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# SCANNED DEC 1 8 2013

Form **990-EZ** 

Department of the Treasury

# Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-1150 2012

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

II II GI	Hai IVEACH	de Service	The organization may have to use a copy or time return	to outlong	y otato report					
A	For the	2012 calend	dar year, or tax year beginning $04/01/12$ , and endin	g 03	/31/13			<u>-</u>		
В	Check if a		C Name of organization				D Employer identification number			
	Address c	change								
	Name cha	ange	200 CLUB OF OCEAN COUNTY, INC.					22-2	915138	
	Initial retu	ırn	Number and street (or P O box, if mail is not delivered to street address)		Ro	om/suite	E	Telephone		
	Terminate	ed	PO BOX 1749					732-	219-6033	
	Amended	return	City or town, state or country, and ZIP + 4				F	Group Ex	emption	
	Applicatio	on pending	POINT PLEASANT BEACH NJ 0874:	2				Number		
G	Accoun	nting Method	X Cash Accrual Other (specify) ▶			H C	heck 🕨	<b>X</b> If th	e organization is <b>not</b>	
I		te: ▶ <u>N/A</u>				re	quired	to attach	Schedule B	
<u>J</u>	Tax-exe			947(a)(1)					Z, or 990-PF)	
K	Check	▶ if the	e organization is not a section 509(a)(3) supporting organization	or a sect	ion 527 orga	nization a	nd its g	gross rece	ipts a⁻e normally	
			000 A Form 990-EZ or Form 990 return is not required though F	orm 990-	-N (e-postcar	d) may be	requir	ed (see in	structions) But if	
			poses to file a return, be sure to file a complete return							
L			7b, to line 9 to determine gross receipts If gross receipts are \$200,000 o	r more, or	r if total assets	(Part II,			F0 000	
_			low) are \$500,000 or more, file Form 990 instead of Form 990-EZ					<u>▶ \$</u>	52,082	
ŀ	art I		nue, Expenses, and Changes in Net Assets or Fu				ructioi	ns for Pa	π I)	
			if the organization used Schedule O to respond to any qu	estion i	n this Part i			4		
	1		gifts, grants, and similar amounts received				-	1		
	2	-	rvice revenue including government fees and contracts	}	2	51,733				
	3	•	o dues and assessments	4	349					
	4 5-	Investment		1 -	_			-4	343	
	5a		unt from sale of assets other than inventory	5						
	b		or other basis and sales expenses		<u> </u>			5c		
	6		from sale of assets other than inventory (Subtract line 5b from line 5a) d fundraising events							
ø		-	ne from gaming (attach Schedule G if greater than							
Revenue	a	\$15,000)	The from gaming (attach Schedule & It greater than	6	a					
ě	Ь		ome from the translation of contributions of contributions							
u.	"		alsing events reported on line 12 attach Schedule G if the							
			La loss income and contributions exceeds \$15,000)							
	c	Less direct	Spenses from gaming and fundaraising events	6	С					
	d	1	e or (loss) from gaming and induraising events (add lines 6a and 6b and subtract							
		line 6c)	OGDEN, UT					6d		
	7a	Gross sales	s of Inventory, less returns and allowances	7.	a					
	Ь	Less cost of	of goods sold	7	b					
	С	Gross profit	t or (loss) from sales of inventory (Subtract line 7b from line 7a)					7c		
	8	Other reven	nue (describe in Schedule O)					8		
	9	Total reven	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				<u> </u>	9	52,082	
	10	Grants and	similar amounts paid (list in Schedule O)					10	18,750	
	11	Benefits par	id to or for members					11		
S	12		her compensation, and employee benefits					12		
Expenses	13	Professiona	al fees and other payments to independent contractors					13		
×pe	. 14		, rent, utilities, and maintenance					14		
Ш	15	J	blications, postage, and shipping					15	26 026	
	16		nses (describe in Schedule O)				_	16	26,938	
_	17		nses. Add lines 10 through 16	_		<del></del>	<u> </u>	17	45,688	
ž.	18		deficit) for the year (Subtract line 17 from line 9)					18	6,394	
Net Assets	19		ts or fund balances at beginning of year (from line 27, column (A)) (must agree with						EE 054	
ţ		-	ar figure reported on prior year's return)						55,966	
S			ges in net assets or fund balances (explain in Schedule O)				_	20	62,360	
	21	net assets	or fund balances at end of year. Combine lines 18 through 20					[ 41 ]		

For Paperwork Reduction Act Notice, see the separate instructions.

