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Department of the Treasury Internal Revenue Service

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 1545-0047 **Open to Public**

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

Inspection

<u>A</u>	For th	e 2012 calendar year, or tax year beginning JUL 1, 2012 and endi	<u>ng JUN 30, 2</u>	2013
В	Check if	C Name of organization	D Employer i	dentification number
	applicat	UNITED JEWISH FEDERATION OF PRINCETON		
	Addr chan		i	
	Name chan	ge Doing Business As		3-2215070
Ε	Initial		n/suite E Telephone i	
Γ	Term	· · · · · · · · · · · · · · · · · · ·		09-219-0555
Ē	Amer	nded on the second of the seco	G Gross receipts	4 0 6 4 6 0 0
Ē	Appli		H(a) Is this a g	· · · · · · · · · · · · · · · · · · ·
_	pend	F Name and address of principal officer MARK MERKOVITZ	for affiliate	
		SAME AS C ABOVE		ates included? Yes No
_	Tax-ex	xempt status: Solicity Sol		tach a list. (see instructions)
		ite: WWW.UJFPMB.ORG		emption number
				31 M State of legal domicile: NJ
	art I		_ Tour or formation	S 1 W Cate of legal dofficie. 148
	T .	Briefly describe the organization's mission or most significant activities: PRESERV	E. SECURE.	AND STRENGTHEN
2世代 Activities & Governance		JEWISH LIFE AND VALUES.	DI DECORE	THE BIRDHOINEN
, ,	2	Check this box fithe organization discontinued its operations or disposed of	f more than 25% of its	not assats
Ž	3	Number of voting members of the governing body (Part VI, line 1a)		3 50
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4 46
oč g	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5 6
÷ ₹	6			6 200
20 kg	72	Total unrelated business revenue from Part VIII, column (C), line 12		7a 0.
`~ 4	, a	Net unrelated business taxable income from Form 990-T, line 34		7b 0.
\tilde{c}		14et differated business taxable filcome from 1 offi 930-1, fille 54	Prior Year	
	8	Contributions and grants (Part VIII, line 1h)	1,306,8	Current Year 1, 252, 422.
	9	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		50. 86,320.
, S	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	22,3	
<u>ان</u> هُ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 30c, 10c, and 11e) 2014		95. 178.
2-	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 100	1,342,0	
SCANNED UN	13		780,3	
(<u>)</u>	14	Grants and similar amounts paid (Part IX, column (A), lines (3) DEN, UT. Benefits paid to or for members (Part IX, column (A), line 4)	700,3	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	347,0	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	347,0	0. 343,334.
ě	h	Total fundraising expenses (Part IX, column (D), line 25) 210,859.		0.
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	233,3	25. 304,431.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,360,7	
	1	Revenue less expenses. Subtract line 18 from line 12	. <18,6	97.> 1,179.
5	<u> </u>	Trevende loss expenses. Capitaci into To Holl line 12	Beginning of Current	
Assets or	20	Total assets (Part X, line 16)	2,084,4	
Ass	21	Total liabilities (Part X, line 26)	1,041,0	
E S	22	Net assets or fund balances. Subtract line 21 from line 20	1,043,4	
ΓĒ	art II		<u> </u>	75. 1,115,750.
_		alties of perjury, I declare that I have examined this return, including accompanying schedules and	statements, and to the he	est of my knowledge and helief it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which pi		
		N/WIN	/u i	.1111
Sig	an	Signature of officer	Date	
He	-	MARK_MERKOVITZ, PRESIDENT		
• • • •		Type or print name and title	- ··	
		Print/Type preparer's name Preparer's aumature/	Date	heck X PTIN
Pa	id	Print/Type preparer's name JAMES M. WOOD Preparer's ennature	02/14/14	العفا
	parer	Firm's name JAMES M. WOOD, CPA	Firm's E	
	e Only	Firm's address 603B OMNI DRIVE	7 1111 3 1	22 3004713
	-	HILLSBOROUGH, NJ 08844	Phone r	no. (908)431-1700
Ma	ay the I	RS discuss this return with the preparer shown above? (see instructions)	1, 1131101	Yes No
	001 12-			Form 990 (2012)

918.22

UNITED JEWISH FEDERATION OF PRINCETON Form 990 (2012) MERCER BUCKS, INC. 23-2215070 Page 2 Part III Statement of Program Service Accomplishments \mathbf{x} Check if Schedule O contains a response to any question in this Part III ... Briefly describe the organization's mission: THE MISSION OF THE JEWISH FEDERATION OF PRINCETON MERCER BUCKS IS TO PRESERVE, SECURE, AND STRENGTHEN JEWISH LIFE AND VALUES IN OUR COMMUNITY, THE STATE OF ISRAEL, AND THROUGHOUT THE WORLD. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If "Yes," describe these changes on Schedule O.

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 899,271. including grants of \$ 712,404.) (Revenue \$ 86,320.)) (Expenses \$ FEDERATION IS THE SINGLE LARGEST JEWISH FUNDRAISING ENTITY IN THE COMMUNITY. HUNDREDS OF VOLUNTEERS REACH OUT TO THOUSANDS OF RESIDENTS IN THE PRINCETON MERCER BUCKS AREA TO SECURE FUNDS THAT PROVIDE NECESSARY SUPPORT TO LOCAL, NATIONAL AND INTERNATIONAL AGENCIES. THESE AGENCIES IN TURN REACH OUT TO MILLIONS OF PEOPLE IN NEED. THE FUNDS WE PROVIDE, IN CONCERT WITH FEDERATIONS AND OUR COUNTERPARTS THROUGHOUT THE DIASPORA, ARE OF CRITICAL IMPORTANCE TO MEET THE EVER-INCREASING OUR ABILITY TO REACH OUT AND PROVIDE CHALLENGES THAT LIE BEFORE US. IMPORTANT FUNDING ENABLES US TO "BRING TO THE TABLE" INDIVDUAALS AND GROUPS_TO DISCUSS_IUSSES, SHARE EXPERTISE AND PLAN COURSES OF ACTION. THIS TYPE OF EXCHANGE IS AT THE CORE OF OUR SURVIVAL AS A PEOPLE. OUR NETWORK OF COOPERATION IS GLOBAL AND ALLOWS US NOT ONLY TO REACT TO (Code _____) (Expenses \$___) (Revenue \$ including grants of \$) (Revenue \$ Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$

232002 12-10-12

Total program service expenses

SEE SCHEDULE O FOR CONTINUATION(S)

Form 990 (2012)

899,271.

