

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



### Form **990-PF** Department of the Treasury Internal Reverue Service

EXTENDED TO AUGUST 15, 20: Return of Private Foundation 2016

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. ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. OMB No 1545-0052

For	caler	idar year 2015 or tax year beginning		, and ending	·	
Na	me of	foundation			A Employer identificatio	n number
J	AM	ACHA BLOOM FAMILY FOUND				
С	1/0	JAMACHA LLC	26-1614525	5		
		and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	<del> </del>
1	61	EAGLE ROCK AVENUE				-1156
		own, state or province, country, and ZIP or foreign p	nostal code	<del></del>	C If exemption application is	
		ELAND, NJ 07068	00 mi 00 uc		o il exemption application is	pending, check here
		all that apply: Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organization	os abaak bara
ינט	HIECK		<del></del>	officer public charity	i. Foreign organization	is, check here
		Final return	Amended return		Foreign organizations m check here and attach c	eeting the 85% test,
		Address change	Name change		7	
H (	_	type of organization: X Section 501(c)(3) ex			E If private foundation sta	
느			Other taxable private founda		under section 507(b)(1	)(A), check here
		· 1	ng method: X Cash	Accrual	F If the foundation is in a	
			ther (specify)		under section 507(b)(1	)(B), check here
	\$	2,936,902. (Part I, colu		pasis.)	<u> </u>	<del></del>
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	,	necessarily equal the amounts in column (a) )	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	32,427.	· - · · · · · · · · · · · · · · · · · ·	N/A	
ශූ	2	Check If the foundation is not required to attach Sch. B			ļ	<u> </u>
SCANNED	3	Interest on savings and temporary cash investments	33.	33،		STATEMENT 1
	4	Dividends and interest from securities	82,407.	82,407	,	STATEMENT 2
Z	5a	Gross rents				-
	Ь	Net rental income or (loss)			· ·	
	6a	Net gain or (loss) from sale of assets not on line 10	91,208.			
% JNΓ Revenue	h	Gross sales price for all assets on line 6a 1,636,047.				
₹.	7	Capital gain net income (from Part IV, line 2)		91,208		
∞ &	R	Net short-term capital gain		<u> </u>	† <del></del>	
<b>©</b>	١	Income modifications		<del></del>		<del> </del>
2016	10a	Gross sales less returns				
තී		and allowances Less Cost of goods sold		······································	<del> </del>	
		Gross profit or (loss)				
	11	Other income	17.	17.		STATEMENT 3
	1	Total. Add lines 1 through 11	206,092.	173,665		DIMITEM 1
	12		200,092.	1/3,003	<u>'</u>	0.
	13	Compensation of officers, directors, trustees, etc	37,100.	18,550	<u> </u>	18,550.
	14	Other employee salaries and wages	37,100.	10,330		(FD) 10,330.
es		Pension plans, employee benefits			+ +C-C	
ışe		Legal fees	0 500	0 500	-	<del>                                     </del>
g be	i .	Accounting fees STMT 4	9,500.	9,500.	1 3 JUL 26	
Ü	]	Other professional fees			<del>                                     </del>	(v)
Ę		Interest	2.456	1 010	Cicio	111 7 625
Operating and Administrative Expens		Taxes STMT 5	3,456.	1,819	CADEN	1,637.
nis	19	Depreciation and depletion			<del>                                     </del>	<del> </del>
Ē	20	Occupancy				
ĕ		Travel, conferences, and meetings			ļ	
anc	22	Printing and publications		<del></del>		
ğ	23	Other expenses STMT 6	312.	177.	,	135.
atii	24	Total operating and administrative				
per	}	expenses. Add lines 13 through 23	50,368.	30,046		20,322.
0	25	Contributions, gifts, grants paid	462,384.	· <del></del>		462,384.
		Total expenses and disbursements.				
		Add lines 24 and 25	512,752.	30,046.		482,706.
	27					
	j	Excess of revenue over expenses and disbursements	<306,660.	>		
		Net investment income (if negative, enter -0-)		143,619.		
		Adjusted net income (if negative, enter -0-)		<u> </u>	N/A	<del>                                     </del>
5005			<del></del>	· · · · · · · · · · · · · · · · · · ·		