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Form **990-EZ** (2012)

Form 990-EZ (2012) ZOU CLUB OF OCEAN COL	JNTY, INC		12138		Page Z
Part II Balance Sheets (see the instructions for P	•				<del></del>
Check if the organization used Schedule O to	respond to any				
		(A) Beg	inning of year	1-	(B) End of year
22 Cash, savings, and investments			55,966	-	62,360
23 Land and buildings			0	23	
24 Other assets (describe in Schedule O)		<u> </u>	0	24	60. 360
25 Total assets			55,966	25	62,360
26 Total liabilities (describe in Schedule O)			0	26	60 260
27 Net assets or fund balances (line 27 of column (B) must agre			55,966	27	62,360
Part III Statement of Program Service Accom	•		<i>'</i> —		Expenses
Check if the organization used Schedule O to	respond to any	question in this Part I		٠,	quired for section
What is the organization's primary exempt purpose?				l	(c)(3) and 501(c)(4)
AWARD PUBLIC SAFETY OFFICERS	<del> </del>			_	inizations and section
Describe the organization's program service accomplishments for examples the organization of the complex compl					7(a)(1) trusts, optional
as measured by expenses In a clear and concise manner, describ	•	rided, the number of		for c	others)
persons benefited, and other relevant information for each program	title				
28 FINANCIAL AID AND SUPPORT OF FIRE, FIRST AID,	AND LAW				
ENFORCEMENT OFFICERS AND THEIR FAMILIES IF IN	NJURED OR				
KILLED IN PERFORMANCE OF DUTIES.			, <del>, , ,</del>		
(Grants \$ 3,750) If this amount includes	foreign grants, che	ck here	<u> </u>	28a	23,587
29 ANNUAL AWARD FOR THOSE FIRE, FIRST AID, AND I	LAW				
ENFORCEMENT OFFICERS WHO EXEMPLIFY BRAVERY AN	ND WHO				
PROVIDE OUTSTANDING SERVICE TO THEIR CHOSEN I					
(Grants \$ 5,000) If this amount includes	foreign grants, che	ck here	<u> </u>	29a	5,000
30 SCHOLARSHIP FUND FOR CHILDREN OF FIRE, FIRST	AID, AND LAW				
ENFORCEMENT OFFICERS.					
			إ		
(Grants \$ 10,000) If this amount includes	foreign grants, che	ck here	<u> </u>	30a	10,000
31 Other program services (describe in Schedule O)					
(Grants \$ ) If this amount includes	foreign grants, che	ck here	<b>•</b>	31a	
32 Total program service expenses (add lines 28a through 31a)				32	38,587
Part IV List of Officers, Directors, Trustees, and Key Er Check if the organization used Schedule O to resp	mployees List eac	h one even if not comper	nsated (see the	instructi	ons for Part IV)
Crieck if the organization used scriedule of to resp	(b) Average	(c) Reportable	(d) Heath ben	efits,	
(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC)	contributions to e benefit plans,	mployee and	(e) Estimated amount of other compensation
	devoted to position	(If not paid, enter -0-)	deferred compe	nsation	Other compensation
EDWARD F. LISTON, JR.					
PRESIDENT	0.00	0		0	
DAVID PAULUS					
VICE-PRESIDENT	0.00	0		0	0
MICHAEL PERLMUTTER	ļ				
SECRETARY EMERITUS	0.00	0		0	0
JACK FARR					
TREASURER	0.00	0		0	0
JACKIE ASCIONE					
SECRETARY	0.00	0		0	0
PATRICK CERAMI					}
TRUSTEE	0.00	0		0	0
TERRANCE FARLEY					
TRUSTEE	0.00	0		0	0
DAVID MCINDOE					
TRUSTEE	0.00	o		0	0
LAWRENCE POLLIN					
TRUSTEE	0.00	o		0	0
TIMOTHY RYAN	1			<u>_</u>	
TRUSTEE	0.00	o		0	l 0
ANTHONY SIERCHIO					<u> </u>
TRUSTEE	0.00	o		0	
LOU TARANTO	1				<del>                                     </del>
TRUSTEE	0.00	0		0	0
TRUSTEB	0.00				Form 990-F7 (2012