MERCER BUCKS, INC. 23-2215070 Page 3 Form 990 (2012) Part IV Checklist of Required Schedules No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X Is the organization required to complete Schedule B, Schedule of Contributors? X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II Х 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X Schedule D. Part III 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? X If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X 11 as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in X Part X, line 16? If "Yes," complete Schedule D, Part IX 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X ... 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Х 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D. Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization 15 or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals 16 located outside the United States? If "Yes," complete Schedule F, Parts III and IV X 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 1c and 8a? If "Yes," complete Schedule G, Part II 18

Form 990 (2012)

20a

X

Х

19

complete Schedule G, Part III

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2012) , MERCER BUCKS, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21_	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
м	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	2.70		
2 3a	Liver 15 of a second district Absorbed Millor Hammelete Cohedula I. Dont I.	25a		X
L	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		х
00	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			41
26	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
~~	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		27		X
	of any of these persons? If "Yes," complete Schedule L, Part III	21		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	00-		v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	77	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		
	Schedule N, Part II	_32_		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	ļ	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b	 	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	ļ	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	L	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L

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Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in the Part V

	Check if Schedule O contains a response to any question in this Part V			\Box
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			:
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		I	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		_X_
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		X
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		f	
11	Section 501(c)(12) organizations. Enter:	- 1	1	
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.) 11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	Ţ		
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1	
	organization is licensed to issue qualified health plans	ļ		
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	9907	2012

MERCER BUCKS, INC. Form 990 (2012)

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI					<u>LX</u>
Sec	tion A. Governing Body and Management			1		
		1.1	د ما		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	50			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.		4.0			
ь	Enter the number of voting members included in line 1a, above, who are independent	_1b	46			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	p with any other				
	officer, director, trustee, or key employee?			2	<u> </u>	
3	Did the organization delegate control over management duties customarily performed by or under the	•	on			
	of officers, directors, or trustees, or key employees to a management company or other person? \dots			3		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X
6	Did the organization have members or stockholders?			6	_X_	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint one or				
	more members of the governing body?		-	7a_	<u> </u>	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockholders, or				
	persons other than the governing body?			7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?			8a	X	
þ	Each committee with authority to act on behalf of the governing body?			_8b_	_X_	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	<u> </u>		9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	evenue Code.)				
	Dutte and detailed the book of the control of the C		1		Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		<u> </u>
D	If "Yes," did the organization have written policies and procedures governing the activities of such or and his procedure and procedure governing the activities of such organization.	napters, amiliates,	'	401		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing boo		······································	10b	X	
ı ıa		before ming the	1011111	11a		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	x	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to conflicts?		12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			12.0		
•	in Schedule O how this was done			12c	х	
13	Did the organization have a written whistleblower policy?	••••		13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by independent	:			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	, , , , , , ,				
а	The organization's CEO, Executive Director, or top management official			15a	X	
Ь	Other officers or key employees of the organization	• •••• • • • • • • • • • • • • • • • • •	· · · · ·	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a				
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its participation	n i			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	nization's				
	exempt status with respect to such arrangements?			16b		
<u>Sec</u>	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶NJ, PA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
		n In Schedule O)				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict of interest p	policy, and	i finan	cial	
	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books a	and records of the	organızat	ion: 🕨	·	
	THE ORGANIZATION - 609-219-0555					
23200	4 PRINCESS ROAD, NO. 211, LAWRENCEVILLE, NJ 08648)		C	990	(20.40)
12-10-	12			LÁHI	JJU	(2012)

Form 990 (2012) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per week	(do box,	not c	(C Posi heck ss pe	ition		one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KAREN ANDERSON	1.00					-				
VP/CAMPAIGN	1 00	X		X	_	ļ	_	0.	0.	0.
(2) STUARD AXELROD	1.00				ŀ					
TREASURER	1 00	X		X	<u> </u>	├—		0.	0.	0.
(3) GEOFFREY BERMAN	1.00	.,								•
BOARD MEMBER	1 00	X				┢		0.	0.	0.
(4) ARTHUR BLICK	1.00	x			Ì	1		0.	0.	,
BOARD MEMBER	1.00	^			├	╁	\vdash	<u> </u>	U.	0.
(5) DANIEL BRENT	1.00	x						0.	0.	0.
PAST PRESIDENT	1.00	^				╁	┢		0.	<u> </u>
(6) BRIAN CHEVLIN	1.00	x						0.	0.	0.
BOARD MEMBER (7) JILL SCHWARTZ CHEVLIN	1.00	7				\vdash		- 0.	- 0.	<u> </u>
BOARD MEMBER	1.00	x						0.	0.	0.
(8) HOWARD COHEN	1.00						\vdash			
BOARD MEMBER		x						0.	o.	0.
(9) ROBERT DAVIDSON	1.00	<u>-</u>					Г			
VP/ADMIN & PERSONNEL		X		x		1		0.	٥.	_ 0.
(10) RYSIA DE RAVEL	1.00		1							
SECRETARY		X		X				0.	0.	0.
(11) ANDREA DEDRICK	1.00									
BOARD MEMBER		X						0.	0.	0.
(12) MICHAEL FELDSTEIN	1.00									
VP/ISRAEL & OVERSEAS		X		X				0.	0.	0.
(13) ELIOT FREEMAN	1.00									
PAST PRESIDENT		X						0.	0.	0.
(14) MARSHA FREEMAN	1.00									
BOARD MEMBER		X						0.	0.	0.
(15) GIL GORDON	1.00									
BOARD MEMBER	_	X		<u> </u>	_		<u> </u>	0.	0.	0.
(16) DAVID GREENBERG	1.00	l						_	_	_
BOARD MEMBER		X	<u> </u>	\vdash	_	<u> </u>	<u> </u>	0.	0.	0.
(17) MERRYE SHAVEL HUDIS	1.00	l		l			1		_	_
BOARD MEMBER		X]	Í	0.	0.	0.

232007 12-10-12

232008 12-10-12

Part VII Section A. Officers, Directors, Trus	ľ	(C)						l .					
(A) Name and title	(B) Average hours per	box	not c	Pos heck ss pe	rtion more rson	than	th an	(D) Reportable compensation	(E) Reportable compensation	1 -	(F) stimate nount (-	
	week (list any hours for related organizations below line)	tee or director	Institutional trustee	od a d		Highest compensated 3	Ė	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	org ar	other npensation the ganization of relate anization	ed	
(18) EMILY JOSEPHSON	1.00	x		x				0.	0			0.	
VP/COMMUNITY RELATIONS & ALLOCATIONS (19) SETH JOSEPHSON	1.00	^		A	\vdash	1	-	0.		1		<u> </u>	
BOARD MEMBER	1.00	x						0.	0.			0.	
	LIONEL KAPLAN 1.00											<u> </u>	
BOARD MEMBER		x						0.	ο.	_		0.	
(21) MICHAEL KATZ	1.00	-	T							1-			
BOARD MEMBER		x						0.	o .			0.	
(22) RICHARD KOHN	1.00							<u> </u>		` 			
VP/JEWISH_FOUNDATION		x						0.	0.			0.	
(23) JEROME KURSHAN	1.00												
BOARD MEMBER		x						0.	l 0.			0.	
(24) DONALD LEIBOWITZ	1.00						—		_				
PAST PRESIDENT		x	Ì					0.	0.			0.	
(25) ROBERT LEVINE	1.00												
BOARD MEMBER		X					l .	0.	0.			0.	
(26) BOB LIPSKY	1.00												
PAST PRESIDENT		X						. 0.	0	<u> </u>		0.	
1b Sub-total								0.	0.		0		
c Total from continuation sheets to Part V	II, Section A							123,639.	0		3,7	96.	
	 					<u> </u>		123,639.	0.	. 1	<u>3,79</u>	96.	
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) w	ho re	eceived more than \$100	0,000 of reportable				
compensation from the organization												1	
											Yes	No	
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			e, ke	y er	nplo	oyee	, or	highest compensated e	mployee on	3		х	
4 For any individual listed on line 1a, is the su	•							•	the organization			х	
and related organizations greater than \$15Did any person listed on line 1a receive or a									idual for convices	4			
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	=				-			ed organization or indiv	idual for services	5		х	
Section B. Independent Contractors	ipiete Scriedui	0 J /	UI S	ucn	pers	SOII	• •	**	·] 5	1		
1 Complete this table for your five highest co										sation	from		
the organization. Report compensation for	the calendar y	ear	endi	ing v	vith	or v	<u>vithir</u>	the organization's tax	year.				
(A) Name and business	address	N	ON	E				(B) Description of s	services		C) ensatioi	n	
										•			
							_						
			_								ļ.		
							ļ						
2 Total number of independent contractors (including but r	ot li	mıte	d to	tho	se l	sted	l above) who received n	nore than				
\$100,000 of compensation from the organi	zation					0_		Drim d			000 (

