

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



# Form '990-PF

# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service OCT SEP 30, 2013 For calendar year 2012 or tax year beginning 2012 and ending Name of foundation A Employer identification number BAIS EPHRAIM CHARITABLE FOUNDATION TRUST 11-6548272 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 8 BOXWOOD LANE C/O MARGULIES 973-227 2800 City or town, state, and ZIP code C if exemption application is pending, check here 10952 MONSEY, NY G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Name change Address change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: F If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 747,069. (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income (cash basis only) 490,000 N/A Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 32,230 32,230. Statement 125,755 125,755. Statement 4 Dividends and interest from securities 45,564 45,564 Statement 5a Gross rents Statement Net rental income or (loss) 114,858. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 411,030. 114,858. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 808,407 318,407. Total. Add lines 1 through 11 12 Compensation of officers, directors, trustees, jetc 14 Other employee salaries and wages 15 Pension plans, employee benefits JUN 2 4 2014 16a Legal fees Ò **b** Accounting fees c Other professionalifees OGDEN, UT 17 Interest Stmt 5 12,104 10,426 18 11,564 11,564. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses perating 24 Total operating and administrative 23,668 21,990 0. expenses. Add lines 13 through 23 466,996 466,996. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 490,664 21,990 466,996. Add lines 24 and 25 27 Subtract line 26 from line 12: 317,743 2 Excess of revenue over expenses and disbursements 296,417. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

## Part III Analysis of Changes in Net Assets or Fund Balances

31 Total liabilities and net assets/fund balances

1 Total net a	ssets or fund balances at beginning of year - Part II, column (a), line 30				
(must agr	e with end-of-year figure reported on prior year's return)			1	4,656,256.
2 Enter amo	unt from Part I, line 27a			2	317,743.
3 Other incr	eases not included in line 2 (itemize)			3	0.
4 Add lines	1, 2, and 3	•		4	4,973,999.
5 Decreases	not included in line 2 (itemize) ▶	See	Statement 6	5	98,375.
6 Total net a	ssets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30			6	4,875,624.
					Form <b>990-PF</b> (2012)

223511 12-05-12 4,656,256.

4,875,624

	nd Losses for Tax on In			II INO			-0340	14/4	rayes
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					cquired hase	(c) Date acquired (mo., day, yr.)		(d) Date	
		S. MLC Co.)		D - Don	ation	07/15/10		(mo., day	
18 SALE BATES HORT	ON APT			<u></u>	P	0//15	/10	08/29	/13
<u> </u>									
d	<del></del>		-						
е									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale				or (loss) f) minus (q		
a 411,030.			296,17	2.				114,	858.
b			<del></del>	_					
<u>c</u>				_					
d e									
Complete only for assets showing	gain in column (h) and owned by t	the foundation (	on 12/31/69			Gains (Col.	(h) gain i	ninus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	ess of col. (ı) ol. (j), ıf any			(k), but not Losses (fr	t less than	-0-) or	
a		<del></del> ,						114,	858.
b				_					
С				_					
d									
_e			<del></del>	$\overline{}$	<del>_</del>				
2 Capital gain net income or (net capi	ital loss) {   If gain, also enter   If (loss), enter -0-			} 2_				114,	858.
3 Net short-term capital gain or (loss)	, , ,	d (6):							
If gain, also enter in Part I, line 8, co If (loss), enter -0- in Part I, line 8	olumn (c).			) a			N/A		
Part V   Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Investr	nent Inc	ome			
If section 4940(d)(2) applies, leave this  Was the foundation liable for the section  If "Yes," the foundation does not qualify  Tenter the appropriate amount in ea	on 4942 tax on the distributable am y under section 4940(e). Do not co	mplete this part	•					Yes [	X No
(a)	(b)	100 00110110 0010	To making any or	(c)		<del></del>	Deaduch	(d)	
Base periód years Calendar year (or tax year beginning	A divinta di nuntificione di ni	tributions	Net value of nor		use assets	(00	Distribi ol. (b) divi	itión ratio ded by col. (d	c))
2011		5,040.			9,860				0464
2010		5,197.			7,173				1551
2009		8,990.			7,520				4227
2008		7,877. 9,970.			5,966 3,355				8963 9043
2007		3,310.		2,20	3,333	+ -	<del></del>	• 1 3	3043
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the 5-</li></ul>	wear hase period - divide the total o	on line 2 by 5, o	r by the number	of years		2		.48	4248
the foundation has been in existence	•	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	i by the name.	o. you. o		3		.09	6850
4 Enter the net value of noncharitable	e-use assets for 2012 from Part X,	line 5				4		4,694,	450.
5 Multiply line 4 by line 3						5		454,	657.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6		2,	964.
7 Add lines 5 and 6						7		457,	621.
8 Enter qualifying distributions from		at , .	ata tha kara ta	401 1		8		466,	996.
If line 8 is equal to or greater than li See the Part VI instructions.	ine 7, check the box in Part VI, line	ip, and comple	ete that part using	ya 1% tax 	rate. 			rm <b>000_D</b>	E (2010)