Form 990-EZ (2012)' 200 CLUB OF OCEAN CO		. 22-29	15138		Page 2
Part II Balance Sheets (see the instructions for P	•				
Check if the organization used Schedule O to	o respond to any				
		(A) Beg	inning of year	<u> </u>	(B) End of year
22 Cash, savings, and investments			0	22	<del> </del>
23 Land and buildings			0	23	
Other assets (describe in Schedule O)			0	24	
25 Total assets			0	25	0
26 Total liabilities (describe in Schedule O)			0	26	0
27 Net assets or fund balances (line 27 of column (B) must agr			0	27	0
Part III Statement of Program Service Accom	•			ł	Expenses
Check if the organization used Schedule O to	o respond to any	question in this Part I	11	1 `	quired for section
What is the organization's primary exempt purpose?				1	(c)(3) and 501(c)(4)
		<del></del>			anizations and section
Describe the organization's program service accomplishments for		• • •			7(a)(1) trusts, optional
as measured by expenses. In a clear and concise manner, describ		vided, the number of		for o	others)
persons benefited, and other relevant information for each program	n title	<del></del>		├──	
28					
			البيا		
(Grants \$ ) If this amount includes	toreign grants, che	ck here		28a	
29					
(One of the Control o	<b>6</b>	-t. b	<b>▶</b> □	00-	
(Grants \$ ) If this amount includes	roreign grants, che	eck nere		29a	
30					
10 10			<b>,</b> (+-)		
(Grants \$ ) If this amount includes	toreign grants, che	eck nere		30a	
31 Other program services (describe in Schedule O)			<b>.</b> _		
(Grants \$ ) If this amount includes		ck nere		31a	
32 Total program service expenses (add lines 28a through 31a  Part IV List of Officers, Directors, Trustees, and Key E	mployees List eac	h one even if not compe	nested (see the	32 Instructi	ions for Part IV/
Check if the organization used Schedule O to resp	ond to any questic	on in this Part IV			ons for Factivi
(a) Name and title	(b) Average	(c) Reportable compensation	(d) Heath ber contributions to e	refits,	(e) Estimated amount of
(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MISC) (If not paid, enter -0-)	benefit plans deferred compe	, and	other compensation
CAREY TREVISAN		(ii not paid, enter -0-)	delerred compe	noation	
TRUSTEE	0.00	0		0	ه
JAMES VUOCOLO	1				<del></del>
TRUSTEE	0.00	0		0	o
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		1	<del> </del>		
DAA					Form <b>990-EZ</b> (2012