EE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2012)

MERCER BUCKS, INC. 23-2215070 Form 990

Part VII Section A. Officers, Directors (A)	(B)			(((D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(hecl	alit	that	app	ly)	compensation	compensation	amount of
	per		1					from	from related	other
	week (list any	ڃ ا				ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	e e				ᄩ		(W-2/1099-MISC)	(11-2/1055-11100)	organization
	related	e o	ste			n safe		(,,		and related
	organizatior	າຣ 🦉	盲		oyee	E O				organizations
	below	Signal trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
	line)	\rightarrow	E	₹	ξ.	呈	호			
(27) KENNETH MACK	1.00								_	
PAST PRESIDENT		X	4—			<u> </u>	<u> </u>	0.	0.	0
(28) MARK MERKOVITZ	1.00		1				l	_		
PRESIDENT		X		X			_	0.	0.	0
(29) STEVE MINSKY	1.00						ĺ		_	
BOARD MEMBER		X	.	X		<u> </u>	_	0.	0.	0
(30) MARK NEMIROFF	1.00								_	_
BOARD MEMBER		X	+				ļ	0.	0.	0
(31) DAVID NEUFELD	1.00								_	_
SOARD MEMBER	1 0	X	+-	-	-	<u> </u>		0.	0.	0
(32) JERRY NEUMANN	1.00								_	_
BOARD MEMBER	1 0	X	-	_		 -	}—	0.	0.	0
(33) CAROL POLLARD	1.00									_
PAST PRESIDENT	1 0	<u> </u>	╁		_		┢	0.	0.	0
(34) MORDECHAI ROZANSKI	1.00	$\exists_{\mathtt{x}}$.					0.	0.	0
BOARD MEMBER	1.00		+-	-	-	-	╁	<u> </u>	<u></u>	- 0
(35) NORMA SAKS	1.00	$\dashv_{\mathbf{x}}$					ļ	0.	0.	0
BOARD MEMBER	1.00		+-	-	_		-	- 0.	0.	<u>_</u>
(36) PAUL SCHINDEL	1.00	ער	.				Ì	0.	0.	0
BOARD MEMBER	1.00		+	 	-		t^-	•	~	
(37) MARC SHEGOSKI BOARD MEMBER	1.00	<u>بر</u> اـُ	.		1			0.	o.	0
(38) ANDREA SILVERSTEIN	1.00	_	+				\vdash			
WOMEN'S CAMPAIGN CHAIR		מֽוֹד	.					0.	0.	o
(39) NADINE SINGER	1.00		1				T	1		_
BOARD MEMBER		אַ	:					0.	0.	0
(40) GARY SMOTRICH	1.00									
BOARD MEMBER		ת	:			l		0.	0.	0
(41) LISA SMUKLER	1.00	ס								
IMMEDIATE PAST PRESIDENT		אַ	:]					0.	0.	0
(42) LISA TOBIAS	1.0	2								
BOARD MEMBER		X	:		<u> </u>	L		0.	0.	0
(43) MARISSA TREU	1.0									
PAST PRESIDENT		X	1	<u> </u>	<u> </u>	_		0.	0.	0
(44) AMY VOGEL	1.0			1						
BOARD MEMBER		X	-	<u> </u>	<u> </u>	<u> </u>	1	0.	0.	0
(45) ALAN WALLACK	1.00				ĺ			_	_	_
BOARD MEMBER		X	4	_	<u> </u>	_	 	0.	0.	0
(46) ROBERT WEBER	1.0							_	_	
BOARD MEMBER	L	<u> </u>				<u> </u>	<u></u>	0.	0.	0

23-2215070

Form 990 MERCER B						_			<u> </u>	5070
Part VII Section A. Officers, Directors, Tre		nplo	yee			ligh	est			
(A) Name and title	(B) Average hours	(cl		(C Posi all t	ition		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
47) STEPHANIE WILL	1.00									
NOMEN'S PRESIDENT	1 00	X				<u> </u>	 	0.	0.	0
48) JULIE DAVIDSON	1.00	i	.					0.		_
EXEC DIR OF FOUNDATION	1.00	_	X	Н		-			0.	С
49) STUART POLLACK	1.00	1	X					0.	0.	
PRES/BD OF RABBIS PMB (50) ANDREW FRANK	35.00		Δ	\vdash			\vdash	•	0.	
EXECUTIVE DIRECTOR	33.00	1			x			123,639.	0.	13,796
ANDOVITY DIRECTOR										
			-							
						-				
		<u> </u>	_							•
<u> </u>		1			_					
· · · · · · · · · · · · · · · · · · ·		_								
		1								
		† 1								
			_							
							ļ			
		-	\vdash							
		1			<u> </u>	_				
		1_			_	ļ	<u> </u>			
		_								
Fotal to Part VII, Section A, line 1c			-					123,639.		13,796

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			Check if Schedule O contains	s a response t	to any question i	n this Part VIII			
			O'HOUR IT GOTHOURE O' COMMAND	за тезропов т	s any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
ts s	1	a	Federated campaigns	1a					
Ē	-		Membership dues	1b					
هَ ق			Fundraising events	40					
ifs F A			Related organizations	·· —					
ပချ			<u>-</u>						
Sign			Government grants (contributions						
풀힐		f	All other contributions, gifts, grants, a		252 422				
흔히			similar amounts not included above		252,422.				
Contributions, Gifts, Grants and Other Similar Amounts		_	Noncash contributions included in lines 1a-	if \$	110,816.				
<u>ā ŭ</u>		h_	Total, Add lines 1a-1f		<u> </u>	1,252,422.			
					Business Code				
8	2	а	MISSION TRIPS		900099	86,320.	86,320.		
Program Service Revenue		b							
S S		С							
e a		d							
<u></u>		e		_					
حّ		f	All other program service revenue	•					
			Total. Add lines 2a-2f			86,320.			
	3		Investment income (including div	idends, intere	st, and				
	•		other similar amounts)			22,688.			22,688.
	4		Income from investment of tax-ex					•	
	5		Royalties		•				
	•			(i) Real	(ii) Personal				
	_	_	Gross rents	ty rical	(ii) i croonai				
	6								
			Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)		67 045				-
	7	а) Securities	(ii) Other				
			assets other than inventory						
		b	Less: cost or other basis						
			and sales expenses						
			Gain or (loss)						
			Net gain or (loss)		· ··· · · •				
ē	8	а	Gross income from fundraising e						
ĕ			including \$	of					
ě			contributions reported on line 1c). See					
er F			Part IV, line 18	a					
Other Revent			Less: direct expenses						
J		С	Net income or (loss) from fundral	sing events					
	9	а	Gross income from gaming activi	ties. See					
			Part IV, line 19	а					
		b	Less: direct expenses	b	i				
		С	Net income or (loss) from gaming	activities	, , .				
	10	а	Gross sales of inventory, less ret	urns					
				а					
		h	Less cost of goods sold						
			Net income or (loss) from sales of				ļ		
		<u> </u>	Miscellaneous Revenue	raiveinory	Business Code				
	44	_	OTHER		900099	178.	178.		
	11				300033	170.	1,0.		-
		b							
		C							
		d				170			
	I	е	Total. Add lines 11a-11d			178.			22 622
22200	12		Total revenue. See instructions.	· · · · · · · · · · · · · · · · · · ·	-	<u>1,361,608.</u>	86,498.	0	
23200 12-10	-12								Form 990 (2012)

