

# 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-EZ

#### 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.

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The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For the 2012 calendar year, or tax year beginning 05/01/12, and ending C Name of organization D Employer identification number Check if applicable: Address change GREAT GRAND NACHAS AND MORE INC. 80-0600229 Name chance Number and street (or P.O. box, if mail is not delivered to street address) E Telephone number initial misso 22 NILES PLACE **Terminated** 718-761-8908 City or town, state or country, and ZIP + 4 Amended return F Group Exemption STATEN ISLAND Application pending Number > Accounting Method: X Cash Accrual Other (specify) ▶ Check ► X if the organization is not Website: ▶ N/A required to attach Schedule B Tax-exempt status (check only one) — X = 501(c)(3) 501(c)( (Form 990, 990-EZ, or 990-PF). ) **4** (insert no.) | 4947(a)(1) or 527 Check | | If the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts are \$200,000 or more, or if total assets (Part II. line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 16,766 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part !) Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received 16,766 1 Program service revenue including government fees and contracts 2 2 Membership dues and assessments 3 3 Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than \$15,000) <u>6a</u> b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) Less: direct expenses from garning and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) ...... **6**d Gross sales of inventory, less returns and allowances 7a Less: cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) .... 7c Other revenue (describe in Schedule O) 8 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ..... 16,766 9 Grants and similar amounts paid (list in Schedule O) 10 10 22,050 Benefits paid to or for members 11 11 Salaries, other compensation, and employee benefits 12 12 13 Professional fees and other payments to independent contractors 40 13 Occupancy, rent, utilities, and maintenance 14 14 Printing, publications, postage, and shipping OGDEN 15 15 Other expenses (describe in Schedule O) 16 16 17 Total expenses. Add lines 10 through 16 .... 17 22,090 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 -5,324 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 end-of-year figure reported on prior year's return) 10,030 19 Other changes in net assets or fund balances (explain in Schedule O) 20

For Paperwork Reduction Act Notice, see the separate instructions.

Net assets or fund balances at end of year. Combine lines 18 through 20.

Form **990-EZ** (2012)

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Balance Sheets (see the instruction							
Check if the organization used Sche	dule O to respond to a	ny question i	1		_		
				ginning of yea			(B) End of year
Cash, savings, and investments			· · · · · · · · · · · · · · · · · · ·	10,0			4,70
Land and buildings					_9	23	
Other assets (describe in Schedule O)				10 0	0	24	4 50
Total assets			-	10,0		25	4,70
Total liabilities (describe in Schedule O)		• • • • • • • • • • • • • • • • • • • •		10 0	- 9	26	4 50
Net assets or fund balances (line 27 of column (B)  Statement of Program Service				10,0	30	27	4,70
Check if the organization used Sche	•	•		•	X	/D	Expenses
That is the organization's primary exempt purpose?	dule O to respond to a	iny quesuon i	ii liiib rait	····	==	-	equired for section 1(c)(3) and 501(c)(4)
SEE SCHEDULE O							panizations and section
escribe the organization's program service accomplishing	nents for each of its three	largest progra	m services.		_	_	47(a)(1) trusts; optional
measured by expenses. In a clear and concise manne			-				others.)
ersons benefited, and other relevant information for each	h program title.						
DISTRIBUTION OF FUNDS TO CHILDREN FOR	MEDICAL EQUIPMENT						
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(Grants \$ 22,050) If this amount	includes foreign grants, o	check here		<b>)</b>	Ш	28a	22,09
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Form 990-EZ (2012)

	Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			П
	the december of the street in the digenization deed solicated to respond to any december in this that the true that the		Yes	No
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		X
34	Were any significant changes made to the organizing 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 on Schedule O (see instructions)	34		X
35 <b>e</b>	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)?	35a		X
þ	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
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	35c		X
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	36		X
37 <b>a</b>	Enter amount of political expenditures, direct or indirect, as described in the instructions	<b>,</b>		
b	Did the organization file Form 1120-POL for this year?	37b	~1X1X11XXX	X
38a	Did the organization boπow 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?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
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 prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
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			
•	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	40e		X
41	List the states with which a copy of this return is filed ▶ <u>NONE</u>			
42 <b>a</b>	The organization's books are in care of ▶ Telephone no. ▶			
	Located at ▶ ZIP + 4 ▶	,		
Ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	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.			
_			******	<b></b>
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		<u> </u>
43	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			. –
73	end enter the execute of tex execute interest received as account during the terms 1941 — Check here			▶∟
	and enter the amount of tax-exempt interest received or accrued during the tax year		1	r
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		Yes	No
	completed instead of Form 000 F7		******	<b></b>
b		44a	**********	X
Ð	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be		******	<b></b>
_	Completed instead of Form 990-EZ	44b		X
C d	Did the organization receive any payments for indoor tanning services during the year?	44c		X
a	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	*********	**********
45-				
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	*********	X
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		X