Form 990-PF (2012) BAIS EPHRAIM CHARITABLE FOUN Part VI   Excise Tax Based on Investment Income (Section 4)		11-654 948 - see		ction	Page 4
Ja Exempt operating foundations described in section 4940(d)(2), check here ▶ □ an					<del></del> -
Date of ruling or determination letter: (attach copy of letter if					! !
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ X and enter 1%	1		2,9	64.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter	r 4% of Part I, line 12, col. (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only		2			0.
3 Add lines 1 and 2	,	3		2,9	64.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	ly. Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	•	5		2,9	64.
6 Credits/Payments:			•		
a 2012 estimated tax payments and 2011 overpayment credited to 2012	6a   1,482.				1
b Exempt foreign organizations - tax withheld at source	6b				
c Tax paid with application for extension of time to file (Form 8868)	6c	1 1			ĺ
d Backup withholding erroneously withheld	6d				
7 Total credits and payments. Add lines 6a through 6d	•	7		1,4	82.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	attached	8			<u>15.</u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>•</b>	9		1,4	<u>97.</u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpai	d 🕨	10			
11 Enter the amount of line 10 to be: Credited to 2013 estimated tax	Refunded ▶	11			
Part VII-A   Statements Regarding Activities	<u> </u>			·	
1a During the tax year, did the foundation attempt to influence any national, state, or local le	egislation or did it participate or intervene	ın		Yes	No
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political pu	rposes (see instructions for definition)?		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	s and copies of any materials publishe	ed or			1
distributed by the foundation in connection with the activities.					
c Did the foundation file Form 1120-POL for this year?			10		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	the year:				
(1) On the foundation. > \$ 0. (2) On foundation management	gers. ► \$ 0.		1 1		
e Enter the reimbursement (if any) paid by the foundation during the year for political exp	enditure tax imposed on foundation	-			1
managers.▶\$ 0.			1. 1		
2 Has the foundation engaged in any activities that have not previously been reported to the	he IRS?		2		X
If "Yes," attach a detailed description of the activities.					
3 Has the foundation made any changes, not previously reported to the IRS, in its governi	ing instrument, articles of incorporation, o	or	· [		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cha	anges		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	year?		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the ye	ear?		5		X
If "Yes," attach the statement required by General Instruction T.			<u> </u>		i
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	ed either:		1 1		
<ul> <li>By language in the governing instrument, or</li> </ul>					
<ul> <li>By state legislation that effectively amends the governing instrument so that no mand</li> </ul>	latory directions that conflict with the state	e law			
remain in the governing instrument?			6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
If "Yes," complete Part II, col. (c), and Part XV.					ļ
8a Enter the states to which the foundation reports or with which it is registered (see instru	uctions) >				
NY					į
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	he Attorney General (or designate)		sons access Africanica		
of each state as required by General Instruction G? If "No," attach explanation			86	Х	<u> </u>
9 Is the foundation claiming status as a private operating foundation within the meaning of		endar			_ <u></u> _
year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes			9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a so	chedule listing their names and addresses		10		X
		Fo	orm <b>990</b>	-PF (	(2012)

