

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0052

For calendar	year 2012 or tax year beginning		, and ending		
Name of fou	ndation			A Employer identificatio	n number
THE R	OSENBLATT FOUNDATION			54-1987576	5
	treet (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	ROLLING WOODS COURT		407	703-321-85	
•	, state, and ZIP code IGFIELD, VA 22152			C if exemption application is	pending, check here
G Check all t		Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return		2. Foreign organizations m	eeting the 85% test
	Address change	Name change	·	2. Foreign organizations m check here and attach c	omputation -
	e of organization X Section 501(c)(3) ex		****	E If private foundation sta	
	n 4947(a)(1) nonexempt charitable trust t value of all assets at end of year J Accounti	Other taxable private founda	Accrual	under section 507(b)(1	
	· —	ther (specify)	Accidai	F If the foundation is in a under section 507(b)(1	
▶\$	157,535 . (Part I, colu		pasis.)	ander 656.60 657 (67()	/(2/) oneon note
(T)	nalysis of Revenue and Expenses he total of amounts in columns (b), (c), and (d) may not cessanly equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	ntributions, gifts, grants, etc., received	10,000.		N/A	(cash basis only)
2 Che	eck In the foundation is not required to attach Sch. B				
3 Inte	erest on savings and temporary	13.	13.		STATEMENT 1
4 Div	ridends and interest from securities	4,043.	4,043	,	STATEMENT 2
l .	oss rents				
_	rental income or (loss)	0.			
Da Net	t gain or (loss) from sale of assets not on line 10 uss sales price for all 20,000.	0.	······································		
90	ets on line 6a 20,000 • potal gain net income (from Part IV, line 2)		0.	·	
8 Net	t short-term capital gain				
1 ~~	come modifications less sales less returns				
10a and	d allowances				
	ss Cost of goods sold		······································		
	oss profit or (loss) ner income				
	tal. Add lines 1 through 11	14,056.	4,056.	,	
13 Cor	mpensation of officers, directors, trustees, etc	0.	0.		0
14 Oth	ner employee salaries and wages				
th	nsion plans, employee benefits		· · · · · · · · · · · · · · · · · · ·		
16a Leg	gal fees counting fees STMT 3	1,500.	0.		0
14 1	counting fees S'I'M'I' 3 ner professional fees	1,300.		,	1
\$ 17 Inte	·			· · · · · · · · · · · · · · · · · · ·	
18 Tax		116.	0 .		0
19 Deş	preciation and depletion				
	CUPARSECEIVED.				
21 Tra	avel, conferences, and meetings opting and publications				
8 22 55 0 23 Of	nting and publications er expenses 1 0 2013 STMT 5	363.	0.		0
Doerating and Salary Sa	tal operating and administrative				
ext		1,979.	0		0
_ 25 € C0	penses Add lines 13 through 23 ntributions=gifts=grants paid	41,978.			41,978
	tal expenses and disbursements.	12 057	0 .		41,978
	d lines 24 and 25 btract line 26 from line 12	43,957.	<u> </u>	· · · · · · · · · · · · · · · · · · ·	41,3/8
	cess of revenue over expenses and disbursements	-29,901.			
l l	et investment income (if negative, enter -0-)		4,056		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
i i	justed net income (if negative, enter -0-)			N/A	

LHA For Paperwork Reduction Act Notice, see instructions.