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Form 990 (2012) MERCER BUCKS,
Part IX Statement of Functional Expenses

	Check if Schedule O contains a response			······································	<u> </u>
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 (Grants and other assistance to governments and				
(organizations in the United States. See Part IV, line 21	712,404.	712,404.		
2	Grants and other assistance to individuals in		·		
1	the United States. See Part IV, line 22				
3 (Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,	100 600		61 000	61 010
	trustees, and key employees	123,639.		61,820.	61,819
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	165,726.	E2 220	62,470.	E0 020
	Other salanes and wages	103,740.	53,228.	04,4/0.	50,028
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	30,400.	5,592.	13,058.	11,750
	· · · · · · · · · · · · · · · · · · ·	3,735.	687.	1,604.	1,444
	Other employee benefits	20,094.	3,696.	8,631.	7,767
	Payroll taxes	20,094.	3,090.	0,031.	1,101
	Managament				
		5,000.		5,000.	
	Legal	12,201.		12,201.	
	Lobbying			22/2020	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	7,998.		7,998.	
	Other. (If line 11g amount exceeds 10% of line 25,			, 100	
-	column (A) amount, list line 11g expenses on Sch O.)	54,726.	9,700.	6,631.	38,395
	Advertising and promotion	-			
	Office expenses	2,308.	2,308.		
14	Information technology				
	Royalties				
	Occupancy	55,065.	18,401.	21,847.	14,817
	Travel				
18	Payments of travel or entertainment expenses				
1	for any federal, state, or local public officials			_	
19	Conferences, conventions, and meetings	95,189.	90,866.	4,323.	
20	Interest				
	Payments to affiliates				
22 1	Depreciation, depletion, and amortization	982.	417.	284.	281
	Insurance	8,248.		8,248.	
;	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	BAD DEBTS	24,100.		24,100.	
	BANK FEES	10,475.		1,048.	9,427
	EQUIPMENT MAINTENANCE	9,389.	1,073.	4,955.	3,361
	TELEPHONE	6,419.	899.	3,145.	2,375
-	All other expenses	12,331.		2,936.	9,395
	Total functional expenses. Add lines 1 through 24e	1,360,429.	899,271.	250,299.	210,859
	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Permanently restricted net assets

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

and complete lines 30 through 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

23-2215070 Page 11 MERCER BUCKS, INC. Form 990 (2012) Part X **Balarice Sheet** Check if Schedule O contains a response to any question in this Part X (B) (A) End of year Beginning of year 80,485. 223,011. 1 Cash - non-interest-bearing 404,172. 316,308. Savings and temporary cash investments 2 2 634,624 <u>579,858.</u> 3 3 Pledges and grants receivable, net Accounts receivable, net . .. 5,069. 9,120. 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 115,000. 115,000 Notes and loans receivable, net inventones for sale or use 8 Prepaid expenses and deferred charges . . . 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 64,984. 10b 0. 64,984. 982. 10c Less: accumulated depreciation b 11 11 Investments - publicly traded securities 826,888. Investments - other securities. See Part IV, line 11 12 826,639. 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Other assets. See Part IV, line 11 17,260. 17,493. 15 15 2,084,480. 2,087,429. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 2,553. 16,346. 17 Accounts payable and accrued expenses 17 18 18 Grants payable Deferred revenue . . . 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of <u>1,038,452.</u> <u>957,325.</u> Schedule D ,041,005. 973,671. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances <u>216,587.</u> 187,119. Unrestricted net assets ... 27 27 Temporarily restricted net assets 826,888. 926,639. 28 28

> 2,087,429. Form 990 (2012)

1,113,758.

30

31

32

33

1,043,475.

2.084.480.

30

31

32

33

Form	990 (2012) MERCER BUCKS, INC.	23-2215	070	Pag	је 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1	, 361	.,6	<u>08.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2 1	,360	,4	<u> 29.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	1	.,1	79.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4 1	,043	1,4	<u>75.</u>
5	Net unrealized gains (losses) on investments	5	69	1,1	04.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	в			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
		10 1	,113	7	<u>58.</u>
Pa	rt XII Financial Statements and Reporting				
_	Check if Schedule O contains a response to any question in this Part XII	<u> </u>		<u></u>	\mathbf{x}
		1		Yes	No
1	Accounting method used to prepare the Form 990: Lash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			İ	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed or	na			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate b	asis,	1	-	
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	udit,		1	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedu	ıle O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	e Audıt			
	Act and OMB Circular A-133?		_3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	d audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form 990 (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

UNITED JEWISH FEDERATION OF PRINCETON

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number

		MERCER	BUCKS, INC.						2	<u>3-2215</u>	<u>070</u>	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	t.) See inst	tructions.				
The organ	ization is not a	a private foundation	because it is: (For lines 1	1 through	11, check	only one b	ox)					_
1 🗀	A church, co	nvention of churche	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)).				
2 🔲			70(b)(1)(A)(ii). (Attach Sc									
з 🔲	A hospital or	a cooperative hospi	ital service organization (described	ın section	170(b)(1)	(A)(iii).					
4 🔲	A medical res	search organization	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nam	ıе,
	city, and stat	e:	•		•				•	·		
5	• •		benefit of a college or ur	niversity ov	wned or or	perated by	a governi	mental unr	t describ	ed in		
	_	(b)(1)(A)(iv). (Comple		•	•	•	Ū					
6 🔲			ent or governmental unr	t describe	d in sectio	n 170(b)(1)(A)(v).					
7 X	· ·	. •	eives a substantial part					or from the	general	public desc	nbed i	in
	•	b)(1)(A)(vi). (Comple	•			3			3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
8 🗀			section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 🗔			eives: (1) more than 33 1			rom contr	butions. m	nembershii	o fees. a	nd aross red	eints	from
• —	•	<u>-</u>	• •							•		
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.											
		509(a)(2). (Complete	•		· • · · · · · · · · · · · · · · · · · ·			,			-,	•
10 🗀			perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	4).				
11	•	•	perated exclusively for th	•	•			•	v out the	purposes o	f one	or
	•	•	ations described in section		•							
		• • • •	organization and comple		-		,		-,,-,			
	a Type	· · · · · · · · · · · · · · · · · · ·		ype III - Fu	٠.		c	TVP	e III - No	n-functionall	v inter	arated
e 🗀			at the organization is not		•	-		• • •				•
•—	-		han one or more publicly		-							
f			tten determination from t		_				(-)(-)		(/(/	
•	_	rganization, check th				pc ., . , pc	, ,	•				
g	•	•	organization accepted ar	nv aift or c	ontribution	· · from anv	of the follo	owing pers	sons?	••••		
9	_		lirectly controls, either al							١.	Yes	No
			upported organization?			,		() (,	11g(i)	100	
	-	•	n described in (i) above?	, , .		•				11g(ii)		\vdash
		•	person described in (i) o	-	e?		• •	••• •• •		11g(iii)		<u>├</u>
h			about the supported or				•••			. [115(117		L
••		o	алогино опрежива оп	g	(-).							
(2) Nome	of our ported	(::) EIN	(:::) Type of organization	(iv) Is the (organization	(v) Did vo	u notify the	(vi) ls	the	(vii) Amount	of ma	noton.
	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9		sted in your		tion in col.	organizátio (i) organiz	on in col.	l, ,	ort inoi	пецагу
Oig	amzation		above or IRC section	governing	document?	(i) of you	r support?	U.S	.?	555	,,,,,,,	
			(see instructions))	Yes	No	Yes	No	Yes	No			
								ļ		!		
	-		-		_							
	-							İ				
		-		1	ļ ·		1	<u> </u>	 			
				1				1		<u> </u>		
Total						1						
	Paperwork Re	duction Act Notice	see the Instructions f	or	4	1		Schedul	e A (For	m 990 or 99	 Ω-F7\	2012
			,								/	