orm 990-PF (201				FOUNDATION			11-65482	272	Pa	ge <b>6</b>
Part VII-B	Statements R	egarding Act	tivities for Which	Form 4720 May	Be Requ	iired (contin	nued)			
5a During the y	ear did the foundation	n pay or incur any a	amount to:							
(1) Carry or	n propaganda, or othe	erwise attempt to in	ifluence legislation (secti	on 4945(e))?		Y	es 🗶 No			l
(2) Influenc	e the outcome of any	specific public ele	ction (see section 4955);	or to carry on, directly or	indirectly,	_				ı
any vote	er registration drive?						es X No			1
(3) Provide	a grant to an individu	ial for travel, study,	, or other similar purpose	<sub>S</sub> ?		Υ	es 🗶 No 📗			-
	-		charitable, etc., organizati	on described in section				ļ		:
509(a)(	1), (2), or (3), or secti	on 4940(d)(2)?				Y	es 🗓 No 📗			į
• •	• • •	• •		,, or educational purpose:	s, or for				İ	
•	ention of cruelty to cl						es 🗶 No	ı		!
_		-		nder the exceptions descr	ibed in Regi	ulations	37/3			نــــ
			ister assistance (see insti	· ·			N/A	5b		
•		• •	lisaster assistance check					- 1		-
	•		ndation claim exemption	from the tax because it m	_		— ".			1
•	responsibility for the	-		4F F(4)	N/A	Y	es L No			i
			ulations section 53.49							
	dation, during the yea enefit contract?	ir, receive any fund	s, directly or indirectly, to	pay premiums on			es X No			
•		ur nav hramiume i	tirectly or indirectly on a	personal benefit contract	2	( r	ו שאינבטיים	6b	[	$\mathbf{x}^{-1}$
	6b, file Form 8870.	ii, pay premiums, c	inectly or inductity, on a	personal benefit contract	•			- 05	+	<u>~</u>
	•	as the foundation a	party to a prohibited tax	shelter transaction?		v	es 🗓 No			j
· ·				outable to the transaction?	,	·	N/A	7b	-+	<del></del>
				tees, Foundation		ers. Highl				—
Part VIII	Paid Employe	es, and Cont	ractors			,	•			
1 List all office	ers, directors, trus	stees, foundatio	n managers and thei	r compensation.						
	(a) Nam	e and address		(b) Title, and average hours per week devo	je <b>(c)</b> (	ompensation f not paid,	(d) Contributions to employee benefit plans and deferred	l ac	e) Expen	se ther
		e and address		to position	,,	enter -0-)	and deterred compensation	, i	llowanc	es
ARI MARG				TRUSTEE				1		
BOXWOO				1 , , ,		•				_
	Y, NY 109	52	<del></del>	0.00		0.	0.	·		<u>0.</u>
GOLDY MA				TRUSTEE						
BOXWOO		<u> </u>		-		0	_			^
MONSEY N	Y, NY 109	<u> </u>		0.00		0.	0.	<u>.</u>		<u>0.</u>
		<del> </del>	<del></del>	4						
				4						
					_			┿┈	-	—
<del></del>		<del></del>		$\dashv$						
	<del></del>	<del></del>	<del> </del>	┪			1			
2 Compensati	ion of five highest	-paid employee:	s (other than those in	cluded on line 1). If n	one, enter	"NONE."	<u> </u>			—
4 3 Ma	a and address of seek	ampleyes and	ore then \$50,000	(b) Title, and average	ge , , o	omnon-stre-	(d) Contributions to employee benefit plans and deferred	(	e) Expen	se
(a) Nami	e and address of each	i employee paid mi	ore man \$50,000	'hours per week devoted to position	۱ (c) <sup>ر</sup>	ompensation	and deferred compensation	ac	count, of allowance	.1161 88
NO	NE									
				1						
				]						
							<u> </u>			
		·								
			<del>_</del>		-			_		
			<del></del>	4						
	-11	DEC 222		<u></u>			<u> </u>	<u></u>		_
lotal number of	other employees paid	over \$50,000					▶			0

Form 990-PF (2012) BAIS EPHRAIM CHARITABLE FOUNDATION TRUST 13	1-6548	272 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		· · · · · · · · · · · · · · · · · · ·
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<b>•</b>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 EDUCATIONAL AND CHARITABLE AID TO 501 C 3 ORGANIZATIONS		
		0.
2		
3		
A		
	$\exists$	
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
	7	
2		
All other program-related investments. See instructions.		<del></del>
3	_	
Total. Add lines 1 through 3	•	0.

