | ▶□ | | | |
| c | : Did the founda | ation engage in a p | rior year in any o | f the acts described in 1a, other than excepted acts, that were | not corrected | | | |
| | before the first | t day of the tax yea | ar beginning in 20 | 12? | | 1c | | <u>X</u> |
| 2 | Taxes on failur | re to distribute inc | ome (section 494 | 2) (does not apply for years the foundation was a private ope | rating foundation | | | |
| | defined in sect | tion 4942(j)(3) or | 4942(յ)(5)): | | | | | |
| а | | ax year 2012, dıd | the foundation ha | ve any undistributed income (lines 6d and 6e, Part XIII) for ta | | | | |
| | before 2012? | | | | Yes X No | | | |
| | If "Yes," list the | | | · · · · · · · · · · · · · · · · · · · | | | | |
| b | | | | dation is not applying the provisions of section 4942(a)(2) (re | | | | |
| | | | undistributed inc | come? (If applying section 4942(a)(2) to all years listed, answ | | 0. | | |
| | | e instructions.) | /-\/0\ h | and add to a reconstitute of the control of the control bare | N/A | 2b | | |
| C | : If the provision | | | applied to any of the years listed in 2a, list the years here. | | | | |
| ٠. | Did the founds | tion hold more th | an a 20/ direct or | indirect interest in any business enterprise at any time | | + | | |
| 38 | | | an a 2 % unect of | mulect interest in any business enterprise at any time | Yes X No | | | |
| Ŀ | during the yea If "Yes" did it h | | ess holdings in 26 | 012 as a result of (1) any purchase by the foundation or disqu | | | İ | |
| | | | | or longer period approved by the Commissioner under section | | | | |
| | | | | lapse of the 10-, 15-, or 20-year first phase holding period? (| | | | |
| | | | | ad excess business holdings in 2012) | N/A | 3ь | | |
| 42 | - | | | ount in a manner that would jeopardize its charitable purposes | | 4a | | X |
| | | | | year (but after December 31, 1969) that could jeopardize its | | | | |
| | | | | irst day of the tax year beginning in 2012? | | 4b |] | <u> </u> |
| | | | | | F | orm 990 - | PF (2 | 2012) |

JAMACHA BLOOM FAMILY FOUNDATION 26-1614525 C/O JAMACHA LLC Page 6 Form 990-PF (2012) 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: Yes X No (1) Carry, on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained] Yes [No expenditure responsibility for the grant? N/A If "Yes," attach the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average (e) Expense account, other hours per week devoted to position (If not paid, enter -0-) (a) Name and address allowances WILLIAM BLOOM TRUSTEE 98 OLD CHESTER RD 0.00 0 0 0. ESSEX FELLS, NJ 070211626 TRUSTEE RUTH BLOOM 98 OLD CHESTER RD 0.00 n 0 0. ESSEX FELLS, NJ 070211626 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deterred (e) Expense account, other allowances (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation compensation NONE

Form **990-PF** (2012)

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

| Form 990-PF (2012) C/O JAMACHA LLC | 26-1614 | 525 Page 7 |
|--|---------------------------------------|------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued) | ıly | |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." | · · · · · · · · · · · · · · · · · · · | |
| (a) Name and address of each person paid more than \$50,000 (b) Type of se | rvice | (c) Compensation |
| NONE | | |
| | İ | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | İ | |
| Total number of others receiving over \$50,000 for professional services | • | 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | | Expenses |
| 1 N/A | - | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| * . ** | | |
| 4 | | |
| | | |
| Dot IV D. C. C. D. L. L. L. C. L. L. L. L. L. L. L. L. L. L. L. L. L. | | |
| 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. | T | Amount |
| | | Amount |
| 1 <u>N/A</u> | | |
| | | |
| 2 | | · |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | > | 0. |
| | Forr | n 990-PF (2012) |

C/O JAMACHA LLC Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 2,643,835. a Average monthly fair market value of securities 1a 1b 226,131. b Average of monthly cash balances c Fair market value of all other assets 1c 2,869,966. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 966 2,869, 3 Subtract line 2 from line 1d 43,049. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 2,826,917 5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 141,346 Minimum investment return Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 141,346. Minimum investment return from Part X, line 6 983. Tax on investment income for 2012 from Part VI, line 5 Income tax for 2012. (This does not include the tax from Part VI.) 983 2c Add lines 2a and 2b 140.363. 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 140,363. 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 140.363 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 204,144. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: 3a Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) 3b 204,144. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 983.