JAMACHA BLOOM FAMILY FOUNDATION

	Beginning of year		614525 Page 2
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	/ear (c) Fair Market Value
1 Cash - non-interest-bearing	154,569.	306,925.	306,925.
2 Savings and temporary cash investments			
3 Accounts receivable ►			
Less: allowance for doubtful accounts			
4 Pledges receivable ►			
Less: allowance for doubtful accounts ▶	1		
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
7 Other notes and loans receivable			
Less: allowance for doubtful accounts			
8 Inventories for sale or use			
9 Prepaid expenses and deferred charges			
10a Investments - U.S. and state government obligations			
b Investments - corporate stock STMT 7	1,177,088.	1,296,011.	1,877,307.
c Investments - corporate bonds STMT 8	1,185,206.	607,267.	752,670.
11 Investments - land, buildings, and equipment basis	j		
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment: basis ▶	]		
Less accumulated depreciation			
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers - see the			
instructions. Also, see page 1, item I)	2,516,863.	2,210,203.	2,936,902.
17 Accounts payable and accrued expenses			-
18 Grants payable			
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
21 Mortgages and other notes payable			
22 Other liabilities (describe >)			
23 Total Habilities (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.	1		
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	2,516,863.	2,210,203.	
30 Total net assets or fund balances	2,516,863.	2,210,203.	
7	2,516,863.	2,210,203.	
31 Total liabilities and net assets/fund balances		2,210,203.	
Part III Analysis of Changes in Net Assets or Fund E	Balances		
Total net assets or fund balances at beginning of year - Part II, column (a), line	30		
(must agree with end-of-year figure reported on prior year's return)	_	1	2,516,863.
Enter amount from Part I, line 27a	•	2	<306,660.
Other increases not included in line 2 (itemize)		3	0.
		4	2,210,203.
Add lines 1, 2, and 3			
Add lines 1, 2, and 3  Decreases not included in line 2 (itemize) ▶		5	0.

523511 11-24-15

4	_	10	~ 7 7	3/3	CITA	T T	_
١	L.	/ ( <i>)</i>	JA	MA	CHA	1,1,	

		JAMA	CHA LLC					2	6-161	4525	Page 3
P	art IV Capital Gains	and Los	ses for Tax on In	vestmen	t Income					-	<del></del> -
			d(s) of property sold (e.g. r common stock, 200 shs			P	How acquired - Purchase - Donation		acquired day, yr.)	(d) Date (mo., da	
	SEE ATTACHED S	CHEDU	LE			<del>                                     </del>	Jonque				
	SEE ATTACHED S										
	CAPITAL GAINS					$\vdash$					
d											
e											
-	(e) Gross sales price		epreciation allowed (or allowable)		st or other basis expense of sale				Sain or (loss) s (f) minus (		
a	268,077.				267,80	4.					273.
b	1,366,649.				1,277,03	5.				89	,614.
C	1,321.									1	,321.
d											
e					·						
_	Complete only for assets showing	ig gain in co	lumn (h) and owned by t	he foundation	on 12/31/69				Col. (h) gain i		
	(i) F.M.V. as of 12/31/69		Adjusted basis is of 12/31/69		cess of col. (I) col. (J), if any		COI		not less than (from col. (f		
a											273.
<u>b</u>										89	,614.
C										1_	,321.
<u>d</u>											
<u>e</u>											
2	Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2			91	,208.
3	Net short-term capital gain or (los	s) as define	•								
	If gain, also enter in Part I, line 8,			<b>,</b> ,		}					
	If (loss), enter -0- in Part I, line 8		40.07.74			للي	3		<u> N/A</u>		
P	art V   Qualification U	nder Se	ction 4940(e) for	Reduced	lax on Net	Inv	estment inc	ome			
(Fo	r optional use by domestic private	foundation	s subject to the section 4	940(a) tax on	net investment in	come	ı.)				
If c	ection 4940(d)(2) applies, leave th	ns nart hlan	k								
											r==1
	s the foundation liable for the sec					riod?				Yes	X No
	res," the foundation does not qual										
1_	Enter the appropriate amount in (	each columi		structions be	iore making any ei		·			(d)	
	(a) Base period years		(b) Adjusted qualifying dist	rihiitions	Net value of no	(C) nchai	ntable-use assets		Distribi	(d) ution ratio	(a))
{	Calendar year (or tax year beginnii	ng in)	<del></del>		1101 14100 01 1101		<del></del>		(col. (b) divi		
	2014			0,147.			, 294, 796 407, 473				<u> 12343</u> 15345
	2013			3,034. 3,161.	<del></del>		<u>,407,472</u> ,826,917				71 <u>8</u> 67
—	2012			5,101. $5,243.$			, 967, 944				75892
_	2011 2010	<del></del>		9,498.	<del></del>		, 945, 541				50754
	2010			7,430 •		۷.	, , , , , , , , ,	<del>* </del>		• 0 .	<u> </u>
	Total of line 1, column (d)							2		4.	26201
	Average distribution ratio for the s	S-vear bace	nariod - duuda tha total o	n kna 2 hv 5	or by the number	nf va	are .	-	<del>                                     </del>	• = 4	20201
	the foundation has been in exister			ii iiiic 2 by 5,	or by the namber	UI YU	ai 3	3		. 0.8	35240
	the foundation has been in existen	1106 11 1633 11	iair 5 years				•	-			77440
4	Enter the net value of noncharitab	le-use asse	ts for 2015 from Part X, I	ine 5				4	ļ	3,185	942.
5	Multiply line 4 by line 3							5		271	570.
6	Enter 1% of net investment incom	ne (1% of P	art I, line 27b)					6		1.	436.
-		,	• •								<del></del>
7	Add lines 5 and 6							7		273	,006.
	Enter qualifying distributions from							8		482	706.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, che	ck the box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax rate.				