Page 2

	and the	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	148,422.	118,521.	157,535.
	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			
ম	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
¥	10a	Investments - U.S. and state government obligations			
	l	Investments - corporate stock			
	1	Investments - corporate bonds			
		Investments - land, buildings, and equipment basis	<u> </u>		······································
		Less. accumulated depreciation	1		
	12	Investments - mortgage loans			
	13	Investments - other			
		Land, buildings, and equipment basis	***************************************		······································
		Less. accumulated depreciation]		
	15	Other assets (describe >			
	"				
	16	Total assets (to be completed by all filers)	148,422.	118,521.	157,535.
_	17	Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable			
Ë		Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.	i		
ės	24	Unrestricted	148,422.	118,521.	
Net Assets or Fund Balance	25	Temporarity restricted			
Ba	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
교		and complete lines 27 through 31.			
9	27	Capital stock, trust principal, or current funds			
ě	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds			
<u>च</u>	30	Total net assets or fund balances	148,422.	118,521.	
2					,
	31	Total liabilities and net assets/fund balances	148,422.	118,521.	
	art	Analysis of Changes in Net Assets or Fund B			
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	t agree with end-of-year figure reported on prior year's return)		1	148,422.
2	Ente	r amount from Part I, line 27a		2	-29,901.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	118,521.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	118,521.
					Form 990-PF (2012)

223511 12-05-12

0.

0.

0.

	Calendar year (or tax year beginning in)	Aujusten dagiilkiith aistrinations	Mat value of Hollollalitable-use assets		(COI (D) divided by COI. (C))
	2011	48,269.	0.		.000000
	2010	47,310.	0.		.000000
	2009	44,608.	0.		.000000
	2008	54,917.	0.		.000000
	2007	53,017.	0.		.000000
2				2	.000000
3	Average distribution ratio for the 5-year bathe foundation has been in existence if less		or by the number of years	3	.000000
4	Enter the net value of noncharitable-use as	sets for 2012 from Part X, line 5		4	
5	Multiply line 4 by line 3			5	0.
6	Enter 1% of net investment income (1% of	6_	41.		
7	Add lines 5 and 6			7	41.
				ì	

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

Form 990-PF (2012)

41,978.

8 Enter qualifying distributions from Part XII, line 4

Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ente	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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 statis number of organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1 N/A		
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.		
3		
Total. Add lines 1 through 3	>	0.

Part	Minimum Investment Return (All domestic foundations mus	t complete this part. Foreign four	ndations, s	ee instructions.)
1 Fair	market value of assets not used (or held for use) directly in carrying out charitable, e	tc., purposes		
a Ave	rage monthly fair market value of securities		1a	<u>0.</u>
b Ave	rage of monthly cash balances		1b	
c Fair	market value of all other assets		10	
d Tota	al (add lines 1a, b, and c)		1d	0.
	luction claimed for blockage or other factors reported on lines 1a and			
	(attach detailed explanation)	a 0 •		
2 Acq	uisition indebtedness applicable to line 1 assets		2	0.
	otract line 2 from line 1d		3	0.
4 Cas	h deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, se	e instructions)	4	
	value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Pa	·	5	0.
	nimum investment return. Enter 5% of line 5	,	6	0.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (foreign organizations check here and do not complete this part)	i)(5) private operating foundations an	d certain	· · · · · · · · · · · · · · · · · · ·
1 Min	Imum Investment return from Part X, line 6		1	0.
	on investment income for 2012 from Part VI, line 5	41.		
	ome tax for 2012 (This does not include the tax from Part VI)			
	I lines 2a and 2b		2c	41.
	tributable amount before adjustments. Subtract line 2c from line 1		3	0.
	overies of amounts treated as qualifying distributions	_	4	0.
	lines 3 and 4		5	0.
6 Ded	luction from distributable amount (see instructions)		6	0.
	tributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII	l, line 1	7	0.
	XII Qualifying Distributions (see instructions)		· ·	
1 Am	ounts paid (including administrative expenses) to accomplish charitable, etc., purpos	es:		
а Ехр	enses, contributions, gifts, etc total from Part I, column (d), line 26		1a	41,978.
b Pro	gram-related investments - total from Part IX-B		1b	0.
2 Am	ounts paid to acquire assets used (or held for use) directly in carrying out charitable,	etc , purposes	2	
3 Am	ounts set aside for specific charitable projects that satisfy the.			
a Sur	tability test (prior IRS approval required)		3a	
b Cas	h distribution test (attach the required schedule)		3b	
	lifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and F	Part XIII, line 4	4	41,978.
5 Fou	ndations that qualify under section 4940(e) for the reduced rate of tax on net investment	ent		
	ome Enter 1% of Part I, line 27b		_ 5_	41.
	usted qualifying distributions. Subtract line 5 from line 4		6	41,937.
	e. The amount on line 6 will be used in Part V, column (b), in subsequent years when	n calculating whether the foundation o	ualifies for t	he section