Page 8

P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	2,051,670
	Average of monthly cash balances	1b	281,379.
	Fair market value of all other assets	1c	2,432,890
	Total (add lines 1a, b, and c)	1d	4,765,939
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0 .
3	Subtract line 2 from line 1d	3	4,765,939
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	71,489
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,694,450
6	Minimum investment return. Enter 5% of line 5	6	234,723
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	234,723
	Tax on investment income for 2012 from Part VI, line 5		
	Income tax for 2012. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	2,964
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	231,759
4	Recoveries of amounts treated as qualifying distributions	4	0 .
5	Add lines 3 and 4	5	231,759
6	Deduction from distributable amount (see instructions)	6	0 .
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	231,759
P	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		166 006
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	466,996
b	Program-related investments - total from Part IX-B	1b	U
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	a Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	100 000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	466,996
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	2.064
	income. Enter 1% of Part I, line 27b	5	2,964
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	464,032
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies foi	the section

Form **990-PF** (2012)

Page 9

BAIS EPHRAIM CHARITABLE FOUNDATION TRUST Part XIII Undistributed Income (see instructions)

<del></del>				
	(a) Corpus	(b) Years prior to 2011	(c) 2011	( <b>d</b> ) 2012
1 Distributable amount for 2012 from Part XI,			·· · · <del>b · f</del> ·· · · · ·	021 550
line 7				231,759.
2 Undistributed income, if any, as of the end of 2012			0.	
a Enter amount for 2011 only b Total for prior years:				<del></del>
		0.		
3 Excess distributions carryover, if any, to 2012:				
aFrom 2007   250,532.				
bFrom 2008 1,790.				1
c From 2009 16,703.				į
dFrom 2010 279,024.				ı
eFrom 2011 227,621.				
f Total of lines 3a through e	775,670.			
4 Qualifying distributions for 2012 from				;
Part XII, line 4: ▶\$ 466,996.				1
a Applied to 2011, but not more than line 2a			U •	
<b>b</b> Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U •		,
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	- 0.			231,759.
d Applied to 2012 distributable amount e Remaining amount distributed out of corpus	235,237.			231,7331
5 Excess distributions carryover applied to 2012	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,010,907.			
<b>b</b> Prior years' undistributed income. Subtract	-		- '	
line 4b from line 2b		0.		!
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		•		
assessed	· · · · · · · · · · · · · · · · · · ·	0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		- 0.		
e Undistributed income for 2011. Subtract line			0.	
4a from line 2a. Taxable amount - see instr.  f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of	<del></del>			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	250,532.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	760,375.			
10 Analysis of line 9:				
a Excess from 2008 1,790.				
b Excess from 2009 16,703.				
c Excess from 2010 279,024. d Excess from 2011 227,621.				
005 005				!
e Excess from 2012 235, 237.			L	Farm 000 DE (0040)

Form 990-PF (2012) BAIS EP			DATION TRUST II-A, question 9)	N/A	48272 Page 1
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for			▶		
b Check box to indicate whether the found			in section	4942(j)(3) or 494	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed	I				
b 85% of line 2a					
c Qualifying distributions from Part XII,		<b>_</b>	<del></del>		
line 4 for each year listed					
•					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities		<del>                                     </del>			
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:		1			
(1) Value of all assets			<u> </u>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		· · · · · · · · · · · · · · · · · · ·			
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:			-		
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)			<del> </del>		
(2) Support from general public and 5 or more exempt				1	
organizations as provided in					
section 4942(j)(3)(B)(iii)		<del>                                     </del>	<del> </del>		
(3) Largest amount of support from					
an exempt organization			<del></del>	<u> </u>	
(4) Gross investment income		 	· is the foundation	had \$5,000 ar ma	rue in cocoto
Part XV Supplementary Info			if the foundation	i nad \$5,000 or mo	ore in assets
1 Information Regarding Foundation		<u> </u>			
a List any managers of the foundation wh		than 2% of the total co	ntributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See	section 507(d)(2).)	•		·
See Statement 9					
b List any managers of the foundation who other entity) of which the foundation has			ı (or an equally large portı	on of the ownership of a pa	artnership or
	ya to /s or ground mile.				
None	ion Cront Citt I	Cabalarchia eta 1	Programs		
2 Information Regarding Contribution Check here ► If the foundation of				not accept uncollected requi	ects for funds. If
the foundation makes gifts, grants, etc.	(ean instructions) to ind	itu preselecteu charitabl Ividuals or organizations	under other conditions of	omniete items 2a. h. c. and	esis ioi iuiius. Ii
				Omproto itomo Eu, o, o, and	
a The name, address, and telephone num	per or e-mail of the pers	on to wnom applications	snould be addressed.		
ARI MARGULIES	TOWN NEW 100	<b>5</b> 2			
8 BOXWOOD LANS, MONS			- baseld sealer day		
b The form in which applications should be LETTER FORM	e submitted and informa	ation and materials they	snouid include; 	-	
c Any submission deadlines:					
NONE			a lundo of matalastica a -	ather feeters:	<u> </u>
d Any restrictions or limitations on award NONE	s, such as by geographic	cai areas, charitable field	s, kinas of institutions, or	OLNET TACTORS:	
					Form 900 PE (004)
223601 12-05-12					Form <b>990-PF</b> (2012