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O  33 Were any significant changes and to the organizating or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change os Schedule O (See instructions).  34 Were any significant changes in the interview of the organization's name. Otherwise, explain the change os Schedule O (See instructions).  35 Did the organization have unrelated business gross recome of \$1,000 or more during the year from business activities (sich as those reported to lines 2. 6a, and 7a. smage otherwise)?  36 If "Yes," to line 35a, has the organization filled a Form 980.7 for the year? If "No," provide an explanation in Schedule O (No (No) (No) (No) (No) (No) (No) (No)	Pa	art V Other Information (Note the Schedule A and personal benefit contract statement requirements in instructions for Part V) Check if the organization used Schedule O to respond to any question in this			П
detailed description of each activity in Schedule O  Were any spanificant changes and to the organization of governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  34		managiona for Fun ty amount in the organization about acting and a to respond to any question in this	<u> </u>	Yes	No
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents of they refiled a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  35 Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  36 If "Yes," to line 35a, has the organization filed a Form 960-T for the year? If "No", provide an explanation in Schedule O (was the organization organization of 501(c)4), 301(c)5, in 501(c)6) organization subject to section 6033(e) notice, reporting, and proxy fax requirements during the year? If "Yes," complete sphicibile parts of Schedule C. Part III (and the year) If "Yes," complete sphicibile parts of Schedule C. Part III (and the year) If "Yes," complete sphicibile parts of Schedule C. Part III (and the year) If "Yes," complete sphicibile parts of Schedule C. Part III (and the year) If "Yes," complete sphicibile parts of Schedule C. Part III (and the year) If "Yes," complete sphicibile parts of Schedule C. Part III (and the year) If "Yes," complete sphicibile parts of Schedule C. Part III (and the year) If "Yes," complete Schedule C. Part II (and the year) If "Yes," complete Schedule C. Part II (and the the total amount involved (and year) If "Yes," complete Schedule C. Part II (and the the total amount involved (and year) If "Yes," complete Schedule C. Part II (and the text total amount involved (and year) If "Yes," complete Schedule C. Part II (and the year) If "Yes," complete Schedule C. Part II (and the year) If "Yes," complete Schedule C. Part II (and year) If "Yes," complete Schedule C. Part II (and year) If "Yes," complete Schedule C. Part II (and year) If "Yes," complete Schedule C. Part II (and year) If "Yes," complete Schedule C. Part II (and year) If "Yes," complete Schedule C. Part II (and year) If "Yes," complete Schedule C. Part II (and year) If "Yes," compl	33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
socy of the amended documents of they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see micruschors)  34. Dot the organization have unrelated business gross income of \$1.000 or more during the year from business activities (such as those reported on lines 2, 6s., and 7s. ameng others)?  b if "Yes," to line 35s, has the organization field a Form 990-T for the year? If "No," provide an explanation in Schedule O 359.  If "Yes," to line 35s, has the organization a section 501 (c)(4), 501 (c)(5), or 501 (c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax recuments during the year? If "Yes," complete Schedule C, Part III 35c.  350 Obt the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete application parts of Schedule N. 247.  371 Enter amount of political expenditures, direct or indirect, as described in the instructions in the year?  372 Enter amount of political expenditures, direct or indirect, as described in the instructions in the year of the year?  373 Did the organization borrow from, or make any losan to, any officer, director, fursities, or key employee or were any such losens made in a print 120-PGL for the year?  373 Did the organization borrow from, or make any losan to, any officer, director, fursities, or key employee or were any such losens made in a print year and still outsidating at the end of the tax year covered by this return?  38a Did the organization borrow from, or make any losan to, any officer, director, fursities, or key employee or were any such losens made any end of the tax year over the year of the year.  38b Section 501 (c)(3) organizations is enter amount of tax imposed on the organization during the year under section 311 by Section 311 (c)(3) organizations is enter amount of tax imposed on organization and year that has not been reported on any of this proc from 990 CF2 (18 Yes). Complete Schedule L, Part II  39c Section 50		detailed description of each activity in Schedule O	33	<u> </u>	<u> </u>
activates (such as those reported on lines 2, 6a, and 7a, among others)?  35 Did the organization have unrieded bissenses gross income of \$1,000 or more during the year from bissness activities (such as those reported on lines 2, 6a, and 7a, among others)?  35 Diff **Yes**, "I have a those reported on lines 2, 6a, and 7a, among others)?  35 Usas the organization or section \$01(c)(4), 901(c)(5), 901(c)(6), 901(c)(6	34				
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (cub as those reported on lines 2, 6s, and 7s a among price in the year? If "No," provide an explanation in Schedule 0 35b. If "Yes," to line 35s, has the organization a section 501(c)(s), 501(c)(s), 501(c)(s), or 501(c)(s) or 501(c)(					
activities (such as those reported on lines 2, 6a, and 7a, among others)?  b If "Yes," into 35a, has the organization field of Form 990-To for the year? If "No.", provide an explanation in Schedule O  Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reprinting the year? If "Yes," complete Sphiculus (Part III)  35b Old the organization undergo is eluciation, dissolution, fermation or significant disposation of net assets  during the year? If "Yes," complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions    37a Did the organization infer form 1120-POL for this year?  37b Did the organization brown from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38a Did the organization brown from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38b If "Yes," complete Schedule L. Part II and enter the total amount involved  38c Scions 501(c)(7) organizations Enter  intuition fees and capital contributions included on line 9  Gross recepts, included on line 9, for public use of dub facilities  40a Section 501(c)(3) and 501(c)(4) organizations 6142 ≥  50c Section 501(c)(3) and 501(c)(4) organizations 6144 ≥  50c		-	34		X
b If "Yes." to line 35a, has the organization field a Form 990-T for the year If "No." provide an explanation in Schedule 0 Was the organization a section 501(c)(4), 901(c)(5), or 501(c)(5) or 901(c)(5) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes." complete Schedule C, Part III 35 Dd the organization undergo a fluidation, dissolution, termination, or significant disposition of not assets during the year? If "Yes," complete spliciable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions   37b Dd the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a provincy are and still outstanding at the end of the tax year covered by this return? 38a Dd the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a provincy are and still outstanding at the end of the tax year covered by this return? 38b Section 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 4911   ——————————————————————————————————	35a				
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes", complete Schedule C, Part III 55c    37a    37a    37a    37a    37a    37b    37b    37a    37a    37a    37a    37a    37a    37a    37a    37b    37b    37a    37b    37a    37b    37b    37c    37a    37b    37b    37c    37c    37b    37c    37c    37c    37c    37e			<del></del>	├	X