Form	990-E	<u>z (2012) GREAT GRAND NACHAS AI</u>	ND MORE I	NC.	<u>80-06</u>	00229				P	age 4
		•					-			Yes	No
<b>l6</b>	Did t	he organization engage, directly or indirectly, in political	campaign activitie	s on behalf o	of or in oppo	sition					
	to ca	indidates for public office? If "Yes," complete Schedule	C, Part I						46	l	X
		Section 501(c)(3) organizations only									
		All section 501(c)(3) organizations must answ	wer questions 47	-49b and 5	52, and cor	mplete the	tables for li	nes			
		50 and 51									
		Check if the organization used Schedule O to	o respond to any	question in	n this Part	VI	<u></u>		<u></u>		<u> </u>
<b>17</b>	Did t	he organization engage in lobbying activities or have a s	section 501(h) elec	tion in <b>effect</b>	during the t	<b>9</b> V		ſ		Yes	No
••		If "Vee " complete Schedule C. Dert II			_				47	1 1	х
48		e organization a school as described in section 170(b)(1	)(A)(ii)? If "Yes " ~	mniete Sch	edule F			••••	48	$\vdash$	X
19a	Did t	he organization make any transfers to an exempt non-ci	heritehle related or	nanization?		•••••	• • • • • • • • • • • • • • • • • • • •		49a	$\vdash$	X
ь		es," was the related organization a section 527 organization		ganzacioni		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		49b		
50		plete this table for the organization's five highest compe		(other than	officers dire	ectors trus	ees and key	1	700	— н	
-		oyees) who each received more than \$100,000 of comp									
	Jp.	<u> </u>	(b) Average	(c) Rep			Ith benefits.	<del></del>			
		(a) Name and title of each employee peld more than \$100,000	hours per week	comper	<b>nsation</b>	contribution	ns to employee			d amou pensati	
			devoted to position	(Forms W-2/	1099-MISC)	deferred (	plans, and compensation		DI 00111	boi ieen	<b>U</b> 11
NC	NE										
					•						
						<u></u>					
							-				
								<u> </u>			
			]								
								<u></u>			
					•						
f		number of other employees paid over \$100,000		<b>&gt;</b>			_				
51	Comp	plete this table for the organization's five highest compe	nsated independer	nt contractors	s who each	received m	ore than				
		,000 of compensation from the organization. If there is r		<u> </u>			T ·				
		Name and address of each independent contractor paid more t	men \$100,000		(a) Typ	e of service		(c) C	comper	nsation	
NO	NE	••••••	• • • • • • • • • • • • • • • • • • • •								
											—
• • • • •	• • • • • • •	••••••									
		·	<del></del>				_				
• • • • • • • • • • • • • • • • • • • •		•••••••••••••••••••••••••••••••••••••••	•••••								
		· · · · · · · · · · · · · · · · · · ·				-					
• • • • • •		••••••	***************************************								
											—
••••	• • • • • •			•••••							
d	Total	number of other independent contractors each receivin	g over \$100.000	<u> </u>			<u>L</u>				
52		he organization complete Schedule A? Note: All section		itions and 49	47(a)(1)	-	-				
		xempt charitable trusts must attach a completed Sched			(=)(-)		•	X	Yes		No
Jnder	penali	ties of perjury, I declare that I have examined this return, includ	ling accompanying a	chedules and	statements, s	nd to the be	st of my knowle			_	
rue, c	orrect,	and complete. Declaration of preparer (other than efficient is b	esed on all information	on of which pre	parer has an	y knowledge	9.	-9		.,	
		MAR DIE				17	1 10	_			
3ign	- 1	Signature of officer			De			<b>—</b>			
lere	.	MILTON PFEIFFER		PR	<u>ESIDEN</u>	TT					
		Type or print name and title			_						
		Print/Type preparer's name Pre	perer'e signetyre	n —		Des .	Check	X	PTIN		
Paid		MILTON_PFEIFFER	MAN			06/		nployed	P012	213947	7
_	arer	Firm's name MILTON PFEIFFER					Firm's EIN				
Jee (	Only	Firm's address > 22 NILES PLACE									
		STATEN ISLAND, NY	<u> 10314-5</u>	026			Phone no. 7	<u> 18</u> -	761	-890	08
May	the IR	S discuss this return with the preparer shown above? S				.,,	<u></u>	<b>•</b>	Ye		No
								For	m 99f	D-EZ	(2012)