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

Form **990-PF** (2012)

5 6

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

C/O JAMACHA LLC

| Part XIII | Undistributed | Income | (see instructions) |
|-----------|---------------|--------|--------------------|
|-----------|---------------|--------|--------------------|

| , | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
|--|---------------|----------------------------|-------------|---------------------------|
| 1 Distributable amount for 2012 from Part XI, | | | | 140 262 |
| line 7 | | | | 140,363. |
| 2 Undistributed income, if any, as of the end of 2012 | | | 0. | |
| a Enter amount for 2011 only b Total for prior years: | | | <u> </u> | |
| g rotation prior years. | | 0. | | |
| 3 Excess distributions carryover, if any, to 2012: | | <u> </u> | | |
| a From 2007 | | | | |
| b From 2008 | | | | |
| c From 2009 11,654. | | | | |
| d From 2010 3,731. | | | | |
| e From 2011 82,016. | | | | |
| f Total of lines 3a through e | 97,401. | | | |
| 4 Qualifying distributions for 2012 from | | | | |
| Part XII, line 4: ► \$ 204,144. | | | | |
| a Applied to 2011, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2012 distributable amount | | | | 140,363. |
| e Remaining amount distributed out of corpus | 63,781. | | | |
| 5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 161,182. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' | | | | |
| undistributed income for which a notice of | | | | |
| deficiency has been issued, or on which the section 4942(a) tax has been previously | | | | |
| assessed | İ | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2011. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2012. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | _ |
| be distributed in 2013 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2007 | 0 | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2013. | 161 102 | | | |
| Subtract lines 7 and 8 from line 6a | 161,182. | | | |
| 10 Analysis of line 9: a Excess from 2008 | | | | |
| b Excess from 2009 11,654. | | | | |
| c Excess from 2010 3,731. | | | | |
| d Excess from 2011 82,016. | | | | |
| e Excess from 2012 63,781. | | | | |
| | | <u>.</u> | | Form 990-PF (2012) |

| Form 990-PF (2012) C/O JAM | ACHA LLC | | | 26-16 | 14525 Page 10 |
|--|----------------------------|------------------------------|------------------------------|-------------------------------|---------------|
| Part XIV Private Operating F | oundations (see in | nstructions and Part V | II-A, question 9) | N/A | |
| 1 a if the foundation has received a ruling of | r determination letter the | at it is a private operating | | | |
| foundation, and the ruling is effective fo | | | ▶ | | |
| b Check box to indicate whether the foun- | dation is a private operat | ing foundation described | ın section | 4942(j)(3) or 49 | 42(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | (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 3 Complete 3a, b, or c for the | | | | | |
| alternative test relied upon: | | | | | İ |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | <u> </u> | | | | |
| (2) Value of assets qualifying | | | | | |
| under section 4942(j)(3)(B)(i) | | <u> </u> | | | |
| 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 Info | | | if the foundatio | n had \$5,000 or mo | ore in assets |
| at any time during | the year-see ins | tructions.) | | | *** |
| 1 Information Regarding Foundation | on Managers: | | | | |
| a List any managers of the foundation wi | | | ntributions received by th | e foundation before the clos | se of any tax |
| year (but only if they have contributed | nore than \$5,000). (See | section 507(d)(2).) | | | |
| WILLIAM BLOOM | | | <u> </u> | | |
| b List any managers of the foundation wi | 10 own 10% or more of | the stock of a corporation | n (or an equally large por | tion of the ownership of a pa | artnership or |
| other entity) of which the foundation ha | is a 10% or greater inter | est. | | | |
| NONE | | | | | |
| 2 Information Regarding Contribut | | | | | |
| Check here 🕨 🗶 if the foundation | | | | | |
| the foundation makes gifts, grants, etc. | (see instructions) to ind | lividuals or organizations | under other conditions, | complete items 2a, b, c, and | l d. |
| a The name, address, and telephone num | iber or e-mail of the pers | son to whom applications | s should be addressed: | | |
| | | | | | |
| | | | | | |
| b The form in which applications should | be submitted and inform | nation and materials they | should include: | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on award | Is, such as by geograph: | ical areas, charitable field | s, kinds of institutions, or | r other factors: | |
| , | , goog.up | | , | | |
| | | | | | |