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, line 7				0.
2 Undistributed income, if any, as of the end of 2012			_	
a Enter amount for 2011 only			0.	
b Total for prior years		•		
		0.		
3 Excess distributions carryover, if any, to 2012:	1			
a From 2007 53,135.				
b From 2008 55,041. c From 2009 44,679.				
47.040	1			
d From 2010 47,348. e From 2011 48,385.	1			
f Total of lines 3a through e	248,588.			
4 Qualifying distributions for 2012 from	210/300.			······································
Part XII, line 4 ▶\$ 41,978.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior				**************************************
years (Election required - see instructions)	1	0.		
c Treated as distributions out of corpus				***************************************
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				0.
e Remaining amount distributed out of corpus	41,978.			
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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	290,566.			
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		0.		
assessed				
d Subtract line 6c from line 6b Taxable		0.		
amount - see instructions 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				
not applied on line 5 or line 7	53,135.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	237,431.	······		
10 Analysis of line 9.				,
a Excess from 2008 55, 041.			,	
b Excess from 2009 44,679.				
c Excess from 2010 47,348.				
d Excess from 2011 48,385.				
e Excess from 2012 41,978.	,	<u> </u>	<u> </u>	Form QQO_PF (2012)

	ENBLATT FOU		A A	54-19	87576 Page 1
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective for		-	▶ └	40.40(1)(0) [] 40	40/:\(E\)
b Check box to indicate whether the found		ig toundation described i		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2012	(b) 2011	Prior 3 years (c) 2010	(d) 2009	(e) Total
Income from Part I or the minimum	(4) 2012	(0) 2011	(6) 2010	(0) 2003	(0) 10:41
investment return from Part X for				ļ	l
each year listed					
b 85% of line 2a		<u> </u>			
c Qualifying distributions from Part XII,				İ	
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of				1	
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon					
a "Assets" alternative test - enter]	
(1) Value of all assets			 -		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			İ		
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	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundatio	n Managers:			_	
a List any managers of the foundation who			ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed m	iore than \$5,000) (See s	ection 507(d)(2))			
NONE				-	
b List any managers of the foundation who			or an equally large portio	n of the ownership of a pa	irtnership or
other entity) of which the foundation has	a 10% or greater interes	st.			
NONE					
2 Information Regarding Contributi					
Check here 🕨 🗓 if the foundation of					
the foundation makes gifts, grants, etc	· · · · · · · · · · · · · · · · · · ·			mplete items 2a, b, c, and	<u>d</u>
a The name, address, and telephone numl	per or e-mail of the perso	n to whom applications s	should be addressed		
b The form in which applications should b	e submitted and informat	tion and materials they sh	nould include	-	
c Any submission deadlines ²					

223601 12-05-12

Form **990-PF** (2012)

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

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	ear or Approved for Future	Payment	T	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
KENNEDY CENTER	NONE	PUBLIC CHARITY	DONATION	60
		-		
ADMUDICATE POINDAMION	NONE	PUBLIC CHARITY	DONATION	
ARTHRISTIS FOUNDATION	BONE	FOBLIC CHARIII	DONALION	200
MEYER ACADEMY	NONE	PUBLIC CHARITY	DONATION	
				100
RUTH RALES JEWISH FAMILY SEVICES	NONE	PUBLIC CHARITY	DONATION	
		<u> </u>		1,000
JEWISH OUTREACH	NONE	PUBLIC CHARITY	DONATION	
Total SEE CO	NTINUATION SHE		<u> </u>	25,100 41,978
b Approved for future payment	<u> </u>	1	30	41,370
NONE				
Total		_L	▶ 3b	0
Total			► 30]	

