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Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

2013

Department of the Treasury Internal Revenue Service

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For ca	lendar year 2013, or tax year beginning	, 2013,	and ending		,	
	RON YONA VSARA CHARITABLE FO HERMAN HERZOG 6 LENORE AVE	UNDATION		A	Employer identification nur 13-7171873	
	EY, NY 10952			В	Telephone number (see the 718-384-2400	instructions)
G Ch	eck all that apply Initial return	Initial return of a form	ner public charity	С	If exemption application is	pending, check here
	Final return	Amended return	•	D	1 Foreign organizations, chec	k here
H (Address change Check type of organization X Section 50	Name change (c)(3) exempt private for	oundation		2 Foreign organizations meet here and attach computation	
	Section 4947(a)(1) nonexempt charitable t	rust Other taxable p	private foundation	Ε	If private foundation status under section 507(b)(1)(A)	
	from Part II, column (c), line 16)	ounting method X Ca Other (specify) column (d) must be or		F	If the foundation is in a 60 under section 507(b)(1)(B)	-month termination
Part		(a) Revenue and expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	Contributions, gifts, grants, etc, received (att sch)	285,571.				
	2 Ck if the foundn is not req to att Sch B					
	3 Interest on savings and temporary cash investments					
	4 Dividends and interest from securities	9,500.			9,500.	
	5 a Gross rents					
	b Net rental income or (loss)					
Ŗ	6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all	-2,580.				
REVENU	assets on line 6a				;	
E	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain			0.	0.	
ΰ	9 Income modifications		<u> </u>			
Ε	10 a Gross sales less returns and			_		
	allowances					
	b Less Cost of goods sold					
	c Gross profit/(loss) (att sch)					
	11 Other income (attach schedule)	F2 00C				1,7
	See Statement 1	53,886. 346,377.		0.	9,500.	
	13 Compensation of officers, directors, trustees, etc	346,377.		<u> </u>	9,300.	
	14 Other employee salaries and wages					
<u>+</u>	15 Pension plans, employee benefits					
* A	b Accounting fees (attach schedule) RECEIV	=D				
_ D M						
, h	c Other prof fees (attach sch)	014				
. P §	17 Interest NOV 0 4 2	U14 vi)				
O I S T R A T T	18 Taxes (attach schedule/See in 19) 19 Depreciation (attach					
A A	sch) and depletion OGDEN.	UT				
N V G E	20 Occupancy					
_	21 Travel, conferences, and meetings 22 Printing and publications					
A E X P	23 Other expenses (attach schedule)					
E						
S	24 Total operating and administrative					
E S	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV	0.10.000				240.000
	1	249,900.			 	249,900.
	26 Total expenses and disbursements. Add lines 24 and 25	249,900.		0.	0.	249,900.
	27 Subtract line 26 from line 12:		***			
	a Excess of revenue over expenses and disbursements	96,477.				
		70,411.		0.		
	b Net investment income (if negative, enter -0-).			<u>.</u>	9,500.	
DAA	C Adjusted net Income (if negative, enter -0-)	tructions		TEE	A0504I 10/18/13	Form 990-PF (2013)

Par	FIL	Balance Sheets Attached schedules and amounts in the description column should be for end of-year amounts only	Beginning of year	End o	f year
Fai		Column should be for end of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	495,642.	211,914.	211,914.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
	ľ	Less allowance for doubtful accounts ▶		-	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
۸	7	Other notes and loans receivable (attach sch)			- ·
A S E T		Less allowance for doubtful accounts •	ļ		
S	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
S		a Investments — U.S. and state government obligations (attach schedule)		341,903.	309,082.
	1 -	nivestments — corporate stock (attach schedule)			
]	Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			į
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment basis	_		
		Less accumulated depreciation (attach schedule)			
	15		343,138.	381,440.	217,326.
	16	see the instructions. Also, see page 1, item 1)	838,780.	935,257.	738,322.
Ļ	17	Accounts payable and accrued expenses			
Á	18	Grants payable			
B	19	Deferred revenue			j
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			1
ļ	21	Mortgages and other notes payable (attach schedule)			1
i	22	Other liabilities (describe)			1
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	<u> </u>	<u> </u>	, ;
N F	24	Unrestricted			!
E U T N	25	Temporarily restricted			1
D	26	· —			1
A B S A E L		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			! !
EL	27	Capital stock, trust principal, or current funds	838,780.	935,257.	
SM	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds			i
ŔŚ	30	Total net assets or fund balances (see instructions)	838,780.	935,257.	!
	31	Total liabilities and net assets/fund balances (see instructions)	838,780.	935,257.	
Par		Analysis of Changes in Net Assets or Fund Balanc		3007207.	
1		I net assets or fund balances at beginning of year — Part II, colu		ree with	······································
•	end-	of-year figure reported on prior year's return)	(5), 55 (3	1	838,780.
2	Ente	r amount from Part I, line 27a		2	96,477.
3	Other	increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3		4	935,257.
5		ases not included in line 2 (itemize)		5	
6	Total	I net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), lir	ne 30. 6	935,257.

Par	(a) List and describe 2-story brick warehous	How acquired Purchase Dunation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)		
1 a	1a OPPENHEIMER P					6/28/13
L	Wash Sale				3/06/13	
	:					
	<u> </u>					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a	65,000.		67,	580.	 -	-2,580.
)					
						
e			H- (
		ng gain in column (h) and owned by	(k) Excess of column (i)		(I) Gains (Colugain minus column (k	ımn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	over column (j), if any	t	han -0) or Losses (fr	om column (h))
a)				···-	<u>-2,580.</u>
)					83.
	<u> </u>					
e		<u> </u>				
	Capital gain net income or (net	If (loss), enti	enter in Part I, line 7 er -0- in Part I, line 7	2		-2,497.
3 Par	If gain, also enter in Part I, line in Part I, line 8	loss) as defined in sections 1222(5) 8, column (c) (see instructions) If (Section 4940(e) for Reduced	loss), enter -0-	3		-2,497.
If 'Ye	es,' the foundation does not qual	tion 4942 tax on the distributable am ify under section 4940(e) Do not cor n each column for each year, see the	nplete this part		Yes	X No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution lumn (b) divided l	
	2012	269,000.	462,	354		0.581805
	2011	118,850.	359,			0.330569
	2010	117,000.	263,			0.444414
	2009	82,500.	227,			0.362394
	2008	109,100.	224,			0.486328
	Total of line 1, column (d)			2		2.205510
3	Average distribution ratio for th	e 5-year base period — divide the tol	al on line 2 by 5, or by the years	3		0.441102
4	•	table-use assets for 2013 from Part 2		4		
4		table-use assets for 2013 from Fart	v, me s			420,350.
5	Multiply line 4 by line 3			5		185,417.
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)		6	<u> </u>	
7	Add lines 5 and 6			7		185,417.
8	Enter qualifying distributions fro			8	<u> </u>	249,900.
	If line 8 is equal to or greater the Part VI instructions	nan line 7, check the box in Part VI,	ine 1b, and complete that pai	t using a 1	% tax rate See th	ne

TOTAL SECTO (2013) ZICHRON IONA VSARA CHARITABLE FOUNDATION	13-11/10/			aye 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	– see instructi	ons)		
1 a Exempt operating foundations described in section 4940(d)(2), check here				
Date of ruling or determination letter (attach copy of letter if necessary — see instrs)				
b Domestic foundations that meet the section 4940(e) requirements in Part V,	- 1			0.
check here. ► X and enter 1% of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				'۔۔۔
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
foundations only Others enter -0-)	2			0.
3 Add lines 1 and 2	3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -	0-) 4			0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0.
6 Credits/Payments				
a 2013 estimated tax pmts and 2012 overpayment credited to 2013	1 1			1
b Exempt foreign organizations — tax withheld at source 6 b				i
c Tax paid with application for extension of time to file (Form 8868)				
d Backup withholding erroneously withheld 6 d				
7 Total credits and payments Add lines 6a through 6d	7	·		0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10			
11 Enter the amount of line 10 to be. Credited to 2014 estimated tax	► 11			
Part VII-A Statements Regarding Activities				
	1 1		Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	ז ונ	1 a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		Х
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	d			
c Did the foundation file Form 1120-POL for this year?		1 c		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 managers ►\$	0	<u>.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				
foundation managers • \$ 0.				
2 Has the foundation engaged in any activities that have not previously been reported to the 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 governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	es	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
If 'Yes,' attach the statement required by General Instruction T				
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
By language in the governing instrument, or				
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conf 	lict			
with the state law remain in the governing instrument?	nct	6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	_	7	_X_	<u> </u>
8 a Enter the states to which the foundation reports or with which it is registered (see instructions)	-			
<u>NY</u>		1 1		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			-	
(or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8 b	Х	 -
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' co.	(3) or 4942(j)(5	(i) (i) (j)		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name				<u></u>
and addresses		10		ιX

TEEA0304L 07/10/13

Form **990-PF** (2013)

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charitable purposes?

the tax year beginning in 2013?

Form 990-PF (2013)

3 b

4 a

N/A

Х

b If 'Yes,' did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of

Form 990-PF (2013) ZICHRON YONA VSAR			13-71	71873	Page 6
Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incu	-				
(1) Carry on propaganda, or otherwise attem	ot to influence legislation	on (section 4945(e))?	∐ Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	1 4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	<u> </u>	•	Yes X	No	*
(4) Provide a grant to an organization other t in section 509(a)(1), (2), or (3), or section			Yes X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention			Yes X	No	;
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the exception disaster assistance	otions >	5 b	_ N/A
Organizations relying on a current notice rega	rding disaster assistant	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5-5(d)		'	
6 a Did the foundation, during the year, receive a on a personal benefit contract?			∐Yes X	No	,
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contract?	6 Ь	X
If 'Yes' to 6b, file Form 8870 7 a At any time during the tax year, was the found	dation a party to a prob	thited tay shelter transs	action? Type V	No	
b If 'Yes,' did the foundation receive any proceed				I/A 7b	
Part VIII Information About Officers, D				-, ,	
and Contractors	,,		go. o, g y		,
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	tructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other all	account, lowances
HERMAN HERZOG	President	0.	0.		0.
6 LENORA AVENUE	0				
MONSEY, NY 10952					_
AARON HERZOG	Treasurer	0.	0.		0.
1425 47TH STREET	0				
BROOKLYN, NY 11219					
MICHAEL B. HERZOG	Vice Preside	0.	0.		0.
_1874_48TH_STREET	0				
BROOKLYN, NY 11204					
2 Compensation of five highest-paid employees (o	ther than those included	on line 1 – see instructio	ns). If none, enter 'NONE	<u> </u>	
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense	account
paid more than \$50,000	hours per week devoted to position	(c) componed (c)	employee benefit plans and deferred compensation		lowances
None					
		· · · · · · · · · · · · · · · · · · ·			
					
	<u></u>		<u> </u>	ļ	
Total number of other employees paid over \$50,000	TEFA0306L 0	7/10/13		Form 990-	<u>U</u> PF (2013)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid	71873 Page 7 Employees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	(c) compensation
TOTAL	
	ļ
Total number of others receiving over \$50,000 for professional services	0
	<u> </u>
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 N/A	
	_
2	-
	-
3	
	•
4	
	-
	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
<u>N/A</u>	_
2	
2	-
	-{
All other program-related investments See instructions	
3	_
	_
Total Add lines 1 through 3	
Total. Add lines 1 through 3 BAA	O . Form 990-PF (2013)
—	()

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Part X Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign fou	indations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities	1 a	25,757.
b Average of monthly cash balances	1 b	183,668.
c Fair market value of all other assets (see instructions)	1 c	217,326.
d Total (add lines 1a, b, and c)	1 d	426,751.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
).	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	426,751.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	6,401.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	420,350.
6 Minimum investment return. Enter 5% of line 5	6	21,018.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	rating four	
and certain foreign organizations check here ► □ and do not complete this part.)		
1 Minimum investment return from Part X, line 6.	1	21,018.
2 a Tax on investment income for 2013 from Part VI, line 5		······································
b Income tax for 2013 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	21,018.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	21,018.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	21,018.
Part XII Qualifying Distributions (see instructions)	···	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	249,900.
b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	249,900.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	249,900.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the figuralifies for the section 4940(e) reduction of tax in those years	oundation	

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Page 8

Form **990-PF** (2013)

Form 990-PF (2013) ZICHRON YONA VSARA CHARITABLE FOUNDATION

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- Will Landictributed Income (see Ins	tructions	S)			T	(d)
rt XIII Undistributed Income (see ins	i	(4)	(b) Years prior to 2012	2	(c) 2012	(d) 2013
		Corpus	Tears prior			21,018.
Distributable amount for 2013 from Part XI,		Ţ				
	-			- 1	0.	
Undistributed income, if any, as of the end of 2013	1			0.		
a Enter amount for 2012 only						1
b Total for prior years 20 , 20 , 20				}		!
Excess distributions carryover, in any 1	9.			1		1
a From 2000						
b From 2009 c From 2010 103, 83	<u>7 </u>				į	
15 2011	3.			1		
e From 2012 245,88	2.	610 662				
through e		619,662.				
A Qualifying distributions for 2013 Holling are			1		0	-
					0.	
a Applied to 2012, but not more than line 2	a			}		
Literature of DIIOT V	ears			0.		+
(Election required = 300 miles	 			1		
of corpus	į.	0				21,018.
ALIACTION THURSTED	\					
d Applied to 2013 distributable amount	pus	228,882	<u> </u>			0.
d Applied to 2013 distributed out of corp e Remaining amount distributed out of corp e Remaining amount distributed to 2013	·).			
5 Excess distributions carryover applied to 2013 (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: a Corpus Add lines 3f, 4c, and 4e Subtract line 5	-	848,54	4.			
Subtrace undistributed income Subtr	ract			0.		
line 4b from line 2b	ribut- (
c Enter the amount of prior years' undisting ed income for which a notice of deficient has been issued, or on which the section 4942(a) tax has been previously assess	nn l			0.		
La Akreet line for from line 6b Taxable	1			0.		
amount - see mandeners	-					0.
e Undistributed income for 2012 Subtract line 4a line 2a Taxable amount — see instructions.	ì					
f Undistributed income for 2013 Subtra 4d and 5 from line 1 This amount mu distributed in 2014	ļ.,					C
7 Amounts treated as distributions out of corpus to satisfy requirements impositions (170(b)(1)(F) or 4942(g)(3)	of ed		0.			
(see instructions)	ons not		040			
8 Excess distributions carryover from 2 applied on line 5 or line 7 (see instru		97,				
9 Excess distributions carryover to 20 Subtract lines 7 and 8 from line 6a	J (4.	750,	595.			
10 Analysis of line 9	1,121.					
a Excess from 2009	3,837.	1				
b Excess from 2010	0,873.	1	1		}	
c Excess Horrizon	5,882.		1			
	8,882.	1				Form 990-PF (2

orm 990-PF (2013) ZICHRON YONA VSAI				0	
Part XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2013, enter the date of the	rmination letter that ruling	it is a private operat	ing foundation, and tr	e ruling	
b Check box to indicate whether the foundat	_	rating foundation o	described in section	4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	,				
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
			 		
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income			<u> </u>		
Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	e in
assets at any time during th		structions.)			
1 Information Regarding Foundation Managers a List any managers of the foundation who have		oan 2% of the total c	ontributions received	by the foundation hef	ore the
close of any tax year (but only if they have	contributed more	than \$5,000) (See	section 507(d)(2)	by the loandation ber	ore the
See Statement 3					
b List any managers of the foundation who own a partnership or other entity) of which the	10% or more of the foundation has a 1	stock of a corporation 0% or greater inter	on (or an equally large est	e portion of the owner	ship of
None					
2 Information Regarding Contribution, Gran Check here ► X if the foundation only marequests for funds. If the foundation make	kes contributions to	preselected charitab	le organizations and o		
complete items 2a, b, c, and d	o mail of the acces	n to whom application	ne should be address	ad	
a The name, address, and telephone number of	e-mail of the persor	i to whom applicatio	ins should be address	cu	
b The form in which applications should be	submitted and infor	mation and materia	als they should inclu	de	
			-		
c Any submission deadlines	- ··· · · · · · · · · · · · · · · · · ·				
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of i	nstitutions, or other	factors
•					

	<u>'</u>				
3 Gra	nts and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	it	
	` 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
Na	me and address (home or business)	substantial contributor	recipient	Contribution	
	d during the year			-	·
See St	atement 4				1
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			İ		
	al	L		 ▶ 3a	240 000
Tota				- <u>5 a</u>	249,900.
b App	proved for future payment				
			İ		
			ĺ		
			1		
				<u> </u>	
Tot	al			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated I	business income	Excluded by	section 512, 513, or 514	(0)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
•			Code		
			++		
	- 		+		
	+				
de	 				
f	 		++-		
q Fees and contracts from government agencies	 				
2 Membership dues and assessments			+		
3 Interest on savings and temporary cash investments			+		
4 Dividends and interest from securities			14	9,500.	
5 Net rental income or (loss) from real estate	-			9,500.	<u> </u>
a Debt-financed property	 		+		
· · · · · · ·					
b Not debt-financed property			 		
Net rental income or (loss) from personal property	 		10	52.006	
7 Other investment income			18	53,886.	
8 Gain or (loss) from sales of assets other than inventory	—		14	-2,580.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue	ļ				
a			 		
b					
С	 		 		
d	_				
	1		1 1		
e					
12 Subtotal Add columns (b), (d), and (e)				60,806.	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)				60,806. 13	60,806.
12 Subtotal Add columns (b), (d), and (e)	ions)				60,806.
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculate		nment of Exem	pt Purpose	13	60,806.
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th	e Accomplish			13 _ es	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th Line No. Explain below how each activity for which accomplishment of the foundation's exemption.	e Accomplish			13 _ es	y to the structions)

Form 990-PF (2013) ZICHRON YONA VSARA CHARITABLE FOUNDATION 13-7171873 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

						1 1	162	140
describe	organization directly ed in section 501(c) c to political organizat	of the Code (ot	ngage in any of the following wi her than section 501(c)(3) orga	th any other organ nizations) or in sec	nization ction 527,			
-			a noncharitable exempt organiz	ation of				. !
(1) Cas			, 5			1 a (1)		X
• •	er assets					1 a (2)		X
` '	ansactions							
	es of assets to a non-	charitable exei	mpt organization			1 b (1)		X
			ble exempt organization			1 b (2)		X
• •	ital of facilities, equip					1 b (3)		X
\- /	mbursement arranger	•				1 b (4)		X
	ns or loan guarantee					1 b (5)		X
• •	-		p or fundraising solicitations			1 b (6)		Х
\ -,			ts, other assets, or paid employ	ees		1 c		X
	, , ,	, ,				L		
d If the ar the good any tran	nswer to any of the a ds, other assets, or ser	bove is 'Yes,' vices given by trrangement, sh	complete the following schedule he reporting foundation If the foundation of the foundation of the value of t	e Column (b) shoundation received lessed he goods, other as	ald always show the fair rest than fair market value in seets, or services receive	narket valu d	ue of	
(a) Line no	(b) Amount involved		f noncharitable exempt organization	T	of transfers, transactions, and		igement	.s
V/A				***				
.,,								
		-						

					· <u>··</u>			
describe	undation directly or inc ed in section 501(c) of complete the following	of the Code (ot	with, or related to, one or more the than section 501(c)(3)) or in	ax-exempt organiza n section 5277	tions	Yes	X	No
(a) Name of organization	on	(b) Type of organization	1	(c) Description of rela	ationship		
N/A								
								
Under	penalties of perjury, I declar	e that I have exami	ned this return, including accompanying s han taxpayer) is based on all information	chedules and statements	, and to the best of my knowledge	e and belief, if	i is true,	
Sign Here	A Complete Declaration	- L	10/11/11	▶ Preside		May the I this return preparer (see instr	n with th shown b ructions)	ne pelow
Signa	ature of officer or trustee		Date	Title			Yes	No
	Print/Type preparer's nan	, <u>, , , , , , , , , , , , , , , , , , </u>	Peparer's signature	Date	Check if	PTIN P00740	1/100	
Paid	Robert Wohlh		Robert Wohlberg	, CPA	self-employed Firm's EIN ► 11-2	632255	107	
reparer			iedman & Company		rims Ein 11-Z	032233		—
Jse Only			enth Avenue		Phone po /710) 232-3	1111	
	Т В	rooklyn,	NY 11219		Phone no (/18	Form 990	_	013)
BAA						1 01111 330	-ir (2	013)

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
Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization		Employer identification number
ZICHRON YONA VSARA CHARITABLE	FOUNDATION	13-7171873
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
	_ ==	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule	
Note Only a section 501(c)(7) (8) or (10) orga	inization can check boxes for both the General Rule and a S	inacial Rule. See instructions
• • • • • • • • • • • • • • • • • • • •	inization can check boxes for both the deneral rule and a o	pecial Naic See instructions
General Rule X For an organization filing Form 990, 990-EZ, or	990-PF that received, during the year, \$5,000 or more (in mone	y or property) from any one
— contributor (Complete Parts Fand IF)		
Special Rules		
\longrightarrow 509(a)(1) and 170(b)(1)(A)(vi) and received	orm 990 or 990-EZ that met the 33-1/3% support test of the from any one contributor, during the year, a contribution of VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I ar	the greater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) organization total contributions of more than \$1,000 for until the prevention of cruelty to children or anim	n filing Form 990 or 990-EZ that received from any one contributuse exclusively for religious, charitable, scientific, literary, or lals. Complete Parts I, II, and III	or, during the year, educational purposes, or
For a section 501(c)(7), (8), or (10) organization	n filing Form 990 or 990-EZ that received from any one contribut	or, during the year,
contributions for use exclusively for religious, c	haritable, etc. purposes, but these contributions did not total to n abutions that were received during the year for an <i>exclusively</i> reli	nore than \$1,000
purpose Do not complete any of the parts unle	iss the General Rule applies to this organization because it received	ved nonexclusively
religious, charitable, etc, contributions of \$5	5,000 or more during the year	▶ \$
990-PF) but it must answer 'No' on Part IV, line	the General Rule and/or the Special Rules does not file Sche 2, of its Form 990, or check the box on line H of its Form 9 of filing requirements of Schedule B (Form 990, 990-EZ, or 990).	990-EZ or on its Form 990-PF,
BAA For Paperwork Reduction Act Notice, see or 990-PF.	e the Instructions for Form 990, 990EZ, Schedule B (F	Form 990, 990-EZ, or 990-PF) (2013)

Page

1 of

1 of Part 1

ZICHRON YONA VSARA CHARITABLE FOUNDATION

Employer identification number 13-7171873

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LEA HERZOG IRREVOCABLE TRUST		Person X
	6 LENORA AVENUE	\$60,000.	Payroll Noncash
	MONSEY, NY 10952		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MICHAEL B. HERZOG		Person X Payroll
	1874 48TH STREET	\$75,000.	Noncash
	BROOKLYN, NY 11204		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	AARON_HERZOG		Person X Payroll
	812 DAHILL RD	\$130,000.	Noncash
:	BROOKLYN, NY 11204		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	(b) Name, address, and ZIP + 4 HERMAN & LEA HERZOG	Total	Type of contribution Person
	Name, address, and ZIP + 4	Total	Type of contribution
	Name, address, and ZIP + 4 HERMAN & LEA HERZOG	Total contributions	Person Payroll
	Name, address, and ZIP + 4 HERMAN & LEA HERZOG 6 LENORA AVENUE	Total contributions	Person Payroll Noncash X (Complete Part II for
4	Name, address, and ZIP + 4 HERMAN & LEA HERZOG 6 LENORA AVENUE MONSEY, NY 10952 (b)	Total contributions \$20,571.	Type of contribution Person Payroll Noncash X (Complete Part II for noncash contributions) (d) Type of contribution
4	Name, address, and ZIP + 4 HERMAN & LEA HERZOG 6 LENORA AVENUE MONSEY, NY 10952 (b)	Total contributions \$20,571.	Type of contribution Person Payroll Noncash X (Complete Part II for noncash contributions) (d) Type of contribution
4	Name, address, and ZIP + 4 HERMAN & LEA HERZOG 6 LENORA AVENUE MONSEY, NY 10952 (b)	Total contributions \$20,571.	Type of contribution Person
4	Name, address, and ZIP + 4 HERMAN & LEA HERZOG 6 LENORA AVENUE MONSEY, NY 10952 (b)	Total contributions \$20,571.	Type of contribution Person
4 (a) Number	Name, address, and ZIP + 4 HERMAN & LEA HERZOG 6 LENORA AVENUE MONSEY, NY 10952 (b) Name, address, and ZIP + 4	\$ 20,571. (c) Total contributions (c) Total contributions	Type of contribution Person
4 (a) Number	Name, address, and ZIP + 4 HERMAN & LEA HERZOG 6 LENORA AVENUE MONSEY, NY 10952 (b) Name, address, and ZIP + 4	\$ 20,571. (c) Total contributions (c) Total contributions	Type of contribution Person
4 (a) Number	Name, address, and ZIP + 4 HERMAN & LEA HERZOG 6 LENORA AVENUE MONSEY, NY 10952 (b) Name, address, and ZIP + 4	\$ 20,571. (c) Total contributions (c) Total contributions	Type of contribution Person

Page

1 to

of Part II

ZICHRON YONA VSARA CHARITABLE FOUNDATION

Employer identification number 13-7171873

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given (a) No. from Part I (c) FMV (or estimate) (see instructions) (d) Date received LIFE INSURANCE POLICIES 20,571. _ 1/13/13 _ (a) No. (b) (c) FMV (or estimate) (see instructions) (d) Date received Description of noncash property given from Part I (a) No. from Part I (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

of Part III

Name of organization Employer identification number 13-7171873 ZICHRON YONA VSARA CHARITABLE FOUNDATION Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8) or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year (Enter this information once See instructions.) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (d) Description of how gift is held (a) No. from (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (b) Purpose of gift (d) Description of how gift is held (a) No. from (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (a) No. from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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Federal Statements

Page 1

ZICHRON YONA VSARA CHARITABLE FOUNDATION

13-7171873

Statement 1 Form 990-PF, Part I, Line 11 Other Income

(a) (b) Net (c) Investment Adjusted Income Net Income

\$ 53,886.

Total \$ 53,886. \$ 0. \$ 0.

Other Investment Income

Statement 2 Form 990-PF, Part II, Line 15 Other Assets

LIFE INSURANCE POLICY

 Book Value
 Fair Market Value

 \$ 381,440.
 \$ 217,326.

 \$ 381,440.
 \$ 217,326.

Statement 3
Form 990-PF, Part XV, Line 1a
Foundation Managers - 2% or More Contributors

HERMAN HERZOG AARON HERZOG MICHAEL B. HERZOG

Statement 4
Form 990-PF, Part XV, Line 3a
Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	 Amount
CONG KAHAL TORATH CHAIM VIZNITZ 5228 NEW UTRECHT AVE BROOKLYN, NY 11219			AIDING DISABLED CHILDREN	\$ 17,000.
BAIS TZIPORAH SCHOOL 1449 39th St BROOKLYN, NY 11218			EDUCATIONAL ASSISTANCE	33,000.
YESHIVAS WIZNITZ 1454 42ND St BROOKLYN, NY 11219			EDUCATIONAL ASSISTANCE	6,000.

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Federal Statements

Page 2

ZICHRON YONA VSARA CHARITABLE FOUNDATION

13-7171873

Statement 4 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

	Donee	Found- ation	Purpose of	
Name and Address	Relationship	<u>Status</u>	<u>Grant</u>	 Amount
CONG EMUNAS YISROEL 4310 16TH AVE BROOKLYN, NY 11204			RELIGIOUS ASSISTANCE	\$ 11,500.
MIFAL CHAIM VCHESED 4706 14TH AVE BROOKLYN, NY 11219			ASSISTANCE TO INDIGENT	1,000.
BNOS MALKA BELZ 600 MCDONALD AVE BROOKLYN, NY 11218			EDUCATIONAL	2,000.
KOLLEL SHOMREI HACHOMOS 18 HAYWARD STREET BROOKLY, NY 11211			ASSISTANCE TO INDIGENT	34,800.
YESHIVA BEIS MEIR 1327-38 STREET BROOKLYN, NY 11218			EDUCATIONAL ASSISTANCE	5,000.
KOLLEL EMES V'EMUNA 25 Phyllis Ter Airmont, NY 10952			RELIGIOUS & EDUCATIONAL	10,000.
YESHIVA OHR TORAH 21 Suzanne Drive MONSEY, NY 10952			RELIGIOUS ASSISTANCE	2,000.
CONG. AHAVAS TZDOKAH V'CHESED 5323 12TH AVENUE BROOKLYN, NY 11219			RELIGIOUS & EDUCATIONAL	5,000.
Yeshiva Kehilath Yaakov 209 wilson st BROOKLYN, NY 11204			EDUCATIONAL ASSISTANCE	10,000.
Mosdos Torah Veyirah 207 LEE AVENUE BROOKLYN, NY 11211			EDUCATIONAL ASSISTANCE	15,000.
Yeshiva Imrei Chaim 1824 53rd Street BROOKLYN, NY 11204			EDUCATIONAL ASSISTANCE	3,000.
Cong Ahavas Yisroel 14702 73rd Ave QUEENS, NY 11367			EDUCATIONAL ASSISTANCE	3,000.
Toldos Avrohom Yitzchok 1314 53 ST BROOKLYN, NY 11219			EDUCATIONAL ASSISTANCE	3,600.

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Federal Statements

Page 3

ZICHRON YONA VSARA CHARITABLE FOUNDATION

13-7171873

Statement 4 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation _Status_	Purpose o Grant	of	Amount
Name and Address Yeshivas Meor Hatalmud 1368 39 ST BROOKLYN, NY 11218	Relacionship	_ Status_	EDUCATIONAL	\$	2,800.
Yehivas Eisek Hatorah 1569 47th st brooklyn, ny 11219			educational		4,000.
The OJC Fund 183 WILSON ST BROOKLYN, NY 11211			EDUCATIONAL		10,000.
Mosdos Botoshan 4 widman spring valley, ny 10977			educational		500.
mikvah USA 1451 52 st brooklyn , ny 11219			educational assistance		18,000.
Mifal Ezra Zichron Yehuda 54 skillman st brooklyn, ny 11205			educational		22,000.
KZM 52nd st brooklyn , ny 11219			educational		10,000.
Keren Yisroel 206 wilson st brooklyn, ny 11211			educational		1,000.
Hadar Baiss Yaakov 351 lawrence ave lakewood, nj 08701			educational		4,400.
Cong Mishkan Yecezkel 4310 16TH AVE BROOKLYN, NY 11204			eDUCATIONAL		1,800.
Bnos Tzion of Bobov 5000 14TH AVE BROOKLYN, NY 11219	N/A		EDUCATIONAL		2,500.
Binyan Torah 65 dykstras way east monsey, ny 10952			eduacational		10,000.
A F of Yeshiva Luzern 5209 13TH AVE BROOKLYN, NY 11219			EDUCATIONAL		1,000.
				Total \$	249,900.

2013 Federal Supporting Detail Page 1 ZICHRON YONA VSARA CHARITABLE FOUNDATION 13-7171873 Other Income Producing Activities Dividends/interest from securities. TAX EXEMPT DIVIDENDS LESS TAX EXEMPT 9,500. 0. 9,500. Total \$

Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545 1709

If you ar	e filing for an Automatic 3-Month Extension, co	mplete only	Part I and check this box		► [X]
If you ar	e filing for an Additional (Not Automatic) 3-Mor	ith Extensio	n, complete only Part II (on page 2 of th	ıs form)	
Do not com	plete Part II unless you have already been grant	ed an autom	natic 3-month extention on a previously f	iled Form 8868	
request an ex Associated	iling (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (ni- ktension of time to file any of the forms listed in Par With Certain Personal Benefit Contracts, which r ing of this form, visit www.irs.gov/efile and click	ot automatic t I or Part II v nust be sent) 3-month extension of time You can ele with the exception of Form 8870, Information to the IRS in paper format (see instruct	ectronically file Form Return for Transfers	n 8868 to S
Part I	Automatic 3-Month Extension of Time	e. Only sul	bmit original (no copies needed).		·
A corporation	n required to file Form 990-T and requesting an	automatic 6	-month extension - check this box and	complete Part I only	y ▶ □
All other coi	porations (including 1120-C filers), partnerships returns	, REMICs, a			
	Name of exempt organization or other filer, see instructions		Enter mer Sidenti	fying number, see i	
Type or print	ZICHRON YONA VSARA CHARITABLE	· FOUNDA	PTON	13-7171873	Lamber (Emy er
File by the	Number, street, and room or suite number If a P O box, see		1101	Social security number ((SSN)
due date for filing your	c/o HERMAN HERZOG 6 LENORE A	VE			
return See	City, town or post office, state, and ZIP code. For a foreign ac		actions		
	MONSEY, NY 10952				
	eturn code for the return that this application is t	or (file a sep			04
Application Is For		Return Code	Application Is For		Return Code
Form 990 or	_i	01	Form 990-T (corporation)		07
Form 990-BI	- 	02	Form 1041-A		08
Form 4720 (I	····	03	Form 4720 (other than individual)		09
Form 990-PI		04	Form 5227		10
	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-1	(trust other than above)	06	Form 8870		12
Telephon If the ord If this is check the the exterior and in the	e No > 718-384-2400 ganization does not have an office or place of bifor a Group Return, enter the organization's four is box If it is for part of the group, insion is for stan automatic 3-month (6 months for a corporation 8/15	r digit Group check this b n required to ganization re _, and endir	e United States, check this box Exemption Number (GEN) ox If and attach a list with the nail file Form 990-T) extension of time turn for the organization named above	this is for the whole mes and EINs of all	5 17
	application is for Forms 990-BL, 990-PF, 990-T,	4720, or 606	59, enter the tentative tax less any		
	undable credits See instructions	22, 0, 000		3 a \$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

0.

3Ы\$

3 c |\$

Part II	Additional (Not Automatic) 3-Montl	h Extension	of Time. Only file the orig	ınal (no cop	ies neede	ed).
, are ii	7,100110110110110110110110110110110110110			r's identifying r		
	Name of exempt organization or other filer, see instructions				entification numb	
Type or						
print	ZICHRON YONA VSARA CHARITABL		ION	13-717		
File by the	Number, street, and room or suite number. If a P O box, se	e instructions		Social securi	ty number (SSN)
extended due date for	Saul N. Friedman & Company					
filing your return See instructions	6201 Fifteenth Avenue City, town or post office, state, and ZIP code For a foreign a	address, see instruct	lions			
mstructions	Brooklyn, NY 11219					
	BIOORIYII, NI IILIS					-
Enter the	Return code for the return that this application	is for (file a se	parate application for each retur	n)		04
Application	on	Return	Application			Retur
ls For		Code	Is For		***	Code
Form 990 Form 990	or Form 990-EZ	01	Form 1041-A	* * *		08
	l (individual)	03	Form 4720 (other than individual			09
Form 990		04	Form 5227	·		10
	T (section 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870			12
The bo	onot complete Part II if you were not already grows are in care of Fig. HERMAN HERZOG	Fax No ▶			I Form 8868.	•
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