JAMACHA BLOOM FAMILY FOUNDATION 26-1614525 Form 990-PF (2012) C/O JAMACHA LLC Page 11 Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year BOSTON COLLEGE FD N/A PUBLIC CHARITY RUTH REDMOND BLOOM FAMILY ATHLETICS 140 COMMONWEALTH AVE CHESTNUT_HILL, MA 02467 SCHOLARSHIP FUND 50,000. PUBLIC CHARITY BABCOCK FIELD FUND BOSTON UNIVERSITY NONE 595 COMMONWEALTH AVE BOSTON, MA 02215 75,000, PUBLIC CHARITY WILLIAM & RUTH BLOOM BOSTON UNIVERSITY N/A 595 COMMONWEALTH AVE SCHOLARSHIP FUND 20,000. BOSTON, MA 02215 BOSTON UNIVERSITY PUBLIC CHARITY FRIENDS OF MEN'S RUGBY N/A 595 COMMONWEALTH AVE 5,000. BOSTON, MA 02215 ESSEX FELLS VOLUNTEER FIRE COMPANY PUBLIC CHARITY UNRESTRICTED N/A 255 ROSELAND AVENUE 5,000. ESSEX FELLS NJ 07021 SEE CONTINUATION SHEET(S) ➤ 3a 180 500. Total b Approved for future payment NONE

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▶ 3b

Total

C/O JAMACHA LLC

| Enter gross amounts unless otherwise indicated. | Unrelated h | usiness income | Excluded b | y section 512, 513, or 514 | /a\ |
|--|--------------|---|--|----------------------------|--------------------------|
| | | (b) | (c) Exclu- | (d) | (e) Related or exempt |
| 4 Decrees convenient | Business | Amount | sion code | Amount | function income |
| 1 Program service revenue: | code | | | | |
| a b | - | | | | |
| | - | | | | |
| c | · . | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | |
| e | | | | | |
| g Fees and contracts from government agencies | _ | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 32. | |
| 4 Dividends and interest from securities | | | 18 | 80,033. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | - | | | |
| 8 Gain or (loss) from sales of assets other | | - | | | • |
| than inventory | | | 18 | 41,473. | |
| 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 | | | 1 1 | 101 [20] | ^ |
| e | | 0. | <u> </u> | 121,538. | |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) | | 0. | <u> </u> | 13 | |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) | | 0. | 11 | | |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) | | | | 13 | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities | to the Accom | nplishment of Ex | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
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| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
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| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
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| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | to the Accom | nplishment of Exolumn (e) of Part XVI-A | cempt P | urposes | 121,538 |

JAMACHA BLOOM FAMILY FOUNDATION 26-1614525 Form 990-PF (2012) C/O JAMACHA LLC Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash X 1a(1) X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) Х (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) Х (4) Reimbursement arrangements 1b(4) Х (5) Loans or loan guarantees 1b(5) Х (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A

Under penalities of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge

Preparer's signature

and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Date

11-11-13

RUSTEE

Check ____

self- employed

Firm's EIN ▶

Phone no.

Title

Date

Form **990-PF** (2012)

May the IRS discuss this return with the preparer shown below (see instr)?

」Yes

PTIN

Sign

Here

Paid Preparer

Use Only

Signature of officer or trustee

Firm's name

Firm's address

Print/Type preparer's name

Schedule B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury

Schedule of Contributors ► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Internal Revenue Service Name of the organization

JAMACHA BLOOM FAMILY FOUNDATION

C/O JAMACHA LLC

Employer identification number

26-1614525

| 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 | | X 501(c)(3) exempt private foundation | | | | | |
| | | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | |
| | | 501(c)(3) taxable private foundation | | | | | |
| | | | | | | | |
| | | covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions | | | | | |
| General | Rule | | | | | | |
| | For an organization contributor Comple | filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ste Parts I and II. | | | | | |
| Special F | 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. | | | | | | |
| | total contributions | (7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or uelty to children or animals. Complete Parts I, II, and III. | | | | | |
| | contributions for us If this box is checke purpose Do not co | (7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, e exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively, 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 II, 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) (2012)