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	0011110211011					
a Paid during the year								
SEE ATTACHED LIST	NONE		EDUCATIONAL AND	466,996.				
			CHARITABLE	400,990.				
				ı				
			<u> </u>					
Total			<b>▶</b> 3a	466,996.				
b Approved for future payment								
None								
		ŀ						
Total			<b>▶</b> 3b	0.				

Part XVI-A Analysis of Income-Prod	ucing Activities	s			
Enter gross amounts unless otherwise indicated.		isiness income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b	_				
С			<b> </b>		<del></del>
d	-				
e	_				<del></del>
1	-	<del></del> -	-	_	= :
g Fees and contracts from government agencies	<del> </del>				
2 Membership dues and assessments	ļ				
3 Interest on savings and temporary cash			01	32,230.	
Investments	900000	125,755.	0.1	34,430.	<del></del>
4 Dividends and interest from securities	300000	125,755.			<del></del>
5 Net rental income or (loss) from real estate:		<del>-</del>			
a Debt-financed property	-				23,574.
<ul> <li>b Not debt-financed property</li> <li>6 Net rental income or (loss) from personal</li> </ul>					23,314
property 7 Other investment income			01		<del></del>
8 Gain or (loss) from sales of assets other	<del></del>				
than inventory	531110	114,858.			
9 Net income or (loss) from special events	-				
10 Gross profit or (loss) from sales of inventory			<b></b>		
11 Other revenue:		-			
a			ļ		
b	-				
C					
d					
e					-
12 Subtotal. Add columns (b), (d), and (e)		240,613.		32,230.	23,574
13 Total. Add line 12, columns (b), (d), and (e)				13	296,417.
(See worksheet in line 13 instructions to verify calculations.)	1			_	
Part XVI-B Relationship of Activities	to the Accom	plishment of Ex	cemp	t Purposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other that			contrib	outed importantly to the accom	iplishment of
TO SUPPORT CHARITABLE			<u>'m T m</u>	TITTONG WITTH E	MPHASIS TO
INDIGENT STUDENTS.	AND EDUCA	TIONAL INS	111	OLIONS WILL E	MPRASIS IO
INDIGENT STODENTS.					
	<u> </u>				<del></del>
<del></del>					<del> </del>
<del></del>		<del></del>	-	•	
				<del> </del>	
				<del></del>	<del> </del>
		-			
				· · · · · ·	
			_		
					· ·