232021 12-04-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012 MERGER BUCKS, INC. 23-22150

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) 23-2215070 Page 2

(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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and			1			
	membership fees received. (Do not						
	include any "unusual grants.")	1,816,933.	1,742,271.	3,441,242,	1,306,876,	1,252,422.	9,559,744,
2	Tax revenues levied for the organ-						
	ization'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	1,816,933.	1,742,271.	3,441,242,	1,306,876.	1,252,422.	9,559,744.
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)						
	Public support. Subtract line 5 from line 4					•	9,559,744.
Sec	ction B. Total Support					,	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(ь) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	1,816,933.	1,742,271.	3,441,242.	1,306,876.	1,252,422.	9,559,744.
8	Gross income from interest,						
	dividends, payments received on					İ	
	securities loans, rents, royalties						
	and income from similar sources	124,384.	200,057.	82,861.	18,690.	22,688.	448,680.
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					4-0	
	assets (Explain in Part IV.)	4,025.				178.	4,203.
11	Total support. Add lines 7 through 10					<u> </u>	10,012,627.
12	•					12	86,320.
13	First five years. If the Form 990 is for		s first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	. .
80	organization, check this box and stor ction C. Computation of Publ	<u>o here</u> lic Support Pe	rcentage		<u> </u>		. •
				-1 (0)			95.48 %
	Public support percentage for 2012 (15	95.48 % 95.47 %
	Public support percentage from 2011 a 33 1/3% support test - 2012. If the						
168	stop here. The organization qualifies						►X
	33 1/3% support test - 2011. If the						••
£.							IIS DOX
47.	and stop here. The organization qua 10% -facts-and-circumstances tes						or more
1/8	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						. —
	neets the facts-and-circumstances 10% -facts-and-circumstances tes	-					
	more, and if the organization meets t						
	organization meets the "facts-and-cir				•		.
10	Private foundation. If the organization		-				S
10	Firate louiloagon, ii die organizant	an did not officer a	DOX OIT INTO TO, TO	2, .00, 1,0,01 1/1		edule A (Form 990	
							, 1E

Schedule A (Form 990 or 990 EZ) 2012 Part III | 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. If the organization fails to
qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar 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 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						•
any activity that is related to the						
organization's tax-exempt purpose			 	 		
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513			-			
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to	1			1		
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received					<u> </u>	
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 7a and 7b	<u> </u>	 		 		
8 Public support (Subtract line 7c from line 6)		<u> </u>	<u> </u>		<u> </u>	L
Section B. Total Support	 	T		1		
Calendar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6			\ -	ļ · · · -		_
10a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975			1			<u> </u>
c Add lines 10a and 10b	, .					
11 Net income from unrelated business			<u> </u>			
activities not included in line 10b,						
whether or not the business is						
regularly carned on		-	1-		+	
12 Other income. Do not include gain or loss from the sale of capital			1			
assets (Explain in Part IV.)		 	 		-	
13 Total support. (Add lines 9, 10c, 11, and 12)		<u> </u>	1	1	<u> </u>	
14 First five years. If the Form 990 is for	or the organization'	's first, second, th	rd, fourth, or fifth	tax year as a secti	on 501(c)(3) organiz	zation,
check this box and stop here		<u> </u>			·· <u>·</u>	. ▶∟
Section C. Computation of Pub					, ,	
15 Public support percentage for 2012	(line 8, column (f) o	divided by line 13,	column (f))		15	%
16 Public support percentage from 201	1 Schedule A, Parl	t III, line 15			16	%
Section D. Computation of Inve)			
17 Investment income percentage for 2					17	%
18 Investment income percentage from	•				18	%
19a 33 1/3% support tests - 2012. If the			on line 14 and lin	ne 15 is more than		
						., 13 1100
more than 33 1/3%, check this box	•					-
b 33 1/3% support tests - 2011. If the	_					
line 18 is not more than 33 1/3%, ch						▶⊨
20 Private foundation. If the organizati	on did not check a	box on line 14, 1	9a, or 19b, check			<u></u> ▶∟_
232023 12-04-12				Sc	hedule A (Form 99	0 or 990-EZ) 201:

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Name of the organization

UNITED JEWISH FEDERATION OF PRINCETON

Employer identification number 23-2215070

Pai	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or	Accounts Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6		tee and complete if the
	Organization answered Tes to Form 930, Fait IV, line to	(a) Donor advised funds	(b) Funds and other accounts
_	Total number at and of year	(a) Donor advisor rance	(5): 4::45
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wr		
	are the organization's property, subject to the organization's ex		Yes No
6	Did the organization inform all grantees, donors, and donor adv		
	for charitable purposes and not for the benefit of the donor or o		
Da			Yes No
Pai			V, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or edu	· —	
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
		•	Held at the End of the Tax Year
а	• • • • • • • • • • • • • • • • • • • •		
Ь	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic struc	• • • • • • • • • • • • • • • • • • • •	2c
d	Number of conservation easements included in (c) acquired aff	ter 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by the orga	anization during the tax
	year ▶		
4	Number of states where property subject to conservation ease	-	
5	Does the organization have a written policy regarding the perio		— —
_	violations, and enforcement of the conservation easements it h		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, at		
7	Amount of expenses incurred in monitoring, inspecting, and er		·
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(n)(4)	
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	on s financial statements that describes the c	organization's accounting for
Dai	conservation easements t III Organizations Maintaining Collections of	Art Historical Treasures or Other	r Similar Assats
1 4	Complete if the organization answered "Yes" to Form 9		Ollinai Addota.
4-	If the organization elected, as permitted under SFAS 116 (ASC		and halance sheet works of art
Id	historical treasures, or other similar assets held for public exhibit	•	
	the text of the footnote to its financial statements that describe		or public service, provide, in rait Am,
_			halance sheet works of art, historical
D	If the organization elected, as permitted under SFAS 116 (ASC treasures, or other similar assets held for public exhibition, edu		
	· · · · · · · · · · · · · · · · · · ·	ication, or research in furtherance of public s	service, provide the following amounts
	relating to these items:		~ ¢
	(i) Revenues included in Form 990, Part VIII, line 1		. • • • • • • • • • • • • • • • • • • •
_	• •		• • • ————
2	If the organization received or held works of art, historical treas	·	i, provide
_	the following amounts required to be reported under SFAS 116	· -	~ ¢
a	Revenues included in Form 990, Part VIII, line 1		_
ь	Assets included in Form 990, Part X		. > \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets/continued) 3. Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection fems (check all that apply): a Public exhibition d Loan or exchange programs b Scholarly research College College College College a Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization social creative dendations of art, instored treasures, or other similar assets to be sold to raise funds attent than to be maintained as part of the organization desiction? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, flustee, outstodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b Yes, explain the arrangement in Part XIII and complete the following table: Beginning balance Land Amount Land	<u>Sche</u>	dule D (Form 990) 2012 MERCER	BUCKS, I	NC.				2	3-22	15070	Page 2
check all that apply: a Public artibition d Loan or exchange programs b Scholarly research c Other Preservation for future generations e Other Preservation for size future than to be manatined as part of the organization collection? Ves No No Part W Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves No If "Yes, "explain the arrangement in Part XIII and complete the following table:	Pai	t III Organizations Maintaining C	collections of	of Art, I	Historical Tr	easures, c	or Oth	er Simila	r Asse	ts(continu	ued)
a Public exhibition d	3	Using the organization's acquisition, accessi	on, and other re	ecords, cl	heck any of the	following tha	t are a s	significant us	se of its	collection	rtems
b Scholarly research e Other		(check all that apply):									
c	а	Public exhibition		d [Loan or excl	nange progra	ams				
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If "Yes," explain the arrangement in Part XIII and complete the following table: 1c Beginning balance 1d Additions during the year 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217 1 Endough the year arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. 1 Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 10. 1 Beginning of year balance 2 Beginning of year balance 3 Beginning of year balance 4 Geginning of year balance 5 (9) Foreyear (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back	b	Scholarly research		e [Other						
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization collection? Part IV Escrow and Gustodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an apent, flustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Segmining balance	С	Preservation for future generations									
to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table:	4	Provide a description of the organization's co	ollections and e	xplain ho	w they further th	ne organizati	on's exe	empt purpos	e in Par	t XIII.	
Eart W Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year 1 tel 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? 1 Ending balance 1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 1 Did the organization include an amount on Form 990, Part X, line 21? 1 Did the organization include an amount on Form 990, Part X, line 21? 1 Did the organization space of the organization answered "Yes" to Form 990, Part X, line 10. 2 Did the organizations line space organization space of the current year end balance (line 1g, column (a)) held as: a Beard designated or quasi-endowment Did to 0.00 Miles Did to 0.00 Did to	5	During the year, did the organization solicit o	r receive donati	ions of ar	t, historical treas	sures, or oth	er simıla	r assets			
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance		to be sold to raise funds rather than to be ma	aıntained as pai	t of the c	organization's co	llection?				Yes	No_
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ If 'Yes,' explain the arrangement in Part XIII and complete the following table: □ Beginning balance □ Amount □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Endong balance □ Dif 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII □ Part V □ Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part N, line 10. □ Part V □ Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part N, line 10. □ Distributions □ Distributi	Par	t IV Escrow and Custodial Arran	gements. Co	omplete if	f the organization	n answered '	'Yes" to	Form 990, I	Part IV,	line 9, or	
on Form 990, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table: Admount		reported an amount on Form 990, Pa	rt X, line 21.								
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount	1a	Is the organization an agent, trustee, custod	an or other inte	rmediary	for contribution	s or other as	sets no	t included		_	
C Beginning balance C C C C C C C C C		on Form 990, Part X?							\square	Yes	☐ No
C Beginning balance 1	b	If "Yes," explain the arrangement in Part XIII	and complete t	he follow	ıng table:						
d Additions during the year Distributions during the year 1										Amount	
e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 217	C	Beginning balance			•			1c			
f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217 bif "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four year	d	Additions during the year						. 1d			
Did the organization include an amount on Form 990, Part X, line 217 Part V Endowment Funds. Complete if the organization answered Yes' to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes' to Form 990, Part IV, line 10. 1a Beginning of year balance	е	Distributions during the year						1e			
Describe the expenditures for facilities and programs Gallow the expensation has been provided in Part XIII Check here if the explanation has been provided in Part XIII Check here if the explanation answered "Yes" to Form 990, Part IV, Ine 10. 1a Beginning of year balance Gallow the organization answered "Yes" to Form 990, Part IV, Ine 10. 1a Beginning of year balance Gallow the expension of the organization is tended uses of the part XIII Check here if the explanation has been provided in Part XIII Check here if the explanation has been provided in Part XIII Check here if the explanation answered "Yes" to Form 990, Part X, Ine 10. 1a Beginning of year balance Gallow the explanation of the current year in the explanation of the provided in Part XIII Check here if the organization is the day and the explanation of the current year in the explanation of the current year of the current year of the current year of the current year of the part XIII Check here if the organization is the explanation of the organization that are held and administered for the organization of the organization of the organization that are held and administered for the organization of the organizati	f							1f			
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Calcument year (b) Prior year (c) Two years back (d) Three years back	2 a	Did the organization include an amount on Fe	orm 990, Part X	, line 21?					└	_ Yes	L N∘
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) F											
1a Beginning of year balance 6,997, 6,093, 4,850, 3,470, b Contributions 1,381, c Net investment earnings, gains, and losses Grants or scholarships 232, 905, 1,243, e Other expenditures for facilities and programs f Administrative expenses g End of year balance 7,229, 6,998, 6,093, 4,851, 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	Pai	TV Endowment Funds. Complete i		1							
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment \(\) % b Permanent endowment \(\) \(\			(a) Current ye	ear (b) Prior year	(c) Two year	s back	(d) Three year	ars back	(e) Four	years back
c Net investment earnings, gains, and losses d Grants or scholarships Chter expenditures for facilities and programs f Administrative expenses g End of year balance 7, 229, 6, 998, 6, 093, 4, 851, Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ 100.00 % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) basis (other) 1a Land b Buildings c Leasehold improvements d Equipment e Other	1a		6,9	97.	6,093.	•	4,850.		3,470.		
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 7,229, 6,998, 6,093, 4,851, Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	b								<u>1,381.</u>		
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 7,229, 6,998, 6,093, 4,851, 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b Permanent endowment 100.00 6 Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) Description of property (a) Cost or other basis (other) 4 Described the expension of the organization of property 2 Described in Part XIII the intended uses of the organization of the organization of the organization of the organization of property 2 Described in Part XIII the intended uses of the organization of the organizatio	С	- -		232.	905.		1,243.				
and programs f Administrative expenses g End of year balance 7,229, 6,998, 6,093, 4,851, Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	d									-	
f Administrative expenses g End of year balance 7,229, 6,998, 6,093, 4,851, 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	е	Other expenditures for facilities		İ							
g End of year balance										ļ	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	f	Administrative expenses								-	
a Board designated or quasi-endowment ▶	9	* * * * * * * * * * * * * * * * * * * *	•				<u>5,093.</u>		4,851.	<u> </u>	
b Permanent endowment ▶ 100.00 % c Temporarily restricted endowment ▶	2		rent year end b	alance (lir	ne 1g, column (a)) held as:					
Temporarily restricted endowment ▶	а			%							
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 3a(i) X 3a(ii) X 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment 64,984. 64,984. 0. Cother	b	· · · · · · · · · · · · · · · · · · ·	%								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iiii) related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other depreciation (d) Book value 1a Land b Buildings c Leasehold improvements d Equipment d Equipment e Other	С			_							
by: (i) unrelated organizations (ii) related organizations (iii) x (b) Cost or other (b) Cost or other (b) Cost or other (c) Accumulated depreciation (d) Book value (d) Book value b Buildings c Leasehold improvements c Leasehold improvements d Equipment e Other		•	•								
(ii) unrelated organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land b Buildings c Leasehold improvements d Equipment d Equipment Other	3a		ession of the org	ganızatıor	n that are held a	nd administe	red for	the organiza	tion	Г	
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment d Equipment d Other											
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A Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 64,984 64,984 0. e Other	_	• • • • • • • • • • • • • • • • • • • •									X_
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment c Other	ь	1,7	•		-				-	. 3b	
Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (e) Accumulated depreciation (f) Book value (g) Accumulated depreciation (h) Cost or other basis (other) (h) Cost or other basis (other) (h) Cost or other basis (other) (h) Cost or other basis (other) (h) Cost or other basis (other) (h) Cost or other basis (other) (h) Cost or other basis (other) (h) Accumulated depreciation (h) Book value (h) Book value (h) Book value (h) Cost or other basis (other) (h) Co	Bar						-	- · · · · · · · · · · · · · · · · · · ·			
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment 64,984. 64,984. 0. e Other.	Fai									(D D 1	
1a Land b Buildings c Leasehold improvements d Equipment 64,984. 64,984. 0. e Other		Description of property			1	,			'	(a) Rook	value
b Buildings		Land	Da313 (III		., Dasis	(5.1101)		producti	\dashv		
c Leasehold improvements 64,984. 64,984. 0. e Other 64,984. 64,984. 0.			· ·	.	-						
d Equipment 64,984. 64,984. 0.		•			- 				+-		
e Other			.		6	4 984		64 99	1		
<u> </u>		• • • • • • • • • • • • • • • • • • • •				z,304.		U#, 30			<u> </u>
			equal Form 990	Part X C	olumn (R) line 1	0(c))					0 -