Part XVI-A	Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income		ed by section 512, 513, or 514	(8)
·	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		1000		
a b	_		_		
	i i				
d					
	_	. —	 		
e	_	-			
g Fees and contracts from government agencies	- - -		+		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					13.
4 Dividends and interest from securities					13. 4,043.
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					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	<u> </u>				
11 Other revenue	1				
a	_				
b	_				
C	_		_		<u> </u>
d	_		_		
8	_				
12 Subtotal Add columns (b), (d), and (e)		0	·	0.	4,056.
13 Total. Add line 12, columns (b), (d), and (e)		•		13	4,056.
(See worksheet in line 13 instructions to verify calculations)					

Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain the four	below how idation's ex	each ac empt p	ctivity for which inco urposes (other than	me is repor by providin	ted in col g funds fo	umn (e) of l or such pur	Part XV poses)	/I-A contributed importantly to the accomplishment of).
	FUNDS	USED	то	DISBURSE	CASH	ARE	HELD	IN	HERE
		-							
				-					
	<u> </u>	-							
						_			
-	<u> </u>								
		-							
	<u> </u>				 				
	<u> </u>						 		
000004									

223621 12-05-12

Pa	rt XVII	Information Re Exempt Organ	egarding Transfers To	and Transactions a	and Relationships Wi	th Noncharitable	В	
1	Did the o		rectly engage in any of the followi	ing with any other organization	on described in section 501(c) of	of	Yes	No
•			:)(3) organizations) or in section 5			<i>"</i>		
2			ation to a noncharitable exempt o		-Lations			
•	(1) Cas	· · · · · ·	ation to a nononamadio exempt o		1a(1)	1	X	
		er assets				1a(2)		X
b	• •	ansactions						
_		es of assets to a noncharita	ible exempt organization			16(1)		X
	• •		ncharitable exempt organization			1b(2)		X
	(3) Ren	ital of facilities, equipment,	or other assets			1b(3)		X
	(4) Reir	mbursement arrangements			•	1b(4)		X
	(5) Loa	ns or loan guarantees		•		1b(5)		X
	(6) Peri	formance of services or me	embership or fundraising solicitati	ions		1b(6)		X
C	Sharing	of facilities, equipment, ma	niling lists, other assets, or paid er	mployees		10		X
d	If the an	swer to any of the above is	"Yes," complete the following sch	iedule. Column (b) should alv	vays show the fair market value	of the goods, other as:	sets,	
			oundation If the foundation received		e in any transaction or sharing	arrangement, show in		
a)ı	column	(b) Amount involved	other assets, or services received (c) Name of noncharitab		(d) Description of transfers,	transactions and sharing a		ents.
-,-	-	(B) / another and the	N/A		(a) bescription of dansiers,	amisacuons, and sharing a	angerne	
				· · · · · · · · · · · · · · · · · · ·				
	- -							
								
		.						
					 	• • • • • • • • • • • • • • • • • • • •		
					 	-		
								
			· · · · · ·	****	- · · · · · · · · · · · · ·			
22	Is the for	undation directly or indirect	tly affiliated with, or related to, on	a ar mara tay-ayamat araani	rations described	 -		
Z a		·	r than section 501(c)(3)) or in sec		ations described	Yes	T] No
ь.		complete the following sch	, ,, ,,	Alon 327 f	•	162		טאו ר
	11 165,	(a) Name of org		(b) Type of organization	(c) Descript	ion of relationship		
		N/A	Junization	(b) Typo of organization	(e) bescript	ion or relationship		
		II/ A		-				
								