### SCHEDULE 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

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

Note: The trust of trust of trust of the trust of tr

2012

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

GREAT GRAND NACHAS AND MORE INC.

Employer identification number 80-0600229

w.i.	.ia2i	K925	on for Public Charity	Status (All organizations	s must c	ompiete	tnis p	<u>aπ.) S</u>	ee ins	truction	1S			
The	orga	nization is not	a private foundation because	se it is: (For lines 1 through 11,	, check on	ly one box	<b>)</b> .							
1	Ш	A church, co	nvention of churches, or ass	sociation of churches described	d in <b>secti</b> o	n 170(b)(ʻ	1)(A)(I).							
2	Ш	A school des	scribed in section 170(b)(1)	(A)(II). (Attach Schedule E.)										
3	Ш	A hospital or	a cooperative hospital serv	ice organization described in s	ection 170	(b)(1)(A)(	III).							
4	$\sqcup$	A medical re	search organization operate	ed in conjunction with a hospita	l described	in <b>secti</b> o	n 170(Ł	)(1)(A)(	lil). Ent	er the ho	spital'	s name	ı,	
	_	city, and stat												
5		An organizat	ion operated for the benefit	of a college or university owner	d or opera	ted by a g	ovemm	ental un	it d <b>es</b> cr	ibed in				
		section 170	(b)(1)(A)(Iv). (Complete Par	t II.)										
6		A federal, str	ate, or local government or g	governmental unit described in	section 1	70(b)(1)(A	)(v).							
7	X	An organizat	ion that normally receives a	substantial part of its support i	from a gov	emmental	unit or	from the	genen	al public				
		described in	section 170(b)(1)(A)(vi). (C	Complete Part II.)										
8		A community	trust described in section	170(b)(1)(A)(vI). (Complete Pa	rt II.)									
9		An organizat	ion that normally receives: (	1) more than 33 1/3% of its su	pport from	contributi	ons, me	mbershi	ip fees,	and gro	<b>55</b>			
		receipts from	activities related to its exer	mpt function <del>s s</del> ubject to certa	in exception	ons, and (2	2) no me	ore than	33 1/3	% of its				
		support from	gross investment income a	nd unrelated business taxable	income (le	ss section	511 ta	x) from I	busines	808				
		acquired by t	the organization after June 3	30, 1975. See section 509(a)(2	?). (Compk	ete Part III	.)							
10		An organizat	ion organized and operated	exclusively to test for public sa	fety. See	section 50	) (4)							
11		An organizati	ion organized and operated	exclusively for the benefit of, to	perform 1	he functio	ns of, o	r to carr	y out th	8				
		purposes of	one or more publicly support	ted organizations described in	section 50	9(a)(1) or	section	509(a)(2	2). See	section				
		509(a)(3). Ch	neck the box that describes	the type of supporting organiza	tion and c	omplete li	nes 11e	through	11h.					
		a 🔲 Type	ıl bi 🗌 Typeli	c 🔲 Type III-Functio	nally integ	rated	d	🗌 Тур	e III-N	on-functi	onally	integra	ted	
•		By checking	this box, I certify that the org	ganization is not controlled dire	ctly or indi	rectly by c	ne or m	nore disc	qualified	l persons	<b>B</b>			
		other than fo	undation managers and other	er than one or more publicly su	pported or	ganizatior	ns desci	ribed in s	<b>section</b>	509(a)(1	)			
		or section 50	9(a)(2).											
f		If the organiz	ation received a written dete	ermination from the IRS that it	is a Type I	, Type II, d	or Type	ili supp	orting					
		organization,	check this box											П
9		Since Augus	t 17, 2006, has the organiza	ition accepted any gift or contri	bution fror	n any of th	18							_
		following per	rsons?											
		(I) A persor	n who directly or indirectly c	ontrols, either alone or togethe	r with pers	ons descr	ibed in (	(ii) and					Yes	No
		(iii) belo	w, the governing body of the	supported organization?								11g(i)		
		(II) A family	member of a person descri	bed in (i) above?								11 <b>g(ii</b> )		
		(iii) A 35% c	controlled entity of a person	described in (i) or (ii) above?								11 <b>g(</b> III)		
h		Provide the	following information about t	the supported organization(s).										
(I	-	e of supported panization	(II) EIN	(III) Type of organization (described on lines 1-9	in col. (I)	organization isted in your	the orga	you notify nization in	organiza	is the tion in col.	(VII)	Amount o		<b>ary</b>
				above or IRC section (see instructions))	<u> </u>	document?	sup	of your port?	¨ Ū.	zed in the S.?				
(A)					Yes	No	Yes	No	Yes	No				
<u>~</u>					_				1					_
B)											-			
(C)	-	<u> </u>						-	<del>                                     </del>	<del>                                     </del>				
					1		_		<u> </u>	$\sqcup$				
(D)						-								
(E)														
Γota		'												
. U			B0000000000000000000000000000000000000	<b>*</b> ***********************************	***************************************			************		************				