Schedule D (Form 990) 2012

Schedule	D	(Form	990)	201	2

U-1		
MERCER	BUCKS.	TNC

Part VII Investments - Other Securities. See				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua	tion: Cost or end	-of-year market value
(1) Financial derivatives		<u>-</u>		
(2) Closely-held equity interests				
(3) Other				
(A) POOLED INVESTMENTS	826,639.	END-OF-YEA	R MARKET	VALUE
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)		<u>. </u>		
(1)	222	·		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	826,639.			
Part VIII Investments - Program Related. See				
(a) Description of investment type	(b) Book value	(c) Method of valua	tion: Cost or end	-of-year market value
(1)				_
(2)				
(3)			<u> </u>	<u></u>
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				···
(10)		·		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line 1	scription			(b) Book value
	escription			(b) DOOR VAIDE
(1)		·		
(2)	<u> </u>			
(3)				
(4)	 			<u> </u>
(5)		-		
(6)				
(7)		•	<u>-</u> .	
(9)	•			
(10)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)	· ·-·		
Part X Other Liabilities. See Form 990, Part X, lir				
1. (a) Description of liability) Book value	 	······································
(1) Federal income taxes		- · · · · · · · · · · · · · · · · · · ·		
(2) ALLOCATIONS PAYABLE		957,325.		
(3)				
(4)				
(5)	-			
(6)				
(7)				
(8)				
(9)		· · · -		
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.) ▶	957,325.		
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text			tements that rep	orts the organization's
liability for uncertain tax positions under FIN 48 (ASC 74	-			

Schedule D (Form 990) 2012

Sche	dule D (Form 990) 2012 MERCER BUCKS, INC.			23-	2215070 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Statemen	ıts W	ith Revenue per R	etun	n
1	Total revenue, gains, and other support per audited financial statements	<i>.</i>		1	1,422,714.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	69,104.		
ь	Donated services and use of facilities	2b			
С	Recovenes of prior year grants	2c		1	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	69,104.
3	Subtract line 2e from line 1			3	1,353,610.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,998.		
ь	Other (Describe in Part XIII.)	4b		1	
С	Add lines 4a and 4b			4c	7,998.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,361,608.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	nts V	Vith Expenses per	Retu	
1	Total expenses and losses per audited financial statements			1	1,352,431.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)				
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,352,431.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	••	•• • •• •• •••••		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,998.		
b	Other (Describe in Part XIII.)	4b]	
С	Add lines 4a and 4b			4c	7,998.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,360,429.
Pa	t XIII Supplemental Information				
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1	a and 4: Part IV. lines 1	b and	2b: Part V. line 4: Part
	2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p				
, ,	, <u> </u>				
			**		
			· -		
					,, , , , , , , , , , , , , , , , , , ,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. UNITED JEWISH FEDERATION OF PRINCETON INC. Part I General Information on Grants and Assistance MERCER BUCKS, Name of the organization Department of the Treasury Internal Revenue Service SCHEDULEI (Form 990)

OMB No 1545-0047 2012

Open to Public

Inspection

2 Employer identification number 23-2215070 X 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection

crit	criteria used to award the grants or assistance?	:	X Yes
2 Des	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.		
Part II	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Form 990, Part IV,	ne 21, for any
	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.		

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	55,000. Part II car	be duplicated if additi	ional space is need	190			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABRAMS HEBREW ACADEMY		_					
31 WEST COLLEGE AVE YARDLEY PA 19067	21-6001415	501(C)(3)	31,000	0			CHARITABLE PURPOSE
מפדו שמדושב ממפ תחוויות							
70 WASHINGTON ROAD							
PRINCETON, NJ 08540	21-6008282	501(C)(3)	1,800.	0			CHARITABLE PURPOSE
downer whiteholds us that							
4 PRINCESS ROAD							
LAWRENCEVILLE NJ 08648	21-0637383	501(C)(3)	40.000.	0			CHARITABLE PURPOSE
JEWISH FAMILY AND CHILDRENS							
SERVICES - 707 ALEXANDER ROAD -							
PRINCETON, NJ 08540	21-0364563	501(C)(3)	177,000.	0			CHARITABLE PURPOSE
GREENWOOD HOUSE							
53 WALTERS ROAD							
TRENTON, NJ 08691	21-0639867	501(C)(3)	85,000.	0			CHARITABLE PURPOSE
JEWISH FEDERATION OF NORTH AMERICA							
25 BROADWAY							
NEW YORK, NY 10004	13-1624240	501(C)(3)	377,604.	0			CHARITABLE PURPOSE
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government or	ganizations listed in th	e line 1 table				•

lizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012) MERCER BUCKS, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

Page 2

23-2215070

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
					. •
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the informatio	n required in Part I,	line 2, Part III, colum	n (b), and any other additional inf	ormation.
SCHEDULE I, PART I, LINE 2: ALL DONATIONS ARE APPROVED BY THE BOARD OF	NATIONS	ARE APPROV	ЕО ВУ ТНЕ	BOARD OF	
TRUSTEES AND ARE MADE TO 501(C)3 ORGANIZATIONS.	RGANIZAT		THESE ORGANIZATIONS ARE	ATIONS ARE	
REQUIRED BY THEIR EXEMPT STATUS TO	USE THE	DONATIONS	STATUS TO USE THE DONATIONS TO FURTHER THEIR	R THEIR	
CHARITABLE PURPOSE.					

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

2012

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

UNITED JEWISH FEDERATION OF PRINCETON

MERCER BUCKS, INC.

Employer identification number 23-2215070

Schedule J (Form 990) 2012

Pa	nrt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		L
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	ļ	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	<u> </u>	X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
				ĺ
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_	:	
а	The organization?	5a	<u> </u>	X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		ļ	1
	contingent on the net earnings of:	_		7-
	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	_		
	not described in lines 5 and 6? If "Yes," describe in Part III	7	ļ	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	ınıtıal contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	 	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	<u> </u>	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

MERCER BUCKS, INC.

Schedule J (Form 990) 2012

BUCKS, INC.