JAMACHA BLOOM FAMILY FOUNDATION

_	Of Action Bloom Parties Foundation			
	n 990-PF (2015)	4525 instr	ıctio	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	motit	ictio.	113)
ıa	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   X and enter 1%		1 1	36.
U	of Part I, line 27b		<u> </u>	30.
•	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		1,4	
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-		1 4	36.
6	Credits/Payments:			<del>50.</del>
	2015 estimated tax payments and 2014 overpayment credited to 2015 [6a ] 1,060.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)  6c 2,000.			
	Backup withholding erroneously withheld 6d 6d		*	
	Total credits and payments. Add lines 6a through 6d		3 0	60.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		<u> </u>	00.
_	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		1,6	24.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax		<u> </u>	0.
	rt VII-A Statements Regarding Activities			
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	T	Yes	No
	any political campaign?	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		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.			
C	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. $\triangleright$ \$ 0 • (2) On foundation managers. $\triangleright$ \$ 0 •			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			i
	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.	1		
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		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.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or	1		
	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)			
	NJ			
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	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			
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

Form **990-PF** (2015)

For	m 990-PF (2015) C/O JAMACHA LLC 26-161	4525	;	Page 5
P	art VII-A   Statements Regarding Activities (continued)			
		T	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	<u> </u>		
	If "Yes," attach statement (see instructions)	12		Х
13		13	Х	
	Website address ► N/A	10		
1.6	The books are in care of ► JAMACHA, LLC  Telephone no. ► 973-2:	28-1	156	
	Located at ▶ 161 EAGLE ROCK AVE - 2ND FLR, ROSELAND, NJ ZIP+4 ▶0			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	,000		$\Box$
- 10	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
10			Yes	No
16	securities, or other financial account in a foreign country?	16	1 63	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	16		
Б	foreign country ► art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
_	<del></del>	T	Yes	Nio
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		165	INO
1	a During the year did the foundation (either directly or indirectly):	1	] ]	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		i i	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			•
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		-	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1 '	-	
	for the benefit or use of a disqualified person)?	1	·	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	} '		
	If the foundation agreed to make a grant to or to employ the official for a period after	'	Ì	
	termination of government service, if terminating within 90 days.)	1		
	b if any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	!		
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1		
	before the first day of the tax year beginning in 2015?	1c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1		
	before 2015? Yes X No			
	If "Yes," list the years ▶,,,,,			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1 7		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	[ !	ĺ	
	statement - see instructions.) N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>-</b>			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		İ	
	during the year?	1 1		
	b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after	1 !		
	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,		il	
	Form 4720, to determine if the foundation had excess business holdings in 2015.)  N/A	3ъ		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 the tax year beginning in 2015?	4b		Х
_				

4b X Form **990-PF** (2015)

Form **990-PF** (2015)

Total number of other employees paid over \$50,000

### JAMACHA BLOOM FAMILY FOUNDATION

Form 990-PF (2015) C/O JAMACHA LLC	<u>26-1614525</u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manag Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	b) Type of service (c) Com	pensation
NONE		
Total number of others receiving over \$50,000 for professional services	<b>&gt;</b>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information s number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	uch as the Expenses	
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.  3		
Total. Add lines 1 through 3	Form 990-F	0.
	Form 99U-F	r (2015)

523561

C/O JAMACHA LLC

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, 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	3,021,325.
b	Average of monthly cash balances	1b	213,134.
C	Fair market value of all other assets	1c	
d	way a final distance due to constitution	1d	3,234,459.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	-	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,234,459.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	48,517.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,185,942.
6	Minimum Investment return. Enter 5% of line 5	6	159,297.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certai	n
1	Minimum investment return from Part X, line 6	1	159,297.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)	ļ	
C	Add lines 2a and 2b	2c	1,436.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	157,861.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	157,861 <u>.</u>
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	157,861.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	ŀ	_
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	482,706.
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:		
а	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	482,706.
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	1,436.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	481,270.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies	for the section

Form **990-PF** (2015)

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,			<del></del>	
line 7				157,861.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010 3, 731.				
b From 2011 82,016.				
c From 2012 63,781.				
d From 2013 224,566.				
e From 2014 207, 007.				
f Total of lines 3a through e	581,101.			•
4 Qualifying distributions for 2015 from	301/1010			
Part XII, line 4: ►\$ 482,706.				•
a Applied to 2014, but not more than line 2a			0.	-
b Applied to undistributed income of prior				
years (Election required - see instructions)	i	0.	,	•
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		- '	• • •
d Applied to 2015 distributable amount				157,861.
e Remaining amount distributed out of corpus	324,845.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))		,		
6 Enter the net total of each column as indicated below;			, - :	1,
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	905,946.			· · · · · · · · · · · · · · · · · · ·
b Prior years' undistributed income. Subtract			´	
line 4b from line 2b		0.		<u>.</u>
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 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.	. <u> </u>		0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2016				<u> </u>
7 Amounts treated as distributions out of		İ		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0	}		
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010	2 721			
not applied on line 5 or line 7	3,731.			<del></del>
9 Excess distributions carryover to 2016.	002 215			
Subtract lines 7 and 8 from line 6a	902,215.		<del>  </del>	
0 Analysis of line 9: a Excess from 2011 82, 016.		1		
	J	,		
b Excess from 2012 63, 781. c Excess from 2013 224, 566.				
d Excess from 2014 207, 007.	ļ			
e Excess from 2015 324, 845.	İ	1		
E LACCOS HOM 2010		· · · · · · · · · · · · · · · · · · ·		5- 000 DE (0015)