223621 12-05-12

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of									Yes	No
•					7, relating to political organ				. 00	
		from the reporting founda				nzations:				į i
a		irom the reporting lounds	allon to a monenantal	nie eveniht or	gamzadon ot.			1a(1)		X
	(1) Cash (2) Other	accate						1a(1)		X
	Other trans							18(2)		
U			hla avamnt organizat	100				1b(1)		X
	• •	of assets to a noncharital lases of assets from a nor						1b(2)		$\frac{\pi}{X}$
	• •	il of facilities, equipment, i		i gamzation				1b(3)		X
	` '	bursement arrangements						1b(4)		X
		s or loan guarantees						1b(5)		X
		rmance of services or me	mherehin or fundras	sına salıcıtatın	ne			1b(6)		X
	` '	f facilities, equipment, mai	•	-				10(0)		X
	-				dule. Column ( <b>b)</b> should al <sup>,</sup>	wavs show the fair	market value of the goo	لــــــا	ets	
u					ed less than fair market valu				013,	
		I) the value of the goods, (			ou lood than tan market vale	do in any a unououe	in or onaring arrangeme	o		
a)Li		(b) Amount involved			exempt organization	(d) Description	on of transfers, transactions,	and sharing an	angeme	ents
		(0)	(4)	N/A		(,,====				
		<del></del> -	<del></del>		<del></del> -	<del></del>		<del></del>		
			<del></del>			<u> </u>				
						1				
							<del></del>			
							-			
					· · · · · · · · · · · · · · · · · · ·					
	_				-					
				<del></del>						
		-								
2a	Is the four	ndation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organ	izations described				
	ın section	501(c) of the Code (other	r than section 501(c)	(3)) or in sect	ion 527?			Yes	X	] No
b	If "Yes," co	omplete the following sch	edule.							
		(a) Name of org	janization		(b) Type of organization		(c) Description of relati	ionship		
		N/A								
						<u> </u>				
					<u> </u>	<u> </u>				
	l and be				ig accompanying schedules and n taxpayer) is based on all inforr			May the IRS	iscuss	this
Sig	gn   🔪	<u> </u>				$\sim$	<b>3</b> .	return with th shown below	(see ins	tr )?
He			7		16/18/14		sident_	X Yes		J No
	Sigr	nature of officer or trustee	<del></del>	T	Date	Title	[ Ohan   1   1   1   1   1   1   1   1   1	riki -		
		Print/Type preparer's na	ame C	Preparer's s	ignature	Date	Check if P1	I 1N		
_	اد!					06/15/11	self- employed	000051	0	
Pa		MITCHELL L				06/15/14		P00854		
	eparer	Firm's name HIR	SCH OELBA	UM BRA	M & HANOVER	CPA'S	Firm's EIN ► 13	-36411	96	
US	e Only	Funda talantan and and	1 550-5	17						
		Firm's address ► 11			c		100	1 2 \ 2 2 7	0.0	2.4
_		l NE	W YORK, N	X TOOO	0		Phone no. (2.	12)227		
								Form <b>990</b>	-r-	(2012)

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

**2012** 

Name of the organization

Employer identification number

		AIS EPHRAIM CHARITABLE FOUNDATION TRUST 11-6548272					
Organiza	ation type (che	ne):					
Filers of:	:	Section:					
Form 990	or 990-EZ	501(c)( ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 990	)-PF	S01(c)(3) exempt private foundation					
		4947(a)(1) nonexempt chantable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	nly a section 50	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
	-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one elete Parts I and II.	,				
Special I	Rules						
	509(a)(1) and	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
	contributions If this box is c purpose. Do n	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. Need, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., omplete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively le, etc., contributions of \$5,000 or more during the year					
but it mu	ıst answer "No	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990·EZ, or 990·Pl in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990·EZ or on Part I, line 2 of its Form 990·PF, to t the filing requirements of Schedule B (Form 990, 990·EZ, or 990·PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

#### BAIS EPHRAIM CHARITABLE FOUNDATION TRUST

11-6548272

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	ARI MARGULIES  8 BOXWOOD LN  MONSEY NY, NY 10952	\$ 50,000.	Person  Payroll  Noncash  (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	ARYEH MARGULIES		Person X			
	8 BOXWOOD LN MONSEY, NY 10952	\$ 30,000.	Payroll Noncash (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3	DAVID MARGULIES  8 BOXWOOD LN  MONSEY, NY 10952	\$30,000.	Person X Payroll  Noncash (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4	DAVIDS COOKIES INC  11 CLIFFSIDE DRIVE  CEDAR GROVE, NJ 07009	\$200,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5	68TH ASSOCIATES LLC 939 EIGTH AVE NEW YORK, NY 10019	\$ 90,000.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
6	ESTHER MARGULIES  8 BOXWOOD LN  MONSEY NY, NY 10952	\$30,000.	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution)			