teporting and proxy tax requirements during the year? If "Yes" complete Schedule C, Part III  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes", complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions    37b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prox year and still outstanding at the end of the tax year covered by this return?  38b Diff "Yes," complete Schedule L, Part II and enter the total amount michaed  38c Section 501(c)(7) organizations Enter    39b Diff "Yes," complete Schedule L, Part II and enter the total amount michaed  39c Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4912    39c Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 495 ≥    50c Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 495 ≥    50c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  40c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reminures by the organization in the section 4912    40c All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8986-T  40c III List the states with which a copy of this return is field ▶ NJ  40c All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8986-T  40c III List the states with which a copy of this return is field ▶ NJ  40c III List the states with which a copy of this return is field ▶ NJ  40c III List the states with which a copy of this return is field ▶ NJ			350	<del>                                     </del>	<del>                                     </del>
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions    38 Did the organization bife Form 1120-POL for this year?  38 Did the organization bife Form 1120-POL for this year?  38 Did the organization bife Form 1120-POL for this year?  38 Did the organization bife Form 1120-POL for this year?  38 Did the organization bife Form 1120-POL for this year?  38 Did the organization bife Form 1120-POL for this year?  38 Did the organization bife Form 1120-POL for this year?  38 Did the organization file Form 1120-POL for this year?  39 Did the organization file Form 1120-POL for this year?  39 Did the organization file Form 1120-POL for this year?  30 Did the organization file Form 1120-POL for this year.  30 Did the organization file Form 1120-POL for this year with the instructions of the properties of the pr	C		250		X
during the year? If "Yes," complete applicable parts of Schedule N  77a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a   37b    87b Did the organization in Form 1126-PCL for this year?  87a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  87a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  87a Did the organization schedule L, Part II and enter the total amount involved 18b   38b    87b Section 501(c)(7) organizations included on line 9    87c Section 501(c)(3) and 501(c)(4) organizations included on line 9    87c Section 501(c)(3) and 501(c)(4) organizations Did the organization during the year under section 4915 ▶    87c Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4955 ▶    87c Section 501(c)(3) and 501(c)(4) organizations Did the organization in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I    87c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax minioned on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958    87c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c rembursed by the organization    87c All any time during the calendar year, did the organization and party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T    87c Not Party time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country    87c Not Party time during the calendar year, did the organization maintain any dinore during the year? If	36		1000	<del>                                     </del>	<del></del>
the far amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a    b Did the organization file Form 1120-POL for this year?  37b Did the organization file Form 1120-POL for this year?  37b Did the organization brown from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38b I 17'-95, "Complete Schedule L, Part II and enter the total amount involved 38b    38c Section 501(c)(7) organizations Enter  39c Action 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶			36		x
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39a Did the organization borrow from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38b Did If Yes, "complete Schedule L. Part II and enter the total amount involved  38b Did If Yes, "complete Schedule L. Part II and enter the total amount involved  38b Did If Yes, "complete Schedule L. Part II and enter the total amount involved  39a Did If Yes, "complete Schedule L. Part II and enter the total amount involved  39a Did II and II and II and II and Enter II	b		37b	Ì	x
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b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its pror Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I  40b.  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  40c.  11 List the states with which a copy of this return is filed ▶ NJ  12 The organization's books are in care of ▶ JACK FARR  Telephone no ▶ 732-21.5  823 RATHJER ROAD  Located at ▶ BRIELLE  NJ ZIP+4 ▶ 08730  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside th	40a				
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The organization's books are in care of ▶ JACK FARR  Telephone no ▶ 732-213  823 RATHJEN ROAD  Located at ▶ BRIELLE  NJ ZIP + 4 ▶ 08730  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  C At any time during the calendar year, did the organization maintain an office outside the U S ?  If "Yes," enter the name of the foreign country ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  43 Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  c Did the organization receive any payments for indoor tanning services during the year?  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  44b  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		transaction? If "Yes," complete Form 8886-T	40e		X
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a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U S ?  If "Yes," enter the name of the foreign country ▶  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  c Did the organization receive any payments for indoor tanning services during the year?  d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  44d  45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)  45b			▶ 08730	<u> </u>	τ :
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Form 990-EZ (see instructions) 45b	400				
		·	45b	1	x
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16	•	_	-	-				activities	on bel	nalf of or in oppo	sition						
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	Che	ck if the c	rganizati	on use	d Schedu	le O to	respond	to any	questi	on in this Part	VI						<u> </u>
47	Did the economic	otion once			tuution or h	010 0 0	oction EO1	/h) alast		ffoot during the t	av	·-		_		Yes	No
47	year? If "Yes,"	•	_	. •		ave a se	ection 50 ii	(n) elect	ion in e	ffect during the t	ax				47		x
48	Is the organiza	-				70/h\/1\	/Δ\/m\2 If "	Yes " co	mnlete	Schedule F				F	48		X
49a	Did the organiza								•					F	49a		x
b	If "Yes," was th		-		•				,amzati	011					49b		
50			=			_		ployees	(other t	han officers, dire	ectors, tr	ustees and	d key	_			
			_		_					ation If there is i							
	(a)	Mame and to	tle of each	employer			(b) Ave			) Reportable		ealth benef		(e) Est	mater	d amou	nt of
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	\$100,000 of co		_							T			- T -				
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d	Total number of	of other inc	lependent	contrac	tors each r	eceivino	over \$10	0,000	•	·							
52	Did the organiz		•					organiza	tions a	nd 4947(a)(1)				(FE)		$\overline{}$	
	nonexempt ch		•											X	Yes		No
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May	the IRS discuss	s this retur	n with the	prepare	r shown ab	ove? S	ee instruct	ions						<u> </u>	K Ye		No
														r	. 00/	N E7	12040