Form 990-PF (2015)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

c Any submission deadlines:

C/O JAMACHA LLC

26-1614525 Page 11

Part XV Supplementary Informatio	n (continued)			· · · · · · · · · · · · · · · · · · ·
3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
		1		
BOSTON COLLEGE FD	N/A	PUBLIC CHARITY	RUTH REDMOND BLOOM	
140 COMMONWEALTH AVE CHESTNUT HILL, MA 02467			FAMILY ATHLETICS SCHOLARSHIP FUND	50,000.
CHESINOI HIBD, FA 02407	<del></del>	<u> </u>	DCHODARSHIP FUND	
		1		
BOSTON UNIVERSITY	N/A	PUBLIC CHARITY	BABCOCK FIELD FUND	
595 COMMONWEALTH AVE		}	1	
BOSTON, MA 02215			<del></del>	75,000.
			İ	
BOSTON UNIVERSITY	N/A	PUBLIC CHARITY	RIJOM FAMILY	
595 COMMONWEALTH AVE	,,,,		LEADERSHIP ACADEMY	
BOSTON MA 02215				200,000,
ESSEX FELLS FOUNDATION FOR	N/A	PUBLIC CHARITY	UNRESTRICTED	
EDUCATIONAL EXCELLENCE			1	
P.O. BOX 174			1	
ESSEX FELLS, NJ 07021		ļ. <del></del> .		250,
ESSEX FELLS VOLUNTEER FIRE COMPANY	N/A	PUBLIC CHARITY	UNRESTRICTED	
255 ROSELAND AVENUE				
ESSEX FELLS NJ 07021				5,000
Total SEE CO	NTINUATION SHEE	<u> </u>	<b>▶</b> 3a	462 384.
<b>b</b> Approved for future payment				
MONTE				
NONE			1	
			1	
			1	
				<del></del>
Total			<b>▶</b> 3b	0.
				rm <b>990-PF</b> (2015)

### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclud	ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
•			+		
ab					<del></del> _
	· [			<del></del>	
				<del></del>	<del></del>
		<del></del>	<del>  </del>		<del></del> _
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	33.	
4 Dividends and interest from securities			14	82,407.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property		<u></u>			
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	17.	
8 Gain or (loss) from sales of assets other					
than inventory .			18	91,208.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory		·			
1 Other revenue:					
a					
b					
c				·	
d					
e		···			
2 Subtotal. Add columns (b), (d), and (e)			0.	173,665.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	<u>173,665.</u>
(See worksheet in line 13 instructions to verify calculations.)					

### Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).						

Form **990-PF** (2015)