			 					
	Und	er penalties of perhiry. I declare	that I have examined this which Analydi	ing accompanying schedules and	statements, and to the best of my kn	owledge		
Sig	and	belief wijstyne correct, and con	that I have examined this force, finduding lete Declaration of preparer by the the	an taxpayer) is based on all inform	ation of which preparer has any know	May the IRS of return with the	discuss f	this rer
He	re	· /////////////////	L X Joseph TH	13/20/12	D-+POIGTE	shown below X Yes	r (see Ins	tr)?
		gnatura profficer of trastee		To Day	Title AUST	Yes		_i No
	SIĮ	Print/Type preparer's na	blandra d	Date Date	Title Chack	T of EDTIN		
		Finity type preparer's na	ame Peparer's	Signature	Date Check _	oved PTIN		
Pa	id	TOUN DEUD	$X = \{X M_{AA}\}$		self- emplo	· I	755	
		JOHN BEHRE			03/22/13	P00744		
	eparer		irens & Banks, i	P.C.	Firm's Elf	N ► 54-15562	υÜ	
US	e Only		AOS ODOCO DEED	TO DIACE				
			482 CROSS BREEZ			702 706	C 4 T	_
		AS	SHBURN, VA 20147	<i>I</i>	Phone no	<u>. 703–726–</u>	04/	<u> </u>

Schedule B (Form 990, 990-EZ, or 990-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

2012

Name of the organization

Employer identification number

	TH	E ROSENBLATT FOUNDATION	54-1987576					
Organization type (check one):								
Filers of	:	Section:						
Form 99	0 or 990-EZ	501(c)() (enter number) organization						
		4947(a)(1) nonexempt charitable trust not treated as a private foundation						
		527 political organization						
Form 99	0-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						
General	Rule	7), (8), or (10) organization can check boxes for both the General Rule and a Special filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in ete Parts I and II.						
Special	Rules							
	509(a)(1) and 170(b)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the ii)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the 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 conformant of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or religious, charitable, scientific, literary, or religious 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								

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)

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

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

THE ROSENBLATT FOUNDATION

54-1987576

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MELVIN ROSENBLATT 6106 GREENLAWN COURT SPRINGFIELD, VA 22152	\$10,000.	Person X 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.)
(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.)

Employer identification number

THE ROSENBLATT FOUNDATION

54-1987576

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

ame of organ	ization			Employer identification number
HE ROS	ENBLATT FOUNDATION Exclusively religious, charitable, etc., individ	ual contributions to section 501(c)(7), (8), or (10) organizati	54-1987576 ons that total more than \$1,000 for the
	year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc.,		the year (Enterthis information on	(z.) ► \$
(a) Na	Use duplicate copies of Part III if additional	space is needed.		·
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-		(e) Transfer of gif		
	Transferee's name, address, and	ZIP + 4	Relationship of tr	ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
	Transferee's name, address, and	(e) Transfer of gif		ansferor to transferee
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-		(e) Transfer of gif	it	
-	Transferee's name, address, and	ZIP + 4	Relationship of tr	ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
	Transferee's name, address, and	it Relationship of tr	ansferor to transferee	
-				
-				

Part XV Supplementary Information 3 Grants and Contributions Paid During the N				T
Recipient	If recipient is an individual.	Foundation	Burnoss of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BETH EL SENOGUE	NONE	PUBLIC CHARITY	DONATION	i
				1,000
RONALD S. LAURIE CETERS FOR INFANT &	NONE	PUBLIC CHARITY	DONATION	250
WASHINGTON JEWISH FEDERATION	NONE	PUBLIC CHARITY	DONATION	3,500
GREATER SPRINGFIELD VOL FIRE DEPT	NONE	PUBLIC CHARITY	DONATION	50
PROSTATE CANCER FOUNDATION	NONE	PUBLIC CHARITY	DONATION	200
BETH EL HEBREW FOUNDATION	NONE	PUBLIC CHARITY	DONATION	3,458
JOHN CHERNEY FUND	NONE	PUBLIC CHARITY	DONATION	100
FREINDS OF MT VERNON	NONE	PUBLIC CHARITY	DONATION	50
INOVA HEALTH SYSTEM	NONE	PUBLIC CHARITY	DONATION	250
TEMPLE BAPTIST CHURCH	NONE	PUBLIC CHARITY	DONATION	100
Total from continuation sheets	•			15,518