Schedule A (Form 990 or 990-EZ) 2012 GREAT GRAND NACHAS AND MORE INC. Page 2 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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 23,424 30,628 16,766 70,818 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 ..... 23,424 30,628 16,766 70,818 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) Public support. Subtract line 5 from line 4. 70,818 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Amounts from line 4 23,424 30,628 16,766 70,818 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources 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.) ...... Total support. Add lines 7 through 10 11 70,818 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

	rubic support percentage from 2011 Scriedule A, Part II, IIIIe 14	15	100.0076
l 6a	33 1/3% support test-2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this		
	box and stop here. The organization qualifies as a publicly supported organization		<b>▶</b> 🗓
b	33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more,		
	check this box and stop here. The organization qualifies as a publicly supported organization		▶□
<b>17a</b>			
	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in		
	Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported		
	organization		▶ 🗆
þ	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line		
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.		
	Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly		
	supported organization		▶□

instructions

Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Dublic support percentage from 2011 Schedule A. Bert II. line 14

Schedule A (Form 990 or 990-EZ) 2012

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.

Calendar year (or flecal year beginning in)    Amounts from line 6  Amounts from line 6  Crose income from interest, dividends, payments received on securities loans, rants, royalties and income from similar sources  b Unrelated business taxable income (less section 511 taxas) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  1 Net income from unrelated business edividies 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 seasets (Explain in Part IV.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Public support percentage from 2011 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2011 Schedule A, Part III, line 17  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19 Investment income percentage from 2011 Schedule A, Part III, line 17  19 Investment income percentage from 2011 Schedule A, Part III, line 17  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19 Investment income percentage from 2011 Schedule A, Part III, line 17  19 Investment income percentage from 2011 Schedule A, Part III, line 17  19 Investment income percentage from 2011 Schedule A, Part III, line 17  19 Investment income percentage from 2011 Schedule A, Part III, line 17  19 Investment income percentage from 2011 Schedule A, Part III, line 17  10 Investment income percentage from 2011 Schedule A, Part III, line 17  10 Investment income percentage from 2011 Schedule A, Part III, line 17  11 Investment income percentage from 2011 Schedule A, Part III, line 17  12 Investment income percentage from 2011 Schedule A, Part III, line 17  13 Investment income percentage from 2011 Schedule A, Part III, line 17  14 Investment Incom	<del></del>	tion A Public Support	quality under t	ne tests listed	below, please o	omplete Part I	1.)	
Class practic contributions, and memberality free released (Do not include any "unissual grants")   Class anotists from achieties, mechanise and consists from achieties, mechanise and complete and consists from achieties that are not an unrelease that or business under except purpose in cognitations in the except purpose in cognitations in the except purpose in the cognitation is more organization to benefit and either paid to or expended on its behalf in the cognitation of the paid to or expended on the shell of the cognitation of the except purpose in cognitation of benefit and either paid to or expended on the shell of the cognitation of the except purpose in the except purpos			(=) 2009	(h) 2000	(=) 2010	(4) 2011	(0) 2012	/O Total
2 Goss receipts from admissions, recreamings badd or services performed, or feeliblings that shall be received proposed.  3 Gress receipts from admission that shall be received by the state of the organization of benefits and either peal to or expended on its behalf in the organization of benefits of the organization of the shall be organized organization of the shall be organized organization organized organization or		Gifts, grants, contributions, and membership fees received. (Do not include any "unusual	(2) 2008	(B) 2009	(6) 2010	(4) 2011	(6) 2012	(T) TOTAL