Ра	IIV AVII	Information R Exempt Organ		sters 10 a	and Transaction	s and Rei	ationsi	nips With No	ncharitable	B
1	Did the or	ganization directly or ind		of the followin	n with any other organiz	zation describ	ed in secti	on 501(c) of		Yes No
•		other than section 501(c					JG 111 JUGU	0.001(0) 0.	1	
а		from the reporting found			- · ·	guinzanono.			1	
a	(1) Cash	, ,	auton to a nonchana	olo ovembron	gamzadon on				1a(1)	x
	(2) Other		•				•	•	1a(2)	
h	Other tran				• •			•	18(2)	<del>                                     </del>
U		of assets to a noncharita	ahle evemnt organizat	tion					1b(1)	x
		nases of assets from a no	•			••		•	1b(1)	X
		il of facilities, equipment,		n gamzanon .				٠	1b(2)	X
		bursement arrangements		•				٠	1b(4)	X
	` '	s or loan guarantees		• •	•	•			1b(5)	X
	•	rmance of services or me	embershin or fundrau	Sina solicitatio	ne				1b(6)	X
	• •	f facilities, equipment, ma	•	-					1c	X
	_	wer to any of the above is	-	•		l always show	the fair m	arket value of the	<b></b> -	
•		s given by the reporting f								,010,
	<del></del> -	) the value of the goods,	<del>,                                     </del>		<del></del>					
(a) L	ine no	(b) Amount involved	(c) Name of		exempt organization	(0)	Description	of transfers, transaction	ons, and sharing an	rangements
		· <del></del>		N/A						
			<del>                                     </del>							
				<u>-</u> -				<del></del>		
								· <del>-</del>		
							<del></del>		<del></del>	
		<del></del>								<del></del>
				·			<del>-</del>	<del></del>	<del></del>	<del></del>
			<del>  </del>					<del></del>		<del></del>
			<del> </del>	<del></del>	<del></del>					
		<del></del>		<del></del>	<del></del>					
20	Is the four	ndation directly or indirec	the affiliated with or i	related to one	or more tay-evemnt org	anizatione de	scribed	<del></del>	<u>-</u>	
<b>2</b> a		501(c) of the Code (othe	•		, ,	janizauons us	SCHOOL		Yes	X No
h		omplete the following sch		/(O)) or in acci	1011 027 1					110
	11 103, 0	(a) Name of org			(b) Type of organization	n		c) Description of re	elationship	
		N/A	<u> </u>			_		· <u> </u>		
	<u></u>		<del> </del>		<u> </u>			<del></del>	<del></del>	
ο:	1	penalties of perjury, I declare elief, it is true, co <del>rrect, a</del> nd cor							May the IRS o	discuss this
Sig He	gn   👢	119			1				shown below	(see instr )?
пе		// V / /					RUSTE	E	X Yes	L No
	Sigi	Death of officer or trustee		Dranararia a	Date	Title		Check   If	PTIN	
		Print/Type preparer's na	anic	Preparer's si	ynatur <del>c</del>	Date		self- employed	I TIN	
Pa	id	CITIESTERS ASSE	) T C K	CULLIAN	NYDICK	06/02	116	con omployed	P00037	969
	eparer	STEVEN NYD Firm's name ► MAD				[0.67.04 PC	2 / I O	Firm's EIN ▶ 2		
	e Only	I IIII S IIAIIC P PIAL	DALUMI, N	IDICK	a teneratera' i	. •		I I I I I I I I I I I I I I I I I I I	7 2000T	O-3
_		Firm's address ► 30	COLUMBIA	TURNP	IKE			<del>                                     </del>		
		1	ORHAM PAR					Phone no. 97	3_822-8	080
		<del></del>								<b>)-PF</b> (2015)

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to status of contribution Amount any foundation manager Name and address (home or business) recipient or substantial contributor NEWARK ACADEMY N/A PUBLIC CHARITY CAPITAL FUND 91 SOUTH ORANGE AVE LIVINGSTON NJ 07039 87,500, PUBLIC CHARITY ANNUAL FUND NEWARK ACADEMY N/A 91 SOUTH ORANGE AVE LIVINGSTON NJ 07039 25,000. PUBLIC CHARITY ENDOWMENT FUND N/A NEWARK ACADEMY 91 SOUTH ORANGE AVE 9 534, LIVINGSTON, NJ 07039 PUBLIC CHARITY UNRESTRICTED THE MEGHAN P. BIRDSALL SCHOLARSHIP N/A FUND P.O. BOX 613 100. ESSEX FELLS, NJ 07021 PUBLIC CHARITY UNRESTRICTED THE SEEING EYE FOUNDATION N/A P.O. BOX 375 MORRISTOWN NJ 07963-0375 10,000. Total from continuation sheets 132 134.

### 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, or 990-PF) and

its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Employer identification number

Name of the organization

JAMACHA BLOOM FAMILY FOUNDATION

C/O JAMACHA LLC

26-1614525

Organiza	tion type (check or	ne):
Filers of:		Section:
Form 990	or 990-EZ	501(c)( ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 990	-PF	X 501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
<b>Note.</b> On	ly a section 501(c)(	covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General	Rule	
	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions.
Special I	Rules	
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1 Complete Parts I and II.
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.
	year, contributions is checked, enter h purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., emplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.
Caution.	An organization th	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

JAMACHA BLOOM FAMILY FOUNDATION

C/O JAMACHA LLC

Employer Identification number

26-1614525

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMACHA BLOOM CHARITABLE LEAD ANNUITY TRUST  161 EAGLE ROCK AVE  ROSELAND, NJ 07068	\$ 32,427.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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 Oncash 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)

FORM 990-PF INTERES	T ON SAVINO	S AND	EMPOR	ARY CAS	SH IN	VESTMENTS	STA'	PEMENT	1
SOURCE			(A) EVENUE R BOOK			(B) VESTMENT COME	(C) ADJUSTED NET INCOM		E
JPMORGAN (67035) INT	EREST	· · · · · ·	-	8. 25.		8. 25.			
TOTAL TO PART I, LIN	IE 3		•	33.		33.			
FORM 990-PF	DIVIDENDS	AND IN	TEREST	FROM S	SECUR	ITIES	STA	TEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	1S	(A) REVEN PER BO	WE	(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
JPMORGAN (67034) AMORTIZATION OF BOND DISCOUNT	<881.>	•	0.	•	<881.	> <88	1.>		·
JPMORGAN (67034) DIVIDENDS JPMORGAN (67034)	73,157.	1,	321.	71,836					
INTEREST JPMORGAN (67035) DIVIDENDS LESS: ACCRUED	13,023. 420.		0.	13,	,023. 420.	·			
INTEREST PURCHASED (JPM)	<1,991.>	•	0.	<1,	,991.	> <1,99	1.>		
TO PART I, LINE 4	83,728.	1.	321.	82	,407.	82,40	7.		
FORM 990-PF		ОТНЕ	R INCO	ME			STA	TEMENT	3
DESCRIPTION			RE	(A) VENUE BOOKS		(B) ET INVEST- ENT INCOME		(C) ADJUSTE ET INCO	
OTHER				-	17.		•		
TOTAL TO FORM 990-PE	F, PART I, I	LINE 11			L7.	17	•		

FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	9,500.	9,500.		0.
TO FORM 990-PF, PG 1, LN 16B	9,500.	9,500.		0.
FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EMPLOYER PAYROLL TAXES FOREIGN TAXES	3,275. 181.	1,638. 181.		1,637.
TO FORM 990-PF, PG 1, LN 18 =	3,456.	1,819.		1,637.
FORM 990-PF	OURD E		-	
10141 330 11	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE
	(A) EXPENSES	(B) NET INVEST-	ADJUSTED	(D) CHARITABLE
DESCRIPTION  INVESTMENT EXPENSES PAYROLL PROCESSING FEES	(A) EXPENSES PER BOOKS 40. 61.	(B) NET INVEST- MENT INCOME  40. 31.	ADJUSTED	(D) CHARITABLE PURPOSES  0. 30.
DESCRIPTION  INVESTMENT EXPENSES PAYROLL PROCESSING FEES MISCELLANEOUS	(A) EXPENSES PER BOOKS  40. 61. 211.	(B) NET INVEST- MENT INCOME  40. 31. 106.	ADJUSTED	(D) CHARITABLE PURPOSES  0. 30. 105.
DESCRIPTION  INVESTMENT EXPENSES PAYROLL PROCESSING FEES MISCELLANEOUS TO FORM 990-PF, PG 1, LN 23	(A) EXPENSES PER BOOKS  40. 61. 211.	(B) NET INVEST- MENT INCOME  40. 31. 106.  177.	ADJUSTED	(D) CHARITABLE PURPOSES  0. 30. 105.
DESCRIPTION  INVESTMENT EXPENSES PAYROLL PROCESSING FEES MISCELLANEOUS TO FORM 990-PF, PG 1, LN 23  FORM 990-PF	(A) EXPENSES PER BOOKS  40. 61. 211.	(B) NET INVEST- MENT INCOME  40. 31. 106.  177.	ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  0. 30. 105.  135.  STATEMENT 7

FORM 990-PF C	CORPORATE BONDS	STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
JPMORGAN (67034)	607,267.	752,670.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C 607,267.	752,670.

JP MORGAN CLEARING CORP	OH4-RM00	P O BOX 183211	COLUMBUS, OH 43218	FOR UNDELIVERABLE MAIL ONLY

Account No: 220-67034
Account Name JAMACHA BLOOM FAMILY
Recipient's Identification Number XX-XXX4525

Account Executive No PN2

03/01/16

CORRECTED:

Telephone Number (212) 272-0495

J.P.Morgan

# 2015 Supplemental Gain or (Loss) Information Short-Term Gain or (Loss) from Transactions not Reported to IRS

PAUZEDS IN/(UOSS)	(5,534 73)	(7,038 32)	1,988 03	(11,976.19)	3,710.94	5,765 75	(1,501 34)	9,244 02	4,594,06	1,020 21	272.43
ostorolhar Resis	23,018 40	24,522.00	50,000.00	43,317.60	53,483.00	64,361.85	9,101.50 T	0.00	00 0	000	267,804.35
siProceetsillessi Ikstonandopion Ificinium	17,483.67	17,483.68	51,988.03	31,341.41	57,193.94	70,127.60	7,600.16	9,244.02	4,594 06	1,020 21	268,076.78
	3,000,00000	3,000 00000	2,000 00000	2,000.00000	1,000.00000	1,500 00000	344 00000	20 00000	20 00000	30.0000	(5:
A Symbol Company	AEG 007924103	AEG 007924103	BACPRW 060505344	CVA 22282E102	JUNO 48205A109	729251108	OUT 69007J106				Transactions Gain or (Loss)
*Description	***AEGON NV NY REGISTRY SHS	***AEGON NV NY REGISTRY SHS	BANK OF AMERICA CORPORATION DEP SHS REPSTG 1/1000TH INT IN SHARE OF 6 625% NON CUM PRFD W	COVANTA HOLDING CORPORATION	JUNO THERAPEUTICS INC COM	PLUM GREEK TIMBER CO INC COM	OUTFRONT MEDIA INC COM	CALL AAPL 08/21/15 140 APPLE INC		CALL AAPL 11/20/15 120 APPLE INC	10 ITEMS - Total Short-Term Not Reported
Date of Acquisition?	06/23/15	05/11/15	09/02/14	05/13/15	07/14/15	04/14/15	01/02/15	04/27/15	08/13/15	09/10/15	
Date of Sale on	11/24/15	11/24/15	04/14/15	*11/24/15	12/02/15	11/09/15	12/16/15	08/24/15 04/27/15	11/23/15 08/13/15	10/23/15	