## SCHEQULE A' (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Reason for Public Charity Status (All organizations must complete this part ) See instructions

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

200 CLUB OF OCEAN COUNTY, INC.

Employer identification number 22-2915138

The o	orgai	nization is not	a private foundation because	e it is (For lines 1 through 11, c	heck only	one box	)				
1		A church, cor	nvention of churches, or asso	ociation of churches described i	n section	170(b)(1	)(A)(i).				
2		A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E )							
3	$\Box$	A hospital or	a cooperative hospital service	e organization described in sec	tion 170	(b)(1)(A)(	ii).				
4				in conjunction with a hospital c				(1)(A)(ii	i). Ente	r the ho	ospital's name,
		city, and state									
5		An organizati	on operated for the benefit o	f a college or university owned	or operate	ed by a g	overnme	ntal unit	descri	oed in	
		section 170(	b)(1)(A)(iv). (Complete Part	II)							
6		A federal, sta	ite, or local government or go	overnmental unit described in se	ection 17	0(b)(1)(A	)(v).				
7	$\Box$		-	substantial part of its support fro				rom the	genera	l public	
		-	section 170(b)(1)(A)(vi). (Co		-				-		
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)									
9	X	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross									
		=		pt functions—subject to certain							
				id unrelated business taxable in							
		acquired by the	he organization after June 30	0, 1975 See section 509(a)(2).	(Comple	te Part III	)				
10		An organizati	on organized and operated e	exclusively to test for public safe	ty See s	ection 50	09(a)(4).				
11		An organizati	on organized and operated e	exclusively for the benefit of, to p	perform th	ne functio	ns of, or	to carry	out the	;	
		purposes of c	one or more publicly supporte	ed organizations described in se	ection 509	9(a)(1) or	section (	509(a)(2	) See	section	
		509(a)(3). Ch	eck the box that describes the	ne type of supporting organization	on and co	mplete lii	nes 11e	through	11h		
		a Type	l <b>b</b> Type II	c Type III-Functions	ally integra	ated	ď	Тур	e III–No	n-funct	ionally integrated
е		By checking t	this box, I certify that the org	anization is not controlled direct	ly or indir	ectly by o	ne or m	ore disq	ualified	person	S
		other than for	undation managers and othe	r than one or more publicly sup	ported org	ganızatıor	is descri	bed in s	ection	509(a)(1	1)
		or section 509	9(a)(2)								
f		•		rmination from the IRS that it is	a Type I,	Type II,	or Type I	II suppo	rting		
		organization,	check this box								
g		-	· · · · · · · · · · · · · · · · · · ·	tion accepted any gift or contrib	ution from	any of th	ne				
		following per									
			· ·	introls, either alone or together	with perso	ons descr	ibed in (i	ı) and			Yes No
		= =	w, the governing body of the	• • •							11g(ı)
			member of a person describ								11g(ii)
		• •	ontrolled entity of a person of	** **							[11g(ni)]
<u>h</u>				he supported organization(s)	1 () ()		63.54		641.4	_ 45_	
(ı		e of supported ganization	(II) EIN	(iii) Type of organization (described on lines 1–9	1	organization sted in your	(v) Did y the organ		organizat	s the ion in col	(vii) Amount of monetary support
		<b>,</b>		above or IRC section	1 ''	document?	col (I)		(ı) organı	zed in the	
				(see instructions))	Yes	No	Yes	No	Yes	No No	
(A)					100	110	100		100	····	
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For Paperwork Reduction Act Notice, see the Instructions for