Employer identification number

#### BAIS EPHRAIM CHARITABLE FOUNDATION TRUST

11-6548272

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
7	HARRY MARGULIES  8 BOXWOOD LN  MONSEY NY, NY 10952	\$30,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
8	REIZEL LEDERIECH  8 BOXWOOD LN  MONSEY NY, NY 10952	\$0.	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
9	SOLOMON MARGULIES  8 BOXWOOD LN  MONSEY NY, NY 10952	\$ 30,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)			

Employer identification number

## BAIS EPHRAIM CHARITABLE FOUNDATION TRUST

11-6548272

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
I I	INSURANCE POLICY		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Form 990-PF Interest on Savings a	and Temporary Ca	ash Investments	Statement	1
Source			Amount	
IRS REFUND			6.5	55.
NOTES RECEIVABLE			25,97	
OTHER INCOME			5,59	
Total to Form 990-PF, Part I, line	e 3, Column A		32,23	30.
Form 990-PF Dividends and	l Interest from	Securities	Statement	2
Source	Gross Amount	Capital Gains Dividends	Column (A Amount	)
DAVID LERNER	9,759.	0.	9,7!	
FORTRESS LIFE SETTLEMENTS	8,896.	0.	8,89	
GLAZER CAPITAL	41,984.	0.	41,98	
WELLS FARGO SECURITIES #1 WELLS FARGO SECURITIES #2	58,017. 7,099.	0. 0.	58,01 7,09	
Total to Fm 990-PF, Part I, ln 4	125,755.	0.	125,7	55.
Form 990-PF Ren	ntal Income		Statement	3
,,		Activity Number	Gross Rental Inc	ome
Wind and Logation of Property		11 MINGT	TOTAL TATE	JC
Kind and Location of Property				
RESIDENCE MONSEY NY DNGH PROPERTIES LLC K-1		1 2	24,2° 21,2°	

Form 990-PF	Rental Exp	enses		Statement	4
Description		ctivity Number	Amount	Total	
Depreciation REAL ESTATE TAX OPERATING EXPENSES	_		11,564. 6,243. 4,183.		
	SubTotal -	1		21,99	90.
Total rental expenses				21,99	90.
Net rental Income to Form 99	0-PF, Part I	, line 5b	:	23,57	74.
Form 990-PF	Тах	es		Statement	5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom		
FEDERAL TAX	1,678. 6,243.				0. 0. 0.
REAL ESTATE TAX OPERATING EXPENSES	4,183.	4,183.			υ.
			:		0.
OPERATING EXPENSES	4,183.	10,426.	Balances	Statement	
OPERATING EXPENSES  To Form 990-PF, Pg 1, ln 18	4,183.	10,426.	Balances	Statement	0.
OPERATING EXPENSES  To Form 990-PF, Pg 1, ln 18  Form 990-PF Other Decreas	4,183. 12,104. es in Net As	10,426.	Balances	<u> </u>	0. 6

Form 990-PF Depreciat	Statement 7					
Description	Cost or Other Basis	Accumulated Depreciation	Book Value			
APARTMENT 130 BATES DRIVE MONSEY NY	318,000.	34,692.	283,308.			
To 990-PF, Part II, ln 11	318,000.	34,692.	283,308.	283,308.		
Form 990-PF	Other In	vestments		Statement		
Description			Valuation Method	Book Value		
GLAZER CAPITAL MANGMT LP GUARANTEED NOTES WELLS FARGO #1 SECURITIES WELLS FARGO #2 SECURITIES	Č	Cost Cost Cost	706,454. 1,403,568. 799,662. 101,065.			
FORTRESS LIFE SETTLEMENT K DAVID LERNER ASSOCIATES DNGH PROPERTIES	lost lost lost	297,888. 124,470. 695,448.				
Total to Form 990-PF, Part		4,128,555.				
Form 990-PF		Statement 9				