unvailed trial or business under the the  organization's benefit and either paid  to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without change  The value of services or facilities furnished by a governmental unit to the organization without change  Amounts Included on lines 1, 2, and 3 moved from disqualified persons  Amounts Included on lines 1, 2, and 3 movived from disqualified persons  Amounts Included on lines 1, 2 and 3 movived from disqualified persons  Amounts Included on lines 2 and 3 movived from the hand disqualified persons that exceed the prester of 5,000 or 1% of the amount on line 15 for the year  Add lines 7 and 77  Public support (Subtract line 7 of from line 8.)  Amounts from line 6  A	2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
organization's benefit and either paid to or expended on its behalf.  5 The value of services or facilities frumithed by a governmental unit to the organization without change.  6 Total. Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 maceived from disqualified persons.  9 Amounts included on lines 1, 2, and 3 maceived from disqualified persons.  9 Amounts included on lines 1, 2, and 3 maceived from disqualified persons.  9 Amounts included on lines 2, and 3 maceived from disqualified persons that cause this greater of \$5,000 or 1% of the amount on line 15 for the year.  9 Add lines 7 and 7?  8 Public support (Subtract line 7 of from line 8.)  9 Amounts from line 6.)  9 Amounts from line 6.  10 Costs income from interest, dividends, payments recorded on securities bears, mining, reynities and income from similar sources.  9 Interested business stands bears, mining, reynities and income from similar source sees section 511 taxosely from businesses acquired after June 90, 1975.  9 Add lines 10a and 10b  10 Unrelated business stands income (sees section 511 taxosely from businesses acquired after June 90, 1975.  9 Add lines 10a and 10b  10 Total support. (Add lines 9, 10c, 11, and 12).  11 Total support. (Add lines 9, 10c, 11, and 12).  12 Other income. Do not include gain or loss from the sale of capital asserts (Eppilain In Part IV.)  13 Total support. (Add lines 9, 10c, 11, and 12).  14 Pilles support percentage from 2011 Schedule A, Part III, line 17  15 Public support percentage from 2011 Schedule A, Part III, line 15  16 Yebic support percentage from 2011 Schedule A, Part III, line 15  17 Investment income percentage for 2012 (line 8, column (f) divided by line 13, column (fi)  18 Investment income percentage for 2012 (line 8, column fi divided by line 15, column (fi)  19 Total support destreas—2012, if the organization did not check the box on line 14 or line 16a incree than 33 175%, and line 15 is not more than 33 175%, check this box and stop here. The organization qualifies as a publicly	3	Gross receipts from activities that are not an unrelated trade or business under section 513						
furnished by a governmental unit to the organization without charge and a construction without charge and 3 received from disqualified persons in the case of a present of \$5,000 or 1% of the amount on line 31 of the year and 7 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 31 of the year and 7 received from their the disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 31 of the year and 7 received from their the disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 30 for they are and 10 received from 1	4	organization's benefit and either paid						
Total support. (Add lines 10 and 10 b.  Add lines 10 and 10 b.  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation, of Public Support Percentage  Public support (Add lines 9, 10c, 11, and 12).  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  Investment income percentage from 2011 Schedule A, Part III, line 15.  Note that the second premates as a publicly supported organization   13 meters   13	5	furnished by a governmental unit to the organization without charge				_		
received from disqualified persons b Anounts included on line 2 and 3 naceled from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7s and 7b Public support (Subtract line 7c from line 8.)  Section B. Total Support Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total  B Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalise and income from shaller sources b Unrelated business taxable income (lease section 51 taxes) from businesses acquired after June 30, 1875 c Add lines 10a and 10b  Not income from unrelated business acable income (lease section 51 taxes) from businesses acables and thicked in line 10b, whether or not the business is regularly carried on 10b and 12.)  Other income. Do not include gain or loss from the sales (capital assests (Explain in Part IV.)  Total support, (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Public support percentage for 2012 (line 3, column (f) divided by line 13, column (f))  First five years. If the Form 990 is for the organization of the column of the section D. Computation of Public Support Percentage  Investment income percentage for 2011 Schedule A, Part III, line 15.  Section D. Computation of Investment Income Percentage  Investment income percentage form 2011 Schedule A, Part III, line 17 is not more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  B 33 1/3% support testes—2011. If the organization dind not check the box on line 14 or line 18g, and line 16 is mo	6	Total. Add lines 1 through 5		ļ				
received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the smount on line 13 for the year.  8 Public support (Subtract line 7c from line 8.)  8 Public support (Subtract line 7c from line 8.)  9 Amounts from line 6.  10a Gross income from interest, dividends, payments acceived on securities loses, rents, reyables and income from interest dividends, payments received on securities loses, rents, reyables and income from similar sources.  9 Unrelated business travable income (less section 511 taxes) from businessess acquired after June 30, 1975.  a Add lines 10a and 10b  11 Net income from unrelated business acquired in line 10b, whether or not the business it regularly ceried on lose from the sale of capital assets (Explain in Part IV.)  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.)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here:  Section C. Computation of Public Support Percentage  15 Public support percentage from 2011 Schedule A, Part III, line 17  16 Public support percentage from 2011 Schedule A, Part III, line 17  18 33 167% support testes—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.		received from disqualified persons						
C Add lines 7a and 7b  Public support (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶  Amounts from line 6.  10a  Gross income from interest, dividends, payments received on securities loans, ents, royalize and income from similar sources.  b Unnelsted business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  11 Net recome from unstated business activities not include gain or loss from the sale of capital seests exhibits not included in 10b, whether or not the business is regularly carried on .  12 Other Income. Do not include gain or loss from the sale of capital seests (Explain in Part IV.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  15 Public support percentage from 2011 Schedule A. Part III, line 15  Public support percentage from 2011 Schedule A. Part III, line 17  18 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  1	b	received from other than disqualified persons that exceed the greater of \$5.000						
Section B. Total Support  Calendar year (or fiscal year beginning in)   Amounts from line 6  Gross income from interest, dividends, payments received on securities cans, rents, roysities and income from similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10e and 10b  11 Net income from unrelated business advities 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 citylism in Part IV)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))  19 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  20 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  21 Investment income percentage for 2015 the box and stop here. The organization qualifies as a publicly supported organization	C	•••						
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Schedule A (Fo	orm 990 or 990-EZ)	2012 GREA'	r Grand	NACHAS	AND	MORE	INC.	80-0600229	Page 4
Pan N	Supplemental	Information.	Complete	this part to	provide	the expl	lanations	required by Part II, line 10; additional information. (See	
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### 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 Does to Public

Name of the organization

GREAT GRAND NACHAS AND MORE INC.

Employer identification number 80-0600229

FORM 990-EZ, PART I, LINE 10 - GRANTS/SIMILAR AMTS PAID TO INDIVIDUALS RELATIONSHIP TO ORG CLASS OF ACTIVITY DATE OF GIFT DESC. OF PROPERTY CASH CONTRIB. NONCASH CONTRIB. BOOK VALUE BV EXPL. FMV EXPL.
\$ 22,050 \$ 0 \$ 0
FORM 990-EZ, PART III - PRIMARY EXEMPT PURPOSE
TO COLLECT MONEY TO BE DISTRIBUTED TO CHILDREN WHO NEED FUNDS FOR MEDICAL
EQUIPMENT
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