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	tion A. Public Support						
Caler	dar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4				<u> </u>		
_	tion B. Total Support			· · · · · · · · · · · · · · · · · · ·			
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10				<u> </u>	<u> </u>	
12	Gross receipts from related activities, etc	(see instructions)				12	<u> </u>
13	First five years. If the Form 990 is for the	organization's firs	st, second, third, fo	urth, or fifth tax ye	ear as a section 50	1(c)(3)	
	organization, check this box and stop her						<u> </u>
Sec	tion C. Computation of Public St		_ <del>-</del>		····	<del></del>	
14	Public support percentage for 2012 (line 6		=	nn (f))		14	<del></del>
15	Public support percentage from 2011 Sch					15	%
16a	33 1/3% support test—2012. If the organ				33 1/3% or more,	check this	. □
	box and stop here. The organization qual				45 00 4/00/		<b>P</b> L
b	33 1/3% support test—2011. If the organ				15 IS 33 1/3% or n	nore,	
47-	check this box and stop here. The organi	· ·		=	ICa ar 16h and lin	0 14 10	
17a	10%-facts-and-circumstances test—20: 10% or more, and if the organization mee Part IV how the organization meets the "fa	ts the "facts-and-o	ircumstances" tes	t, check this box a	nd stop here. Exp	lain in	
h	organization						▶ [
b	10%-facts-and-circumstances test—20° 15 is 10% or more, and if the organization						
	<u> </u>						
	Explain in Part IV how the organization me	sets the Tacts-and	a-circumstances t	ost The organizat	ion quaimes as a p	Judiciy	<b>▶</b> €
12	supported organization  Private foundation. If the organization di	d not check a hov	on line 13 16a 16	Sh 17a or 17h ch	neck this box and s	see	• [
18		S HOL CHECK & DOX	on mic 10, 10a, 10	25, 175, OF 175, C	.con unio box and s		▶ [
	instructions						

22-2915138

Page 3

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II

<u> </u>	if the organization fails to	quality under the	e tests listed be	elow, please co	impiete Part II )		
	tion A. Public Support  ndar year (or fiscal year beginning in) ▶	(2) 2009	(b) 2000	(a) 2010	(4) 2011	(0) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(i) Total
2	grants *)  Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	43,550	59,325	57,654	56,695	51,733	268,957
3	Gross receipts from activities that are not an unrelated trade or business under section 513						<u>.</u>
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						_
6	Total. Add lines 1 through 5	43,550	59,325	57,654	56,695	51,733	268,957
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						<del></del>
8	Public support (Subtract line 7c from line 6)						268,957
	tion B. Total Support						
	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	_43,550	59,325	57,654	56,695	51,733	268,957
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,400	663	686	403	349	3,501
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	1,400	663	080	403	349	3,301
С	Add lines 10a and 10b	1,400	663	686	403	349	3,501
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	44,950	59,988	58,340	57,098	52,082	272,458
14	First five years. If the Form 990 is for the organization, check this box and stop her		, secona, tnira, tou	irtn, or tiπn tax yea	r as a section 501	(C)(3)	▶ □
Sec	ction C. Computation of Public Su		age				
15	Public support percentage for 2012 (line 8			n (f))	<del></del>	15	98.72%
16	Public support percentage from 2011 Sch		-			16	98.13%
	tion D. Computation of Investme						
17	Investment income percentage for 2012 (I	ine 10c, column (f)	divided by line 13,	column (f))		17	1 %
18	Investment income percentage from 2011					18	2 %
19a	33 1/3% support tests—2012. If the orga 17 is not more than 33 1/3%, check this b						► X
b	33 1/3% support tests—2011. If the orga						
	line 18 is not more than 33 1/3%, check the						<b>&gt;</b> _
20	Private foundation. If the organization di	d not check a box o	on line 14, 19a, or	19b, check this box	k and see instruction	ons	<u> </u>

Schedule A (Form 990 or 990-EZ) 2012 200 CLUB OF OCEAN COUNTY, INC.

22-2915138

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information (See instructions)

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

200 CLUB OF OCEAN COUNTY, INC.

Employer identification number 22 - 2915138

Form 990-EZ, Part I, Line 10 - Gran	ts/Similar Amts Paid to Organizations
Name and Address	Class of Activity Date of Gift
	Desc. of Property
	Cash Contrib. Noncash Contrib.
	Book Value BV Expl. FMV Expl.
SEE ATTACHED	

Ş	18,750 \$	0
\$	0	

	-	
Form 990-EZ, Part I, Line 16 -	Other Expen	ıses
Description	An	ount
Expenses		
POSTAGE	\$	122
PRINTING AND PUBLICATIONS	\$	8,608
OFFICE SUPPLIES	\$	195
ACTIVITIES EXPENSE	\$	5,160
MEETINGS	\$	2,116
MEMBERSHIP KITS	\$	5,752
STATE OF NJ REGISTRATION	\$	60
ADMINISTRATIVE EXPENSE	\$	4,200
BANK CHARGES	\$	75
NJ ANNUAL REPORT	\$	650