23-2215070

Page 2

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	•	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	otner deferred compensation	Denemts	(a)-(i)(a)	reported as deferred in prior Form 990
(1) ANDREW FRANK	€	123,639.	0	0.	9,756.	4,040.	137,435.	0.
CUTIVE DIRECTOR) (E	0	0.	0.	0.	0.	0.	0
	ε							•
	€							
	(1)							
	(ii)							•
	Ξ							
	▣							
	Ξ							
	E							
	Θ							
	€							
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232112				7			Schedu	Schedule J (Form 990) 2012

31

232112 12-12-12

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Part III Supplemental Information Schedule J (Form 990) 2012

3			•							
		i								
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]						ĺ

Schedule J (Form 990) 2012

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization UNITED JEWISH FEDERATION OF PRINCETON **Employer identification number** 23-2215070 MERCER BUCKS, INC. Types of Property (d) (c) (a) (b) Noncash contribution Check if Number of Method of determining contributions or amounts reported on noncash contribution amounts applicable tems contributed Form 990, Part VIII, line 1q Art - Works of art Art - Historical treasures 3 Art - Fractional interests Books and publications Clothing and household goods 5 Cars and other vehicles Boats and planes 7 Intellectual property 20 110,886. FAIR VALUE Securities - Publicly traded X 9 Securities - Closely held stock 10 Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 16 Real estate - Commercial 17 Real estate - Other Collectibles 18 19 Food inventory Drugs and medical supplies 20 21 Taxidermy 22 Historical artifacts 23 Scientific specimens Archeological artifacts 24 25 26 Other

			Tes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		x
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		x
b	If "Yes," describe in Part II.			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

29

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

Schedule M (Form 990) (2012)

Other Other

28

UNITED JEWISH FEDERATION OF PRINCETON Schedule M (Form 990) (2012) MERCER BUCKS, INC. 23-2215070 **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M (Form 990) (2012)

SCHEDULE O (Form 990 or 990-ÈZ)

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

UNITED JEWISH FEDERATION OF PRINCETON MERCER BUCKS. INC.

Employer identification number 23-2215070

MERCER BUCKS, INC.	23-2215070
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLI	
FURTHER THE EVENTS BUT ALSO PLAN AND SHAPE OUR COLLEC	TIVE FUTURE.
FORM 990, PART VI, SECTION A, LINE 2: CERTAIN BOARD M	MEMBERS ARE HUSBAND
AND WIFE.	
FORM 990, PART VI, SECTION A, LINE 6: INDIVIDUAL MEME	BERS - ANY JEWISH
PERSON OVER 18 YEARS OF AGE WHO HAS MADE A CURRENT YE	AR CONTRIBUTION OF AT
LEAST \$18 TO THE FEDERATION OR IS THE DESIGNATED PRIN	CIPAL IN OR OFFICER OF
A NON-INDIVIDUAL CONTRIBUTOR OF AT LEAST \$18 TO THE F	EDERATION. THIS CLASS
OF MEMBERS HAS THE RIGHT TO VOTE, ATTEND ANY OPEN BOA	ARD OF DIRECTORS
MEETING AND HOLD OFFICE.	
ASSOCIATE MEMBERS - ANY OTHER INDIVIDUAL CONTRIBUTOR	TO THE FEDERATION.
THIS CLASS OF MEMBERS HAS THE RIGHT TO ATTEND ANNUAL	MEETINGS BUT SHALL
HAVE NO VOTIING RIGHTS OR POWERS.	
·	
FORM 990, PART VI, SECTION A, LINE 7A: A NUMBER OF ME	MBERS OF THE BOARD OF
DIRECTORS (MEMBERS AT LARGE), TO BE DESIGNATED BY THE	BOARD, ARE ELECTED AT
THE ANNUAL MEETING BY THE GENERAL MEMBERSHIP.	
FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE	COMMITTEE REVIEWS
FORM 990 PRIOR TO ITS FILING. ALL BOARD MEMBERS ARE	MADE AWARE THAT THE
FORM IS AVILABLE FOR REVIEW UPON REQUEST PRIOR TO FIL	ING.

FORM 990, PART VI, SECTION B, LINE 12C: THE FEDERATION HAS A CONFLICT OF

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2012)

232211
01-04-13

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING	
DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE	
AVAILABLE UPON REQUEST.	

Form 886	68 (Rev. 1-2013)					Page 2
If you.	are filing for an Additional (Not Automatic) 3-Month Ex	tension, e	complete only Part II and check this	box		▶ 🕱
	ily complete Part II if you have already been granted an a		•	led Form	8868.	
	are filing for an Automatic 3-Month Extension, comple					
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies n	eeded).
			Enter filer's	identifyir	<u>ig numb</u>	er, see instructions
Type or	Name of exempt organization or other filer, see instru			Employe	ridentific	ation number (EIN) or
print	UNITED JEWISH FEDERATION OF	PRIN	CETON			
File by the	MERCER BUCKS, INC.					2215070
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, s 4 PRINCESS ROAD, NO. 211	ee instruc	tions.	Social se	cunty nu	imber (SSN)
instructions	City, town or post office, state, and ZIP code. For a for LAWRENCEVILLE, NJ 08648	oreign add	fress, see instructions.			
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			01
Applicat	ion	Return	Application			Return
ls For		Code	Is For	<u>-</u>		Code
Form 990	or Form 990-EZ	01				
Form 990)-BL	02	Form 1041-A			08
Form 472	20 (individual)	03	Form 4720			09
Form 990		04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	OT (trust other than above)	06	Form 8870			12
STOP! D	o not complete Part II if you were not already granted		natic 3-month extension on a prev	iously file	d Form	<u>8868</u>
• The b	THE ORGANIZATION ooks are in the care of 4 PRINCESS ROAI		. 211 - LAWRENCEVI	LLE,	NJ 08	8648
	none No. ► 609-219-0555		FAX No. ▶			
If the	organization does not have an office or place of business	s in the Ur	nited States, check this box			▶ □
	is for a Group Return, enter the organization's four digit					ole group, check this
box 🕨	. If it is for part of the group, check this box					
4 I re	quest an additional 3-month extension of time until	MAY	15, 2014			
5 Fo	r calendar year, or other tax year beginning	JUL 1	, 2012 , and ending	JUN	30,	2013 .
6 If t	he tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	Final r	etum	
L	Change in accounting period					
	ate in detail why you need the extension		·			
$\underline{\mathbf{T}}$	HE BOARD OF TRUSTEES WILL REV	VIEW	FORM 990 AT ITS UP	COMIN	G MEI	ETING.
_						
8a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
	nrefundable credits. See instructions.			8a	\$	<u> </u>
	his application is for Form 990-PF, 990-T, 4720, or 6069,	-				
tax	payments made. Include any prior year overpayment all	lowed as a	a credit and any amount paid			_
	eviously with Form 8868.			8b	\$	0.
	lance due. Subtract line 8b from line 8a. Include your pa	-	th this form, if required, by using			
EF	TPS (Electronic Federal Tax Payment System). See Instru		46	8c	\$	<u>0.</u>
	•		st be completed for Part II o	-		
onaer per It is true. a	ialties of perjury, I declare that I have examined this form, includ correct, and complete, and that I am authorized to prepare this fo	ing accomp orm.	panying schedules and statements, and to	the best o	t my know	viedge and belief,
Sionature		PRESI	DENT	Dat-	_ (11-11-1
<u>orginature</u>	Title 1	EVEDT.	DENT	Date	_	- 2000 (Day 1 0010)
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