Name of organization

JAMACHA BLOOM FAMILY FOUNDATION

C/O JAMACHA LIC

Employer identification number

26-1614525

| <u> </u> | AMACHA LLC | |)-10143 <u>23</u> |
|------------|---|----------------------------|---|
| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | nal space is needed. | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | WILLIAM BLOOM C/O JAMACHA, LLC 161 EAGLE ROCK AVE ROSELAND, NJ 07068 | \$\$ <u>521,480.</u> | Person Payroll Noncash X (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) |
| (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

JAMACHA BLOOM FAMILY FOUNDATION C/O JAMACHA LLC

26-1614525

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

| rartii | Noticash Property (see instructions). Ose duplicate copies of Par | | |
|------------------------------|---|--|----------------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | 1,000 SHARES OF APPLE, INC COMMON STOCK (APPL) | | |
| | | \$ 521,480. | 12/24/12 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| — | | | |
| 3453 12-21 | | \$ Sahadula B (Farm 0) | 90, 990-EZ, or 990-PF) (20 |

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Name of organization

Employer identification number

| JAMACHA | BLOOM | FAMILY | FOUNDATION | |
|---------|-------|--------|------------|--|
| _ | | | | |

| | ne total of exclusively religious, charitable, et | | ear. (Enter this information once) | |
|----------|--|---|---|--|
| | lse duplicate copies of Part III if addition | ial space is needed | | |
| o. n | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | |
| | | | | |
| _ | | | | |
| ļ | | | | |
| - | | (e) Transfer of gift | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee | |
| - | | | | |
| — | | | | |
| | | | | |
| lo. n | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | |
| 1 | | ., , | | |
| | | | | |
| _ | | | | |
| | | (e) Transfer of gift | | |
| | | (c) Transier or gire | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| lo. | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | |
| n | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | |
| lo. | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | |
| n | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | |
| n | (b) Purpose of gift | | (d) Description of how gift is held | |
| n | (b) Purpose of gift | (c) Use of gift (e) Transfer of gift | (d) Description of how gift is held | |
| n | (b) Purpose of gift Transferee's name, address, a | (e) Transfer of gift | (d) Description of how gift is held Relationship of transferor to transferee | |
| n | | (e) Transfer of gift | | |
| n | | (e) Transfer of gift | | |
| n | | (e) Transfer of gift | | |
| m til | Transferee's name, address, a | (e) Transfer of gift | Relationship of transferor to transferee | |
| | | (e) Transfer of gift | | |
| n | Transferee's name, address, a | (e) Transfer of gift | Relationship of transferor to transferee | |
| n : I | Transferee's name, address, a | (e) Transfer of gift | Relationship of transferor to transferee | |
| | Transferee's name, address, a | (e) Transfer of gift and ZIP + 4 (c) Use of gift | Relationship of transferor to transferee | |
| | Transferee's name, address, a | (e) Transfer of gift | Relationship of transferor to transferee | |
| n : I | Transferee's name, address, a | (e) Transfer of gift (c) Use of gift (e) Transfer of gift | Relationship of transferor to transferee | |