	Account No	220-67034
D MOBCAN CLEABING CORP	Account Name	JAMACHA BLOOM FAMILY
OH4-RM00	Recipient's Identification Number:	XX-XXX4525
P O BOX 183211		
COLUMBUS, OH 43218		0
FOR UNDELIVERABLE MAIL ONLY	Account Executive No	PN2
Telephone Number (212) 272-0495	CORRECTED:	03/01/16

### J.P.Morgan

# 2015 Supplemental Gain or (Loss) Information Long-Term Gain or (Loss) from Transactions not Reported to IRS

KROTIVAJ SKUREĐ	15,722.12	4,194.80	22,252 19	2,444.67	18,768.16	8,773.35	(0.16)	(2.91)	16.13	(26 15)	(11 06)	(6.71)	(33.36)
ිලියෝග් ම්ශින් Basis GA	58,921 50 T	36,299.85 T	48,275 00 T	80,188.00 T	40,444.75 T	54,112 50 <b>T</b>	140.82 <b>T</b>	894.38 T	1,484.91 <b>T</b>	1,887.52 T	2,048 26 T	2,057.08 T	2,09214 T
ss Proceeds Less 11 (17) in the intervention of the Premium	74,643 62	40,494.65	70,527 19	82,632.67	59,212,91	62,885.85	140 66	891 47	1,501.04	1,861 37	2,037 20	2,050.37	2,058 78
Erectify Eorgi	2,000 00000	1,000 00000	2,500.00000	2,000 00000	2,500 00000	2,500.00000	15.15800	96.06700	161 75500	200.58700	219 53500	220 95400	221.86000
Symbol Symbol	BXLT 07177M103	BAX 071813109	CSCO 17275R102	KO 191216100	GE 369604103	ISG 456837509	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191
KDescription		BAXTER INTERNATIONAL INC	CISCO SYSTEMS INC	COCA COLA COMPANY (THE)	GENERAL ELECTRIC COMPANY COM	***ING GROEP NV NC5 6 125% PERP DEBT SECS	"LORD ABBETT INVT TR FLTG RATE FD CL A	**LORD ABBETT INVT TR FLTG RATE FD CL A	"LORD ABBETT INVT TR FLTG RATE FD CL A	**LORD ABBETT INVT TR FLTG RATE FD CL A	"LORD ABBETT INVT TR FLTG RATE FD CL A	••LORD ABBETT INVT TR FLTG RATE FD CL A	"LORD ABBETT INVT TR FLTG RATE FD CL A
Date of Acquisition,	11/06/13	11/06/13	08/23/12	11/07/13	08/30/11	09/03/10	03/31/10	12/17/10	06/29/12	04/29/11	04/30/10	12/17/10	01/31/11
Date of Sale or Exchange	12/17/15 <b>S</b>	08/18/15	10/20/15	10/07/15	02/18/15	01/08/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15

	Account No: Account Name	220-67034 JAMACHA BLOOM FAMILY
J P MORGAN CLEARING CORP O H4-RM00	Recipient's Identification Number	XX-XXX4525
P.O. BOX 183211 COLUMBUS, OH 43218 FOR UNDELIVERABLE MAIL ONLY	Account Executive No	PN2
Telephone Number (212) 272-0495	CORRECTED:	03/01/16

J.P.Morgan

2015 Supplemental Gain or (Loss) Information (continued)

Long-Term Gain or (Loss) from Transactions not Reported to IRS

NVIVOSSO)	(31.24)	(11 41)	(4.63)	(25 38)	4 52	(1398)	(1172)	44 34	(7 16)	71 67	36.57	24.37	111 36
Cost or Other R	2,09634 T	2,113 63 T	2,110 47 T	2,159 32 T	2,132 00 T	2,163.21 T	2,170 99 T	2,125.55 T	2,19473 T	2,148.09 T	2,23161 T	2,244.91 T	2,186.94 T
ිල්රයින් පිැරීමේස් පිරිධියින් ලිරාත්ත් නේ පිරිධියන් පිළිපෙන්න අත්	2,065 10	2,102 22	2,105 84	2,133 94	2,136 52	2,149 23	2,159.27	2,169 89	2,187 57	2,219.76	2,268.18	2,269 28	2,298.30
<b>Overally</b>	222 54100	226 54100	226 93200	229 96000	230 23800	231 60700	232.68900	233 83400	235 73900	239 20800	244 42600	244.54400	247 67200
Synthogi	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191
nojidijoje Desprija	"LORD ABBETT INVT TR FLTG RATE FD CL A	"LORD ABBETT INVT TR FLTG RATE FD CL A	"LORD ABBETT INVT TR FLTG RATE FD CL A	NVT TR - A	"LORD ABBETT INVT TR FLTG RATE FD CL A	•LORD ABBETT INVT TR FLTG RATE FD CL A	*LORD ABBETT INVT TR FLTG RATE FD CL A	**LORD ABBETT INVT TR FLTG RATE FD CL A	**LORD ABBETT INVT TR FLTG RATE FD CL A	••LORD ABBETT INVT TR FLTG RATE FD CL A	**LORD ABBETT INVT TR FLTG RATE FD CL A	••LORD ABBETT INVT TR FLTG RATE FD CL A	**LORD ABBETT INVT TR FLTG RATE FD CL A
Dete of Acquisition	02/28/11	11/30/10	07/29/11	03/31/11	09/30/10	10/29/10	12/31/10	06/30/10	06/30/11	11/30/11	05/28/10	07/30/10	09/30/11
Date of Sale of Exchange	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15