Name of Manager

ARI MARGULIES GOLDY MARGULIES

2012 DEPRECIATION AND AMORTIZATION REPORT
RESIDENCE MONSEY NY

RENT

⊣

	• •	• :				)	1	1										į
ag.	,564	,564.	l k	,	: 1	1	1	ļ			, ,	1				l !	l	
Current Year Deduction	.5	, 5			j !	ĺ	1		i	<b>†</b>	<b>i</b> : 1				. 1			
urrel Dedt	17	11	,		1		<b>}</b>		} 1	ı		ļ			'	j		
ა_	`	• • •	1				!	i i								Ì		
	,	0			i	1	į			_								
ent 179		O	1	'	i	1	1		,									
Current Sec 179							ı								' ;	i		
	1	<u> </u>				1	1											
T =	128.	8		i.	1	ĺ	<b>!</b>	:	1		1			ı				
Accumulated Depreciation	12	23,128.	;	1		! !			1	l	ĺ				1	1		
umu	• ;	3		1	!	1	!								i	į		
Acc Dep	23	₹,	1		1	1	i	' 	:		1	1		i	:			
		1	<u> </u>			Ì	}				1							
Ę	0	0	;	i			: }	ŀ			Į.		ı	,	, 1			
Basis For Depreciation	318,000.	318,000.	(	1		!	1	1	İ		1							
prec	ω,	∞`;	1	;	1	1	-	!	į	! !								
9 8	31	$\frac{31}{1}$		i	l 			i	5	1	!			 	,			
	+ ;			·	i į	-	1	1	;	1	1		ı					
드		0	i	i	!	i		1			1	:		I				
Reduction In Basis			,	1	į	;	1	1	3				† •	i		į		
on Big	1		1	•		1		ı			1	i	i I	: I	; i			
æ			ì	1	•	1	t.							i I	į			
	<del> </del>	- ;	<del></del>	,	1	1	<del> </del>		1						! ;			
Bus % Excl	1			1	!		1	•	1	k E	!		ì		1 1			
	1		1		<u> </u>	ł	i	ı	1	l	1			1	<u>;</u> ]			
	0.	318,000.	,		I I		1	f.	1	•	i	( :	1 		1			
sted Bası	00	00	i	1	1		1	1	 	1		l 		İ				
adju † Or	ω,	<b>α</b>			į			1			1	1	1	į	! !			
Unadjusted Cost Or Basis	318,000.	31	t	i		1	!	i	1	:		1	]	ĺ	'			
				:	,	1	 		-	1	!	1	1	<u> </u>	 			
So S	[7]		1	•	1		; }	'		1	1	'		1				
	5017			ï							_		-	1	1			
Lıfe	I •.			ι	1	1		1	1	:		,	I	( 				
	27		<u> </u>		<u> </u>	-				,		i -	1	1	·			
por	1	1	1	;	}		į		!	1		1	} !					
Method	ابر ا	į			į	1	!		1	1	1	•	!	i			! !	
	071510SL	1	<u> </u>	1	1	1	<del></del>	i	1		1	!	i	! !	1 1			
Date Acquired	57	<del></del>	<u>i</u> _	<u> </u>		1	1	+	<u> </u>	<u> </u>	<del>:                                    </del>	1	l I	<u> </u>	· :			1
Dž Acqı	1			1	1		İ	<u>i</u>	<del>  -</del>			<u> </u>		<u>/</u>				
	lo O		<u> </u>	1	<u>i</u>	1	<u>.                                    </u>	1	i J	1	1	r i	ļ ļ	!	<u>'</u>	:	<u> </u>	ļ
	BATES IY	l t	1	ŀ	İ	i		1		1	}	t		, 	'   			
	3A.	,	;	1	1	i	1		!		!	1	}	1	!			
	O BY	<u>ب</u>	;		1		!		<b>†</b> -		t	i	;					ĺ
uo	130 SEY 1	<u>"</u>	1		1		1		,		-	!		1	1			
Description	SE	990-PF Depr	i	1	1		1	t .	1		1	1	:				j	ĺ
Desc	E S	g a	ì	4	1	!	ļ	1		, I	ŀ	!	1	1			] }	l
		_ 	1	•		1		1	Į Į	!	1	, 1	1					l
	E E	t or		:		{		1	1	:	[	1	i					l
	APARTMENT 13( DRIVE MONSEY	* Tota Rental	1					1		1	1	1	1	1			}	l
	<u> </u>	* 도		-	!	<u> </u>	<u> </u>	1	1		<u> </u>	1 .	<u> </u>	1				l
*.	"	Ì				1		;	1	1			i					١.
Asset No		į	}	1				1		1		, I	!			1		228 102
<u> </u>			1	!	•	1	1		1		1	<u> </u>	)		1		1	1 %

05-01-12

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction