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Form **990-PF**

17

Return of Private Foundation

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

Do not enter Social Security numbers on this form as it may be made public.

2013

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service For calendar year 2013 or tax year beginning and ending A Employer identification number Name of foundation 20-1824284 JOSH & DEENA BERNSTEIN FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 516-239-6127 69 SUTTON PLACE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here LAWRENCE, NY 11559 Initial return Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: ~3 AUG Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change 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: Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 358,509 (Part I, column (d) must be on cash basis) ▶\$ (d) Disbursements for charitable purposes (cash basis only) Analysis of Revenue and Expenses Part I (c) Adjusted net (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch B 2 Interest on savings and temporary cash investments 4 4 4.STATEMENT 3 6,781 6.781 6.781.STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 78,086 6a Net gain or (loss) from sale of assets not on line 10 Revenue b Gross sales price for all assets on line 6a 515,186. 78,086 7 Capital gain net income (from Part IV, line 2) N/A Net short-term capital gain Income modifications Gross sales less returns and allowances RECEIVED Gross profit or (loss) o 11 Other income 015 84,871 84,871 6,785 0 Compensation of officers (4) Ope Enployee salaries and wages Pension plans, employee benefits 16a Legal fees ./a.÷~, **b** Accounting fees c Other professional fees and Administrative 4 0. 18 Taxes 19 Depreciation and depletion TPG ER 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Operating 4,650 4,650 0. 23 Other expenses STMT 4 0. 24 Total operating and administrative 4,654 expenses. Add lines 13 through 23 4,654 0 0. 42.591 42,591. Contributions, gifts, grants paid 26 Total expenses and disbursements. 47,245 4,654 0. 42,591. Add lines 24 and 25 27 Subtract line 26 from line 12: 37,626 a Excess of revenue over expenses and disbursements 80,217 b Net investment income (if negative, enter -0-) 6,785 C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

		0-PF (2013) JOSH & DEENA BERNSTEIN	FOUNDATION		LOZ4ZO4 Page Z
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	512.	3,381.	3,381.
	l	Savings and temporary cash investments	4,779.	8,197.	8,197.
	1	Accounts receivable			
	, "	Less: allowance for doubtful accounts	1		
	١.				
	4	Pledges receivable ►	{		
	i	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	-	disqualified persons			
	,	Other notes and loans receivable			
	('		f f		
		Less; allowance for doubtful accounts			
šţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ď	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
	f .	Investments - corporate bonds			
	1	Investments - land, buildings, and equipment basis			
	''		1		
	1	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 5	315,232.	346,571.	346,931.
	14	Land, buildings, and equipment; basis	[
		Less accumulated depreciation			
	15	Other assets (describe)			
	i .				······································
	16	Total assets (to be completed by all filers - see the	220 522	250 140	250 500
_		instructions. Also, see page 1, item 1)	320,523.	358,149.	<u>358,509.</u>
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue	l l	1	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ŀi	1	Other liabilities (describe)			
	22	Other liabilities (describe			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
	1	Foundations that follow SFAS 117, check here	[
		and complete lines 24 through 26 and lines 30 and 31.			
ès	24	Unrestricted			
or Fund Balances	25	Temporarily restricted			
ä	1				
В	20	Permanently restricted			
5	ĺ	Foundations that do not follow SFAS 117, check here	ĺ		
Ē	l	and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.	0.	
Şet	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	320,523.	358,149.	
et	30	Total net assets or fund balances	320,523.	358,149.	
z	100	Total net assets of land balances	520,323.	330,1431	
	١	-	220 522	250 140	
_	31	Total liabilities and net assets/fund balances	320,523.	358,149.	
Р	art	III Analysis of Changes in Net Assets or Fund B	alances		
_					
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30]	
		st agree with end-of-year figure reported on prior year's return)		11	320,523.
2	-	r amount from Part I, line 27a		2	37,626.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	358,149.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	<u>358,149.</u>
		 -	·	_	Form 990-PF (2013)

P	Part IV Capital Gains	and Losses for Tax on In	vestment	Income						
	(a) List and descr 2-story brick wa	ribe the kind(s) of property sold (e.g. rehouse; or common stock, 200 shs	, real estate, . MLC Co.)		(b) H	low acqu - Purcha: - Donatio	ured se on	(c) Date a (mo., da	cquired ly, yr.)	(d) Date sold (mo., day, yr.)
1a	SHORT TERM CAP	ITAL GAIN			L	P				
	LONG TERM CAPI	TAL GAIN				P				
	CASH IN LIEU				ļ	P				
_ <u>d</u>	CAPITAL GAINS	DIVIDENDS								
<u>e</u>			<u> </u>		<u> </u>					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale					in or (loss) (f) minus (g)
_a				166,45						16,948.
<u>b</u>				270,64	4.					60,443.
_ <u>c</u>										3.
d										692.
<u>e</u>		and a selection (b) and award by	the foundation	on 10/21/60				. 0 (0-		
	Complete only for assets showing	ng gain in column (h) and owned by t			\dashv				ol. (h) gain ot less thai	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any				Losses ((from col. (h))
a										16,948.
_ <u></u>										60,443.
							-			3.
d										692.
e	-									
2	Capital gain net income or (net ca	If gain, also enter If (loss), enter -0-			}	2				78,086.
2	Net short-term canital gain or (los	ss) as defined in sections 1222(5) an								
J	If gain, also enter in Part I, line 8,		iu (0).		71					
	If (loss), enter -0- in Part I, line 8	• •				3				16,948.
F	Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inv	estme	ent Inc	ome		
(Fo	or optional use by domestic private	e foundations subject to the section 4	1940(a) tax on	net investment ir	ncome	e.)				
lf d	section 4940(d)(2) applies, leave t	hie nart hlank								
11 3	section 4340(u)(z) applies, leave i	nis part biank.								
		tion 4942 tax on the distributable am		-	rıod?					Yes X No
		lify under section 4940(e). Do not co								
1	Enter the appropriate amount in	each column for each year; see the ir	istructions bei	ore making any e						(d)
	Base periód years	Adjusted qualifying dis	tributions	Net value of no	(c) nebar		se assets	,	Distrib	(d) oution ratio
	Calendar year (or tax year beginni	<u> </u>		1101 14140 07 110			,916	· · · · · · · · · · · · · · · · · · ·	(cor (n) div	ided by col. (c)) • 043946
_	2012		4,850. 6,550.				,257			.047935
_	2011		8,857.				,761			.053914
_	2010 2009		6,210.				,663			.051190
_	2008		6,000.			271	,250			.022120
_	2000		0,0000				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			TODETE
,	Total of line 1, column (d)							2		.219105
		5-year base period - divide the total o	on line 2 by 5.	or by the number	r of ve	ars				
Ŭ	the foundation has been in existe		, . ,		· • • • •			3		.043821
									•	
4	Enter the net value of noncharitat	ole-use assets for 2013 from Part X,	line 5					4		347,889.
5	Multiply line 4 by line 3							5		15,245.
6	Enter 1% of net investment incor	ne (1% of Part I, line 27b)						6		802.
7	Add lines 5 and 6							7		16,047.
										40 -00
8	Enter qualifying distributions from							8		42,591.
	If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI, line	1b, and comp	lete that part usir	ng a 1'	% tax rat	te.			

_	n 990-PF (2013) JOSH & DEENA BERNSTEIN FOUNDATION 20-183 ort VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se			Page 4
_	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		8	02.
_	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, col. (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2		8	02.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		8	02.
6	Credits/Payments:			
а	2013 estimated tax payments and 2012 overpayment credited to 2013			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			19.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		8	21.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2014 estimated tax			
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	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			
C	Did the foundation file Form 1120-POL for this year?	<u>1</u> 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 .		1	İ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	ļ		
	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.	Ĭ		
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 changes	3	<u> </u>	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?	4b		
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.	ł		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	ł	1	
	By language in the governing instrument, or	i		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 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? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	_		
	NY	_		
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)	-	1	1
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	ŀ		
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV	9_	ļ	X
10	Did any nersons become substantial contributors during the tay year? If "yes" attach a schedule listing their parties and addresses	1 10	i	J 🍑

had not been removed from jeopardy before the first day of the tax year beginning in 2013?

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Dank MID Okakamania Danandina Askidika (* 1486)	N FOUNDATION	Jamesina et a	<u> 20-1824</u>	<u> </u>	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b I fany answer is "es' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A Organizations relying on a current notice regarding disaster assistance check here c If the answer is "es' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, pearly any trinds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes' to 6b, life Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No 1 Information About Officiers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) SUTTON PLACE LAWRENCE, NY 11559 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00		nich Form 4/20 May Be I	Required (contin	ued)	 1	
(2). Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section \$509(a)(1), (2), or (3), or section 4940(f)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) It any answer is "Yes" to 5a(1)*(5), did any of the transactions fail to qualify under the exceptions described in Regulations section \$3.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here (a) It the answer is "se' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section \$53.4945-5(d). But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes to 6b, like Form 8870. To all Any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes to 6b, like Form 8870. To be a state of the foundation receive any proceeds of have any net income attributable to the transaction? (a) Name and address (b) Title, and average hours promise the stransaction of the hours previous and their compensation. (a) Name and address (b) Title, and average hours promise the stransaction of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours prevently acceptable to the transaction of the promisions of each of the promisions of each of the promision		(acetics 4045(a)\0	г¬.,	V		
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of circlity to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to quality under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes No If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870. 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Name and address (c) Compensation ((d) Compensation	•••			es LXLINO		
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of druelty to children or animals? b) If any answer is ve's to 561, (1)-(5), did any of the transactions fail to quality under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c if the answers it ve's to question 53.4945 or in a current notice regarding disaster assistance check here c if the answers it ve's to question 53.4945 or in a current notice regarding disaster assistance (see instructions)? If ves, it attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If ves to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part Vill Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (a) Name and address (a) Name and address (b) Title, and average hours per week devoted to push to push to the prevention of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation account of the party of th	• •	955); or to carry on, directly or indir		[]		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 59(3)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than relipious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b I lary answer is "Yes" to 5a(1)-(5), did say of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? N/A Sb N/A Yes No If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8370. A tany time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No b If "Yes" to 6b, file Form 8370. The At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No b If "Yes" to 6b, file Form 8370. The At any time during the tax year, was the foundation on a party or indirectly, on a personal benefit contract? Information About Officers, Directors, Trustees, Foundation Managers, Highly Parid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (a) Name and address (a) Name and address O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	· ·	_				
Sog(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of crulety to children or animals? Yes X No	• • •		L Y	es LXLINO		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? It is fany answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice reparding disaster assistance check here It is answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, life Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (a) Name and address (a) Name and address (b) Title, and average hours per week devoled for position of five highest-paid employees and contractors (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation of the foundation to position of the position of the foundation to position of the foundation of the foundation to position of the foun	•	anization described in section				
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1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted to position (fin to paid, enter -0-) SAMUEL J BERNSTEIN 69 SUTTON PLACE LAWRENCE, NY 11559 0.00 0.00 0.00 0.00 0.00 2 Compensation (fin to paid, enter -0-) LAWRENCE, NY 11559 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0	Part VIII Information About Officers, Directors, T Paid Employees, and Contractors	Trustees, Foundation Ma	ınagers, Highl	У		
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<u></u>	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	and deterred	, 40	COU
	NONE				 	
	0170100					
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	otal number of other employees paid over \$50,000		<u> </u>	<u> </u>		_

Total. Add lines 1 through 3

	art X		-1024204 Tugot
ٺ	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	ındations,	, 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	344,752. 8,435.
b	Average of monthly cash balances	1b	8,435.
C	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	353,187.
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation) 1e 0	.]	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	353,187.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,298.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	347,889.
6	Minimum investment return. Enter 5% of line 5	6	17,394.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
	foreign organizations check here and do not complete this part.)	 	
1	Minimum investment return from Part X, line 6	1	17,394.
	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	2c	802.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16,592.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	<u>16,592.</u>
6	Deduction from distributable amount (see instructions)	6	<u> </u>
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	16,592.
Р	Qualifying Distributions (see instructions)		
<u>-</u>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a_	42,591.
b	Program-related investments - total from Part IX-B	1b_	0.
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	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	42,591.
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	5	802.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	41,789.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI.				
line 7				16,592.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			651.	!
b Total for prior years:	-			
		0.		
3 Excess distributions carryover, if any, to 2013:	-			
a From 2008				l
b From 2009				
c From 2010				
d From 2011				
e From 2012				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ► \$ 42,591.				
a Applied to 2012, but not more than line 2a			651.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				16,592.
e Remaining amount distributed out of corpus	25,348.			
5 Excess distributions carryover applied to 2013 (if an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	25,348.			
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				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008			:	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.	05 040			
Subtract lines 7 and 8 from line 6a	25,348.			
O Analysis of line 9:				
a Excess from 2009				
b Excess from 2010				
c Excess from 2011				
d Excess from 2012				
e Excess from 2013 25,348.				Form 990-PF (2013)

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Part XV Supplementary Information		<u> </u>		
3 Grants and Contributions Paid During the \(\) Recipient	If recipient is an individual,	Payment		
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a Faid during the year				
		DW1177 D1171 TG	I DUDDOMD TOMBD	
BAIS YAAKOV D'RAV HIRSCH 235 NORTH MAIN STREET	NONE	OTHER PUBLIC CHARITY	UNRESTRICTED CHARITABLE GRANT	
SPRING VALLEY NY 10977		CHARTT	CHARLET CHARLE	4,500
AMERICAN FRIENDS OF MIR YERUSHALAYIM	NONE	OTHER PUBLIC	UNRESTRICTED	
5114 13TH AVENUE		CHARITY	CHARITABLE GRANT	
BROOKLYN, NY 11219				1,000
CHAI LIFELINE	NONE	OTHER PUBLIC	UNRESTRICTED	
151 WEST 30TH STREET		CHARITY	CHARITABLE GRANT	
NEW YORK, MO 10001	_			500
MASBIA	none	OTHER PUBLIC	UNRESTRICTED	
4114 14TH AVENUE	NONE	CHARITY	CHARITABLE GRANT	
BROOKLYN, NY 11219				360
AMERICAN FRIENDS OF YESHIVOT BNEI	NONE	OTHER PUBLIC	UNRESTRICTED	
AKIVA		CHARITY	CHARITABLE GRANT	
11 BROADWAY				
NEW YORK NY 10004	NULTABLE ON CHE	3m / G)		1,000
Total SEE CO b Approved for future payment	NTINUATION SHEE	ST(S)	<u> </u>	42,591
D / Appreciation relate payment				
NONE				
		-		
Total			▶ 3h	0
				m 990-PF (201

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
					·
ab	1		 -		· · · · · · · · · · · · · · · · · · ·
			1	······································	
d			 		
			1	·	
e			+		
- Face and contrasts from accomment against	- - -				
g Fees and contracts from government agencies			+		
Membership dues and assessments			+		
Interest on savings and temporary cash					
investments		<u> </u>			6 501
Dividends and interest from securities			 		6,781
Net rental income or (loss) from real estate:	ļ				
a Debt-financed property					
b Not debt-financed property			 		
Net rental income or (loss) from personal					
property					 ,
Other investment income					
Gain or (loss) from sales of assets other			 		
than inventory					78,086
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a			1 1		
b	i I				
C	l l				· -
d			1		
e			†		
Subtotal. Add columns (b), (d), and (e)		0.		0.	84,871
Total. Add line 12, columns (b), (d), and (e)	L		- L L	13	
See worksheet in line 13 instructions to verify calculation:	c \				0,1071
		plishment of E	xempt l	Purposes	
Part XVI-B Relationship of Activitie			A contribut	ed importantly to the accom	plishment of
ine No. Explain below how each activity for which					
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ine No. Explain below how each activity for which the foundation's exempt purposes (other to					

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Part XVII	Information Re Exempt Organ		sfers To	and Transactions	and Relations	hips With Noncha	ritable	€	
1 Did the or			of the following	ng with any other organizati	ion described in sec	ion 501(c) of		Yes	No
				27, relating to political orga		,			
	from the reporting found								l
(1) Cash	·		•	•			1a(1)		X
(2) Other	r assets						1a(2)		X
b Other tran									
(1) Sales	s of assets to a noncharita	ible exempt organiza	tion				16(1)		X
(2) Purc	hases of assets from a no	ncharitable exempt (organization				1b(2)	_	X
(3) Renta	al of facilities, equipment,	or other assets					1b(3)		_X_
(4) Reim	bursement arrangements	;					1b(4)		<u> </u>
	s or loan guarantees						1b(5)		X X X X
	ormance of services or me						1b(6)		<u>X</u>
	if facilities, equipment, ma						1c	L	_ <u>X</u> _
	-			edule. Column (b) should al	-	-		ets,	
	is given by the reporting to i) the value of the goods,			ed less than fair market val	ue in any transaction	n or snaring arrangement, s	snow in		
(a) Line no	(b) Amount involved	,		e exempt organization	(d) Description	of transfers, transactions, and	ebaring or	ranceme	
(a) Eliza il o	(b) / into and into inco	(o) name o	N/A	o oxompt or gameaton	(a) Description	tor transfers, transactions, and		angonio	
			11/11			·			
									
								_	
						· · · · · · · · · · · · · · · · · · ·			
								_	
						·			
		<u> </u>				· · · · · · · · · · · · · · · · · · ·			
	=	-		or more tax-exempt organ	iizations described	_	٦.,	77	٦.,
	501(c) of the Code (othe	-)(3)) or in sect	tion 52/?		L	Yes	LX.	No
b if Yes, c	omplete the following sch (a) Name of org			(b) Type of organization	1	(c) Description of relations	hin.		
	N/A	Janization		(b) Type of Organization		(6) Description of relations	inp		
	N/A								
					 				
						· · · · · · · · · · · · · · · · · · ·			
	·								
Under	penalties of perjury, I declare	that I have examined the	ıs return, ıncludır	ng accompanying schedules and	d statements, and to the	best of my knowledge			
Sign and b	elief, it is true, correct, and cor	mplete Declaration of pr	eparer (other tha	n taxpayer) is based on all inform	mation of which prepare	retu	y the IRS our orn with the	prepare	er
Here	Thurs	, I buch		107/03/14	PRESI	DENT	wn below Yes	(see ins]″No
Sigi	nature of officer or trustee	<i>*</i>		Date	Title				
	Print/Type preparer's na	ame	Proparer's s	ignature 1 1	Date	Check X If PTIN			
				//. I II		self- employed			
Paid	ALLAN TREU	HAFT	L XXX	in autol	07/03/14				
Preparer	Firm's name ► ALL	AN TREUHA	FT CPA			Firm's EIN ► 13-2	8390	33	
Use Only									
	Firm's address ▶ 18					-			
	BR	OOKLYN, N	Y 1122	9	···	Phone no. 718-5			
							orm 99 0		(2013)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2013

Employer identification number

	JOSH & DEENA BERNSTEIN FOUNDATION	20-1824284
Organization type (chec	k 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 private foundation	
	501(c)(3) taxable private foundation	
• •	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions.
For an organiza	tion filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in mone) that Parts I and II.	oney or property) from any one
Special Rules		
509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the gen (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contrins of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or eductor of cruelty to children or animals. Complete Parts I, II, and III.	
contributions fo If this box is che purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions did not tot ruse exclusively for religious, charitable, etc., purposes, but these contributions did not tot ecked, enter here the total contributions that were received during the year for an exclusive to complete any of the parts unless the General Rule applies to this organization because it able, etc., contributions of \$5,000 or more during the year	al to more than \$1,000. Iy religious, charitable, etc.,
Caution. An organization	n that is not covered by the General Rule and/or the Special Rules does not file Schedule E	3 (Form 990, 990-EZ, or 990-PF),

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

JOSH & DEENA BERNSTEIN FOUNDATION

20-1824284

JUSH_	& DEENA DERNOTEIN FOUNDATION		0 1024204
Part I	Contributors (see instructions). Use duplicate copies of Part I if	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SAMUEL J BERNSTEIN 69 SUTTON PLACE LAWRENCE, NY 11559	\$	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

JOSH & DEENA BERNSTEIN FOUNDATION

20-1824284

	, , , , ,	rt II if additional space is needed.	_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of org	anizatiòn			Employer identification number
ال <u>JOSH</u> Part III	DEENA BERNSTEIN FOUND. Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the	ridual contributions to section 501 need to be following line entry. For organization	(c)(7), (8), or (10) organizatio	20-1824284 ns that total more than \$1,000 for the
	the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	c., contributions of \$1,000 or less	for the year. (Enter this information once) > \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
_		(e) Transfer of g	gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trai	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
-		(e) Transfer of g	gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trai	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of g	gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trai	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
-		(e) Transfer of g	jift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trai	nsferor to transferee

3 Grants and Contributions Paid During the		-,		ļ
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTRIBUTION	
ONGREGATION OHEL MOSHE	NONE	OTHER PUBLIC	UNRESTRICTED	
48 OCEAN PARKWAY	NONE	CHARITY	CHARITABLE GRANT	
BROOKLYN, NY 11230		CHARITI	CHARTIABLE GRANT	1,0
PTACH	NONE	OTHER PUBLIC	UNRESTRICTED	
428 36TH STREET		CHARITY	CHARITABLE GRANT	
ROOKLYN, NY 11218			- 	7
ABBI JACOB JOSEPH SCHOOL	NONE	OTHER PUBLIC	UNRESTRICTED	
00 CASWELL AVENUE	1,02.12	CHARITY	CHARITABLE GRANT	
STATEN ISLAND, NY 10314				1,00
YESHIVA GEDOLAH OF WATERBURY	NONE	OTHER PUBLIC	UNRESTRICTED	
359 COOKE STREET		CHARITY	CHARITABLE GRANT	
MATERBURY, CT 06710		 		4,5
BETH MEDRASH GOVOHA	NONE	OTHER PUBLIC	UNRESTRICTED	
517 6TH STREET		CHARITY	CHARITABLE GRANT	
AKEWOOD, NJ 08701				1,00
SRAEL CHILDRENS CANCER FOUNDATION	NONE	OTHER PUBLIC	UNRESTRICTED	
141 WASHINGTON AVENUE	NONE	CHARITY	CHARITABLE GRANT	
AWRENCE, NY 11559				1
XAYAMA	NONE	OTHER PUBLIC	UNRESTRICTED	
404 CONEY ISLAND AVENUE		CHARITY	CHARITABLE GRANT	
BROOKLYN, NY 11230				1(
ATZALA ROCKAWAYS & NASSAU COUNTY	NONE	OTHER PUBLIC	UNRESTRICTED	
221 BEACH 9TH STREET		CHARITY	CHARITABLE GRANT	
PAR ROCKAWAY, NY 11691				3(
KULANU	NONE	OTHER PUBLIC	UNRESTRICTED	
.65 WEST END AVENUE		CHARITY	CHARITABLE GRANT	
IEW YORK, NY 10023		 		1,0
MEICAN COMMITTEE FRO SHAARE ZEDEK	NONE	OTHER PUBLIC	UNRESTRICTED	
55 WEST 39TH STREET		CHARITY	CHARITABLE GRANT	
IEW YORK, NY 10018			0.00.01	1.00
Total from continuation sheets				35_2:

Part XV Supplementary Information	n			24204
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	I Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
YESHIVA KTANA OF WATERBURY	NONE	OTHER PUBLIC	UNRESTRICTED	
BUCKINGHAM STREET		CHARITY	CHARITABLE GRANT	
WATERBURY, CT 06710		<u> </u>		575.
CONGREGATION BNAI SHALOM	NONE	OTHER PUBLIC	UNRESTRICTED	
1641 NORTH FOREST ROAD		CHARITY	CHARITABLE GRANT	
WILLIAMSVILLE NY 14221				1,000.
GERSHON JACOBSON JEWISH CONTINUITY	NONE	OTHER PUBLIC	UNRESTRICTED	
FOUNDATION		CHARITY	CHARITABLE GRANT	
508 MONTGOMERY STREET				
BROOKLYN, NY 11225		-		1,000,
YESHIVA BETH JOSEPH	NONE	OTHER PUBLIC	UNRESTRICTED	
1427 49TH STREET BROOKLYN, NY 11219		CHARITY	CHARITABLE GRANT	1.000.
BROOKSIN, NI 11219		 		1,000,
VIGUILIA MODAG GUATV	NOVE	OWNED DIDLIO	Thun namp Tampp	
YESHIVA TORAS CHAIM 1170 WILLIAM STREET	NONE	OTHER PUBLIC CHARITY	UNRESTRICTED CHARITABLE GRANT	
HEWLETT NY 11557		CHARITI	CHARITABLE GRANT	500.
All Italian				
PARK EAST SYNAGOGUE	NONE	OTHER PUBLIC	UNRESTRICTED	
163 EAST 67TH STREET	,,,,,,	CHARITY	CHARITABLE GRANT	
NEW YORK, NY 10021				1,800.
TALMUDICAL YESHIVA OF PHILADELPHIA	NONE	OTHER PUBLIC	UNRESTRICTED	
6063 DREXEL ROAD		CHARITY	CHARITABLE GRANT	
PHILADELPHIA, PA 19131				500.
AMERICAN SOCIETY OF JEWISH MUSIC	NONE	OTHER PUBLIC	UNRESTRICTED	
15 WEST 16TH STREET		CHARITY	CHARITABLE GRANT	
NEW YORK, NY 10011		 		1,000,
CONGREGATION SHAARAY TEFILA	NONE	OTHER PUBLIC	UNRESTRICTED	
25 CENTRAL AVENUE LAWRENCE, NY 11559		CHARITY	CHARITABLE GRANT	1,750,
minimum in 11999				1,730,
CONGREGATION KEHILAS JACOB	NONE	OTHER PUBLIC	INDECARTORE	
821 ROOSEVELT COURT	HOME	CHARITY	UNRESTRICTED CHARITABLE GRANT	
FAR ROCKAWAY NY 11691				500.
Total from continuation sheets				

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
ROFEH CHOLIM CANCER SOCIETY	NONE	OTHER PUBLIC	UNRESTRICTED	
768 BEDFORD AVENUE		CHARITY	CHARITABLE GRANT	
BROOKLYN, NY 11205				5
YAD ELIEZER	NONE	OTHER PUBLIC	UNRESTRICTED	
1102 EAST 26TH STREET		CHARITY	CHARITABLE GRANT	1.0
BROOKLYN, NY 11210				1,0
NATIONAL JEWISH THEATER	none	OTHER PUBLIC	UNRESTRICTED	
4400 MONACO STREET		CHARITY	CHARITABLE GRANT	_
CORAL GABLES, FL 33143				5
KEREN EZER	NONE	OTHER PUBLIC	UNRESTRICTED	
543 BEDFORD AVENUE		CHARITY	CHARITABLE GRANT	10.0
BROOKLYN, NY 11211				10,0
KARNEI OHR	NONE	OTHER PUBLIC	UNRESTRICTED	
175 FDR DRIVE		CHARITY	CHARITABLE GRANT	,
NEW YORK, NY 10002				4
YOUNG ISRAEL BETH EL OF BORO PARK	NONE	OTHER PUBLIC	UNRESTRICTED	
4802 15TH AVENUE BROOKLYN, NY 11219		CHARITY	CHARITABLE GRANT	
DROOMLIN, NI 11219				8
ESHIVA MAKOR CHAIM	NONE	OTHER PUBLIC	UNRESTRICTED	
2540 AMSTERDAM AVENUE NEW YORK, NY 10033		CHARITY	CHARITABLE GRANT	1
10111, 111 10000				<u> </u>
MEOR	NONE	OTHER PUBLIC	UNRESTRICTED	
PO BOX 279 POMONA NY 10970		CHARITY	CHARITABLE GRANT	5
OHOMA, NI 10770				5
MESIVTA TIFERETH JERUSALEM	NONE	OTHER PUBLIC	UNRESTRICTED	
.45 EAST BROADWAY		CHARITY	CHARITABLE GRANT	-
NEW YORK, NY 10002				7
MERICAN SOCIETY FOR YAD VASHEM	NONE	OTHER PUBLIC	UNRESTRICTED	
500 5TH AVENUE		CHARITY	CHARITABLE GRANT	
Total from continuation sheets		.1		1

FORM 990-PF INTERE	ST ON SAVIN	GS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1	
SOURCE	REVE	REVENUE NET IN		(B) VESTMENT COME	(C) ADJUSTED NET INCOME			
ALLIANCE BERNSTEIN			4.		4.		4.	
TOTAL TO PART I, LI	NE 3	4.		4.		4.		
FORM 990-PF	DIVIDENDS	AND INTER	EST FRO	OM SECUR	ITIES	STATEMENT	2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO			
ALLIANCE BERNSTEIN	7,473.	69	2.	6,781.	6,78	1. 6,7	81.	
TO PART I, LINE 4	7,473.	69	2. ====================================	6,781.	6,78	1. 6,7	6,781.	
FORM 990-PF		TAX	 ES			STATEMENT	3	
DESCRIPTION		(A) EXPENSES PER BOOKS	NET II	3) NVEST- INCOME	(C) ADJUSTED NET INCOM			
FOREIGN TAXES WITHHELD		4.		4.		0.	0.	
TO FORM 990-PF, PG 1, LN 18		4.		4.		0.	0.	
FORM 990-PF		OTHER E	XPENSE:			STATEMENT	4	
DESCRIPTION		(A) EXPENSES PER BOOKS	NET II	3) NVEST- INCOME	(C) ADJUSTED NET INCOM			
BROKER MANAGEMENT F	EES	4,650.		4,650.		0.	0.	
TO FORM 990-PF, PG	1, LN 23	4,650.	·	4,650.		0.	0.	

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ALLIANCE BERNSTEIN	COST	346,571.	346,931.
TOTAL TO FORM 990-PF, PART II, LINE 1	3	346,571.	346,931.

Form **8868**

(Rev. Japuary 2014)

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

OMB No. 1545-1709

Department of the Treasury

File a separate application for each return.

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

Internal Revenue Service \triangleright X • If you are filing for an Automatic 3-Month Extension, complete only Part 1 and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Chanties & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Employer identification number (EIN) or Type or Name of exempt organization or other filer, see instructions. print JOSH & DEENA BERNSTEIN FOUNDATION 20-1824284 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) filing your 69 SUTTON PLACE City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions LAWRENCE, NY 11559 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Return Application Return Application Is For Code ls For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 02 Form 1041-A Form 990-BL Form 4720 (individual) 03 Form 4720 (other than individual) 09 04 Form 5227 10 Form 990-PF 05 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 11 Form 990-T (trust other than above) Form 8870 SAMUEL J BERNSTEIN The books are in the care of ► 69 SUTTON PLACE - LAWRENCE, NY 11559 Telephone No. ► 516-239-6127 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)
 If this is for the whole group, check this box 🕨 _____ . If it is for part of the group, check this box 🕨 _____ and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2013 or tax year beginning ______, and ending _____, and ending If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За

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. **3b** 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

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.

Form 8868 (Rev. 1-2014)