Part XV Supplementary Information Grants and Contributions Paid During the				
Recipient Recipient	If recipient is an individual.	5d.t	D	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JEWISH COMMUNITY CENTER OF NOVA	NONE	PUBLIC CHARITY	DONATION	3,300
CCFA	NONE	PUBLIC CHARITY	DONATION	50
INNISPREE	NONE	PUBLIC CHARITY	DONATION	100
NATIONAL CANCER INSTITUTE	NONE	PUBLIC CHARITY	DONATION	150
AMERICAN INSTITUTE FOR CANCER	NONE	PUBLIC CHARITY	DONATION	100
SLOANORETTERING CANCER	NONE	PUBLIC CHARITY	DONATION	100
GLACOMA RESEARCH	none	PUBLIC CHARITY	DONATION	100
BETH EL HEBREW FOUNDATION	NONE	PUBLIC CHARITY	DONATION	100
ALZHEIMER RESEARCH	NONE	PUBLIC CHARITY	DONATION	100
NATIONAL FOUNDATION FOR CANCER RESEARCH Total from continuation sheets	NONE	PUBLIC CHARITY	DONATION	100

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				T
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	Amount
CHILDREN CANCER RESERACH	NONE	PUBLIC CHARITY	DONATION	
TITUDADA CANCOA ABBUACO				100
CHOBAD LUBUVITH	NONE	PUBLIC CHARITY	DONATION	
				150
SUSAN KOMEAN CANCER RESEARCH	NONE	PUBLIC CHARITY	DONATION	
				100
NATIONAL INSTITUTE OF JEWISH HEALTH	NONE	PUBLIC CHARITY	DONATION	
				100
SIMON WEISENTHAL CENTER	NONE	PUBLIC CHARITY	DONATION	
				100
OSTEOPAROSIS FOUNDATION	NONE	PUBLIC CHARITY	DONATION	
·		<u> </u>		100
AMERCIAN CANCER SOCEITY	NONE	PUBLIC CHARITY	DONATION	
				200
SMILE TRAIN	NONE	PUBLIC CHARITY	DONATION	
		-		100
ST. JUDES RESEARCH	NONE	PUBLIC CHARITY	DONATION	350
				350
			1	
MAKE A WISH FOUNDATION	NONE	PUBLIC CHARITY	DONATION	100
Total from continuation sheets	. 	.1		100

Part XV Supplementary Information							
3 Grants and Contributions Paid During the Year (Continuation)							
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	status of recipient	Contribution	7			
US HOLOCAST MUSEUM		PUBLIC CHARITY	DONATION				
				100.			
LAMBARDI COMP CANCER CENTER	NONE	PUBLIC CHARITY	DONATION				
	<u></u>			500.			
CATROSTOPHIED	NONE	PUBLIC CHARITY	DONATION				
				360.			
Total from continuation sheets							

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CAS	SH IN	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
MERRILL LYNCH BANK OF AMERICA		13.				
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A				13.
FORM 990-PF DIVIDEND	OS AND INTER	EST FROM S	SECUI	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	.)
MERRILL LYNCH BANK OF AMERICA CORPORATION	1	4,043.		0.	4,0	43.
TOTAL TO FM 990-PF, PART I, LN 4 4,043.				0.	4,043	
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
PROPRESSIONAL FEES	1,500.	-	0.			0.
TO FORM 990-PF, PG 1, LN 16B	1,500.	:	0.	-		0.
FORM 990-PF	TAX	ES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
EXCISE TAX	116.		0.			0.
TO FORM 990-PF, PG 1, LN 18	116.		0.			0.

FORM 990-PF	OTHER E	XPENSES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE EXPENSE	363.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	363.	0.		0.	