| Part IV Capital Gains and Los | ses for Tax on Investment Income | · | | | | |
|--|---|--|---|---|--|--|
| | describe the kind(s) of property so ck warehouse; or common stock, 2 | | (b) How acquire P - Purchase D - Donation | d (c) Date acquired (d) Date sold (mo., day, yr.) | | |
| a NOBLE CORPORATI | ON | | P | 01/09/1204/25/12 | | |
| b AMERICAN INT'L | | | P | 03/08/1204/10/12 | | |
| © NEWCASTLE INVT | | ····· | P | 03/29/1204/27/12 | | |
| | | | P | 05/16/1207/30/12 | | |
| d NEWCASTLE INVT | | | | | | |
| e NEWCASTLE INVT | CORP | | P | 07/26/1207/30/12 | | |
| f TARGET CORP | P | 05/27/1103/19/12 | | | | |
| g BARCLAYS FIN'L | P | 04/20/1210/25/12 | | | | |
| h BREITBURN ENERG | Y PARTNERS, LP | | P | 02/03/1206/27/12 | | |
| CALUMET SPECIAL | LITY PRODUCTS PA | RTNERS, LP | P | 09/09/1103/02/12 | | |
| JPMORGAN CHASE | MEDIUM TERM BK | NOTES | P | 03/16/1209/24/12 | | |
| k SUBURBAN PROPAN | | | P | 09/20/1212/19/12 | | |
| ATP OIL & GAS I | P | 06/15/1106/21/12 | | | | |
| m HUANENG PWR INT | | | P | 04/05/1106/04/12 | | |
| | <u>. n</u> | | P | 02/16/11/08/03/12 | | |
| n KRAFT FOODS | | | | | | |
| • MEDTRONIC | | | P | 02/09/11/11/08/12 | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | h) Gain or (loss) plus (f) minus (g) | | |
| 36,725. | | 30,779. | | 5,946. | | |
| 32,349. | | 29,000. | | 3,349. | | |
| 17,325. | | 15,550. | | 1,775. | | |
| 47 000 | | 16,775. | | 1,125. | | |
| | | 16,750. | | 1,150. | | |
| e 17,900. | | | - | | | |
| f 57,790. | | 49,558. | | 8,232. | | |
| g 100,000. | | 100,000. | | 0. | | |
| h <u>24,395.</u> | | 27,517. | | <3,122.> | | |
| 23,884. | | 16,970. | | 6,914. | | |
| 100,000. | | 100,000. | | 0. | | |
| k 6,257. | | 2,638. | | 3,619. | | |
| 11,025. | | 45,000. | | <33,975.> | | |
| m 37,501. | | 36,051. | | 1,450. | | |
| 00 040 | | 61,648. | | 19,200. | | |
| CO 0F0 | | 60,032. | - . | 2,027. | | |
| | g gain in column (h) and owned by | | | | | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (I) | (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-") | | | |
| (,, | as 01 12/3 1/09 | over col. (j), if any | | 5.046 | | |
| a | | ļ | | 5,946. | | |
| b | | | | 3,349. | | |
| 3 | | | | 1,775. | | |
| i | | | | 1,125. | | |
| | | | | 1,150. | | |
| f | | | | 8,232. | | |
| 1 | | | | 0. | | |
| | | | | <3,122. | | |
| · | | | | 6,914. | | |
| | | | | 0,514. | | |
| | | | | | | |
| | | | | 3,619. | | |
| | | | | <33,975. | | |
| n | | | | 1,450. | | |
| 1 | | | | 19,200. | | |
| | | | | 2,027. | | |
| Capital gain net income or (net ca | | o mranti, mic / / | 2 | | | |
| If gain, also enter in Part I, line 8, | | } | | | | |
| If (loss), enter "-0-" in Part I, line 8 | | | 3] | | | |

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. 01/21/1104/03/12 1a TATA MTRS LTD P 09/07/1004/25/12 P b NOBLE CORPORATION c ALLSCRIPTS HEALTHCARE E SOLUTIONS P 10/22/1004/27/12 12/15/1002/07/12 P d ANHEUSER BUSCH INBEV SA P 01/26/1104/30/12 e BNP PARIBAS US MTN NT P 02/24/1103/02/12 f CALUMET SPECIALITY PRODUCTS PARTNERS, LP P |08/26/10|12/07/12 g CITIGROUP TANGIBLE DIV ENHANCED P 02/04/1102/13/12 h CREDIT SUISSE GROUP MEDIUM TERM SR BK NOTES 03/11/1103/19/12 P CREDIT SUISSE GROUP MEDIUM TERM SR BK NOTES |05/13/11|07/26/12 EL PASO PIPELINE PARTNERS, LP P 03/01/1112/03/12 P k EXTERRAN PARTNERS, LP 05/25/1112/03/12 P | EXTERRAN PARTNERS, LP m GOLDMAN SACHS GROUP CALLABLE STEP-UP FIXED RATE N P 09/14/1010/01/12 n INERGY LP P 06/01/11|12/19/12 P 09/27/1001/27/12 o INTEL (h) Gain or (loss) (g) Cost or other basis (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 2,050. 41,240 39,190 36,725 33,490. <u>3,235.</u> 48,336. <25,492.> 22,844. C 57,809. 6,341. 64,150. d 0. 100,000 100,000. 4,336. 19,548 23,884. 52,919. 51,542. 1,377. g 100,000. 0. 100,000 h 100,000. 0. 100,000. 32,549. 2,550. 35,099. 12,601. <1,512.> 11,089. <401.> 11,490. 11,089 100,000 100,000. 0. m 46,526. <20,567.> 25,959. n 26,471. 6,982. 19,489. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (1), if any 2,050. а 3,235. b <25,492.> C 6,341. d 0. е 4,336. f 1,377. q 0. h 0. 2,550. <1,512.> k <401.> 0. m <20,567.> п 6,982. 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 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). If (loss), enter "-0-" in Part I, line 8

| on Investment Income |
|--|
| e kind(s) of property sold, e.g., real estate, ise; or common stock, 200 shs. MLC Co. (b) How acquired P - Purchase D - Donation (mo., day, yr.) |
| ISH LA REV MARATHON OIL P 01/12/1103/02/1 |
| P 09/02/1003/30/1 |
| P 08/17/1008/22/1 |
| NT - INTEREST |
| ABLE YIELD NOTE |
| MEDIUM TERM SR BK NOTES 7% P |
| MEDIUM TERM SR BK NOTES P |
| UM TERM BK NOTES P UM TERM BK NOTES P |
| UM TERM BK NOTES P |
| ENDS |
| |
| |
| |
| |
| preciation allowed (g) Cost or other basis (h) Gain or (loss) or allowable) plus expense of sale (e) plus (f) minus (g) |
| 90,067. 13,308 |
| 36,375. 8,825 |
| 32,524. 4,366 |
| 3,294 |
| 3,185 |
| 1,582 |
| 1,848 |
| 3,610 |
| 3,485 |
| 0 |
| 1,381 |
| |
| |
| |
| olumn (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) |
| Adjusted basis so f 12/31/69 (k) Excess of col. (i) Over col. (j), if any Gains (excess of col. (h) gain over col. (k), but not less than "-0-") |
| 13,308 |
| 8,825 |
| 4,366 |
| 3,294 |
| 3,185 |
| 1,582 |
| 1,848 |
| 3,610 |
| 3,485 |
| 0 |
| 1,381 |
| |
| |
| |
| { If gain, also enter in Part I, line 7 } 2 41,473 |
| Transfer of the draft interv |
| ed in sections 1222(5) and (6): |
| Adjusted basis s of 12/31/69 (k) Excess of col. (i) over col. (j), if any Gains (excess of col. (n) gain over col. (k), but not less than "-0-") 13 , 3 (8 , 8 (4 , 3 (3 , 2 (1 , 5 (1 , 8 (3 , 4 (1 , 3 (3 , 4 (4 , 3 (4 , 3 (|

| Part XV Supplementary Information | n | | | |
|---|---|----------------------|--|--------------|
| 3 Grants and Contributions Paid During the | rear (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 | |
| THE SEEING EYE FOUNDATION P.O. BOX 375 MORRISTOWN, NJ 07963-0375 | N/A | PUBLIC CHARITY | UNRESTRICTED | 11,000, |
| UNIVERSITY OF PENNSYLVANIA 3451 WALNUT ST PHILADELPHIA, PA 19104-6205 | N/A | PUBLIC CHARITY | WELDON F.O.P. RESEARCH FUND & CALI F.O.P. RESEARCH 2 | 500. |
| THE TOWER OF HOPE 228 PARK AVE, SOUTH, SUITE 19065 NEW YORK, NY 10003 | N/A | PUBLIC CHARITY | SERVICE DOGS FOR VETERANS | 12,500, |
| THE ONYX & BREEZY FOUNDATION P.O. BOX 656 TUXEDO PARK, NY 10987 | N/A | PUBLIC CHARITY | UNRESTRICTED | 1,500, |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total from continuation sheets | | | | 25,500. |

| FORM 990-PF INTEREST ON SAVIN | IGS AND TEM | PORARY CA | ASH INV | ESTMENTS | STATEMENT | 1 |
|--|------------------------------|-----------------------------|---------|------------------------------|---------------------|------------------|
| SOURCE | | | | | AMOUNT | |
| PROVIDENT BANK | | | | - | | 32. |
| TOTAL TO FORM 990-PF, PART I, | LINE 3, CO | LUMN A | | = | | 32. |
| FORM 990-PF DIVIDENDS | AND INTER | EST FROM | SECURI | TIES | STATEMENT | 2 |
| SOURCE | GROSS | AMOUNT | | AL GAINS IDENDS | COLUMN (A AMOUNT | .) |
| CREDIT SUISSE (214-307183) CREDIT SUISSE (214-307183) FROM K-1 - CALUMET SPECIALTY | | 62,994. 17,873. | | 0. | 62,9 17,8 | |
| PRODUCTS FROM K-1 - EL PASO PIPELINE FROM K-1 - INERGY | | 2. 4. 18. | | 0. 0. 0. | | 2. 4. 18. |
| FROM K-1 - OAKTREE CAPITAL FROM K-1 - OAKTREE CAPITAL FROM K-1 - OAKTREE CAPITAL | | 544. 711. 1,381. | | 0. 0. 1,381. | 5 | 44. 11. 0. |
| X LESS: ACCRUED INTEREST PURCHASED | | <2,113. | > | 0. | <2,1 | 13.> |
| TOTAL TO FM 990-PF, PART I, LN | 1 4 | 81,414. | | 1,381. | 80,0 | 33. |
| FORM 990-PF | ACCOUNTI | NG FEES | | | STATEMENT | 3 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVI MENT INC | EST- | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING FEES | 6,100. | | ,880. | | 3,2 | |
| TO FORM 990-PF, PG 1, LN 16B | 6,100. | 2 | ,880. | | 3,2 | 20. |

| | TAX | ES | | STATEMENT | 4 |
|--|------------------------------|-----------------------------------|---------------------|--|----|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | | |
| EMPLOYER PAYROLL TAXES FOREIGN TAXES | 3,923. 275. | | | 1,97 | 3. |
| TO FORM 990-PF, PG 1, LN 18 | 4,198. | 2,225 | • | 1,97 | 3. |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT | 5 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITAB ME PURPOSE | |
| INVESTMENT EXPENSES PAYROLL PROCESSING FEES | 146. 51. | 146 | | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 197. | 146 | • | 5 | 1. |
| | | | | | |
| FORM 990-PF OTHER DECREASE | ES IN NET AS | SETS OR FUND | BALANCES | STATEMENT | 6 |
| FORM 990-PF OTHER DECREASE DESCRIPTION | ES IN NET AS | SETS OR FUND | BALANCES | STATEMENT | 6 |
| | | | BALANCES | | 6 |
| DESCRIPTION DIFFERENCE BETWEEN FMV & TAX | COST BASIS | | BALANCES | TRUOMA | 2. |
| DESCRIPTION DIFFERENCE BETWEEN FMV & TAX RECEIVED | COST BASIS | OF SECURITES | BALANCES | AMOUNT 320,80 | 2. |
| DESCRIPTION DIFFERENCE BETWEEN FMV & TAX RECEIVED TOTAL TO FORM 990-PF, PART I | COST BASIS | OF SECURITES | BALANCES DOK VALUE | AMOUNT 320,80 320,80 | 2. |
| DESCRIPTION DIFFERENCE BETWEEN FMV & TAX RECEIVED TOTAL TO FORM 990-PF, PART I | COST BASIS | OF SECURITES | | AMOUNT 320,80 320,80 STATEMENT FAIR MARKET | 7 |

| FORM 990-PF | CORPORATE BONDS | | STATEMENT 8 |
|----------------------------------|-----------------|------------|----------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| CREDIT SUISSE A/C 214-307183 | • | 1,480,140. | 1,491,235. |
| TOTAL TO FORM 990-PF, PART II, L | INE 10C | 1,480,140. | 1,491,235. |