Total \$

26,938

03/31/13

### 200 CLUB OF OCEAN COUNTY, INC. General Ledger

5540 Page 1

	•		,ugci		- age 1
			Beginning	Current	YTD
Date	Reference T	Description CONTRIBUTIONS	Balance 0 00	Amount	Balance
08/15/12		CASTELLANO CHILDRENS FUND	0 00	250 00	
	1951 2017	DIOCESES OF TRENTON		500 00	
03/18/13	2017	DIOCESES OF TRENTON		750 00	750.00
				730 00	750.00
	415 GRANTS - F	INANCIAL AID	0 00		
12/18/12	2005	LISA PREALAN	0 00	1,000.00	
12/18/12	2006	KENNY TUREY		1,000.00	
01/09/13	2008	JOHNATHAN WILSON		1,000.00	
01/09/13	2006	JOHNATHAN WIESON		3,000 00	3,000 00
				3,000 00	3,000 00
	420 GRANTS - F	TRE ACADEMY AWARD	0 00		
06/03/12	1959	ALBERT QUANDO IIII		250.00	
06/03/12	1987	BRIAN MCCARTHY		250.00	
02/20/13	2016	ANTHONY MATYNKA		250.00	
02/20/13	2010			750.00	750.00
	425 GRANTS - N	MERITORIOUS SERVICE AWARD	0.00		
06/03/12	1984	MICHAEL TRIMARCHI		250 00	
06/03/12	1985	JOHN LIGHTBODY		250 00	
06/03/12	1986	DAVID JONES		250.00	
00.00.12	.,,,,			750 00	750 00
	435 GRANTS - S		0.00		
05/14/12	1974	OCC FOUNDATION		10,000 00	
				10,000 00	10,000 00
			0.00		
06/02/12	440 GRANTS - V		0.00	500.00	
06/03/12	1976	ERIK MIICK		500.00	
06/03/12	1977	DENNIS DOWDEN			
06/03/12	1979	MICHAEL LYNCH		500.00 500.00	
06/03/12	1980	STEVE FRAZEE			
06/03/12	1981	BRIAN SMITH		500.00	
06/14/12	1982	LAUREN KEILITZ		500.00	
06/03/12	1983	MICHAEL DIBLASI		3,500 00	3,500 00
Range of A	Accounts Specified:	(18,750 00) YTD Profit/(Loss)	(18,750.00)		
	· · · · · · · · · · · · · · · · · · ·		(10,730.00)		
Numb	per of Transactions	19	The General Ledger is in balance		0 00
			The Constant Deager to in outdies		

5540 200 CLUB OF OCEAN COUNTY, INC.

Federal Statements

22-2915138 FYE: 3/31/2013 11/5/2013 10:35 AM

### Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description			Amount		
MEMBERSHIP	DUES	\$_	51,733		
Total		\$_	51,733		

(Rev January 2013)

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

File a separate application for each return.

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

If you are filing for an Automatic 3-Month Extension, complete	nly Part I and check this box
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If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see

instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits.

Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

Enter filer's Identifying number, see Instructions Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print 200 CLUB OF OCEAN COUNTY, INC. 22-2915138 Number, street, and room or suite no. If a P.O. box, see instructions File by the Social security number (SSN) due date for PO BOX 1749 filma your City, town or post office, state, and ZIP code For a foreign address, see instructions. return See POINT PLEASANT BEACH NJ 08742 instructions

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

**Application** Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ Form 990-T (corporation) 01 07 Form 990-BL 02 Form 1041-A O8 Form 4720 (individual) 03 Form 4720 09 Form 990-PF Form 5227 04 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

JACK FARR

823 RATHJEN ROAD

The books are in the care of ▶ BRIELLE

08730

01

• ( • ( for th	Telephone No. ► 732-219-6033  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this me whole group, check this box  If this for part of the group, check this box  with the names and EINs of all members the extension is for.	is		▶ []
1	I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 11/15/13 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ▶ □ calendar year or  ▶   X  tax year beginning 04/01/12 , and ending 03/31/13 .			
2	If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return  Change in accounting period			
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions.	3a	\$	
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			
	estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	
C	Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using			
	EFTPS (Electronic Federal Tax Payment System) See instructions	3с	\$	
Cau	tion. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879	EO fo	r payment instruc	tions