| Form 8868 (Rev 1-2013) | | | | | Page 2 |
|---|-----------------------------|--|---------------------------------------|---------------------|---------------|
| If you are filing for an Additional (Not Automatic) | 3-Month Extension, | complete only Part II and check this | sbox | | ► X |
| Note. Only complete Part II if you have already beer | - | | led Form | 8868 | |
| If you are filing for an Automatic 3-Month Extens | | | ., | | , |
| Part II Additional (Not Automatic) | 3-Month Extensio | n of Time. Only file the origin | al (no c | opies needed |). |
| | | Enter filer's | identifyir | ng number, see i | nstructions |
| Type or Name of exempt organization or other fi | • | | Employer | r identification nu | mber (EIN) or |
| print JAMACHA BLOOM FAMILY | FOUNDATION | | | | |
| File by the C/O JAMACHA LLC | · | | _ | 26-16145 | |
| Number, street, and room or suite no. If | · · | tions. | Social se | curity number (S | SN) |
| return See 161 EAGLE ROCK AVENUE | | | | | |
| City, town or post office, state, and ZIP | code For a foreign add | Iress, see instructions | | | |
| ROSELAND, NJ 07068 | | | | | |
| | | | | | 0 4 |
| Enter the Return code for the return that this applica | ation is for (file a separa | te application for each return) | | | 0 4 |
| A . P N | Datum | I Auntinotion | · · · · · · · · · · · · · · · · · · · | | Return |
| Application | Return | Application | | | Code |
| Is For Form 990 or Form 990-EZ | Code 01 | Is For | | | Code |
| Form 990-BL | 02 | Form 1041-A | | | 08 |
| Form 4720 (individual) | 03 | 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 alre | eady granted an autor | natic 3-month extension on a prev | iously file | ed Form 8868. | |
| JAMACHA, | | | | | |
| The books are in the care of ► 161 EAGI | E ROCK AVE | - 2ND FLR - ROSELA | ND, N | J 07068 | |
| Telephone No ► 973-228-1156 | | FAX No ▶ | | | |
| If the organization does not have an office or place | ce of business in the Ui | nited States, check this box | | | ▶ □ |
| If this is for a Group Return, enter the organization | n's four digit Group Exe | emption Number (GEN) I | f this is fo | r the whole group |), check this |
| box 🕨 🔲 If it is for part of the group, check thi | s box 🕨 🔙 and atta | ach a list with the names and EINs of | all memb | ers the extension | is for |
| 4 I request an additional 3-month extension of to | me until <u>NOVEM</u> | BER 15, 2013. | | | |
| 5 For calendar year 2012 , or other tax year t | | , and endin | - | , | |
| 6 If the tax year entered in line 5 is for less than | 12 months, check reas | on Initial return | Fınal r | eturn | |
| Change in accounting period | | | | | |
| 7 State in detail why you need the extension | | | | DESCRIPTION | |
| ADDITIONAL TIME IS NEED | | | | | |
| THE TAXPAYER HAS NOT YE | | SCHEDULE K-I FROM | EACH | OF ITS L. | IMITED |
| PARTNERSHIP INVESTMENTS | | nter the tentative tay less ony | | | |
| 8a If this application is for Form 990-BL, 990-PF, nonrefundable credits. See instructions. | 990-1, 4720, 01 6069, 6 | miter the teritative tax, less any | 8a | \$ | 0. |
| | 720 or 6060 onter any | refundable credits and estimated | Oa Oa | Φ | |
| tax payments made Include any prior year ov | | | | | |
| previously with Form 8868 | erpayment allowed as | a credit and any amount paid | 8b | \$ | 0. |
| c Balance due. Subtract line 8b from line 8a. In | clude vour navment wi | th this form if required by using | | — | |
| EFTPS (Electronic Federal Tax Payment Syste | | are and retring in required, by during | 8c | \$ | 0. |
| Signature an | d Verification mu | st be completed for Part II o | | <u> </u> | |
| Under penalties of perjury, I declare that I have examined the it is true, correct, and complete, and that I am authorized to | his form, including accomi | | | f my knowledge an | d belief, |
| Signature > | Title ▶ TRUST | EE | Date | > | |

Form **8868** (Rev. 1-2013)