If you are required to file a return, a negligence penalty or other sanctions may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Page 6 of 26

		70000	
	Account No	ZZU-b/034	
ACROAN CLEARING CORP	Account Name:	JAMACHA BLOOM FAMILY	
OH - MOX 00231	Recipient's Identification Number	XX-XXX4525	IDMor
FO BOX 183218 COLUMBUS, OH 43218 FOR UNDELIVERABLE MAIL ONLY	Account Executive No	PN2	
Telephone Number (212) 272-0495	CORRECTED	03/01/16	

# Long-Term Gain or (Loss) from Transactions not Reported to IRS 2015 Supplemental Gain or (Loss) Information (continued)

Realizabo Gaingloss)	47.54	(22 69)	23.06	113.51	25 82	70 89	13 08	(0.10)	33 36	8.35	130 74	(1,317 91)	770 03
Gost or Other Basis	2,279.04 T	2,352.52 T	2,364.31 <b>T</b>	2,282 37 T	2,378.92 T	2,369.12 T	2,432 81 T	2,446.80 T	2,555.03 ⊤	2,60488 T	61,679.65 T	101,312.91 T	239,224 97 T
ošš Procedes (Less nntssion end Opton Premlum	2,326.58	2,329.83	2,387.37	2,395.88	2,404 74	2,440 01	2,445 89	2,446.70	2,588 39	2,613 23	61,810 39	00 566'66	239,995 00
Grendly Goom	250.71900	251.06900	257.27000	258.18700	259 14200	262.94300	263 57600	263.66400	278 93300	281 60900	6,660 86900	10,940.91900	25,834 23000
Symbol Symbol	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191	LFRAX 543916191
Bescription (Fig. 1)	**LORD ABBETT INVT TR FLTG RATE FD CL A	"LORD ABBETT INVT TR FLTG RATE FD CL A	"LORD ABBETT INVT TR FLTG RATE FD CL A	BBETT INVT	*LORD ABBETT INVT TR FLTG RATE FD CL A	••LORD ABBETT INVT TR FLTG RATE FD CL A	**LORD ABBETT INVT TR FLTG RATE FD CL A	**LORD ABBETT INVT TR FLTG RATE FD CL A	INVT TR SL A	N N A √	INVT TR L A	ABBETT INVT TR TE FD CL A	**LORD ABBETT INVT TR FLTG RATE FD CL A
Acquisition	10/31/11	05/31/11	08/31/10	08/31/11	_	-	02/29/12	04/30/12	05/31/12		03/25/10	03/25/10	03/25/10
Date of Sale o	06/01/15	06/01/15	06/01/15 08/31/10	06/01/15	06/01/15 01/31/12	06/01/15 12/30/11	06/01/15	06/01/15	06/01/15	06/01/15	06/01/15	01/28/15 03/25/10	05/20/15

If you are required to file a return, a negligence penalty or other sanctions may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

P MORGAN CLEARING CORP	Account Name
OH4-RM00	Recipient's Identification
P O BOX 183211	
COLUMBUS, OH 43218	
FOR UNDELIVERABLE MAIL ONLY	Account Executive No

JAMACHA BLOOM FAMILY 220-67034 s Identification Number. Vame

XX-XXX4525

PN2

03/01/16

CORRECTED.

Telephone Number (212) 272-0495

J.P.Morgan

### Long-Term Gain or (Loss) from Transactions not Reported to IRS 2015 Supplemental Gain or (Loss) Information (continued)

REALIZED "X	(20,536.34)	16,793.35	3,247 47	(9,277.51)	12,871.46	14,341 03	00 0	000	89,613.52
Gostion Other Residence Other Gests	64,723 35 T	61,550.40 T	2,559 92 T	50,227 50	32,383.00 T	32,383.00 T	100,000 00 T	150,000 00 T	1,277,035.00
Selfroceeds (Less Mission and Qotton Prendium	44,187.01	78,343.75	5,807 39	40,949.99	45,254,46	46,724.03	100,000 00	150,000.00	1,366,648.52
Governity* ©com	2,000 00000	2,000.00000	250.00000	1,500 00000	1,000.00000	1,000.00000	100,000 00000	150,000 00000	(sso
Jishe H	OUT 69007J106	RSG 760759100	TIME 887228104	щÖ	ZTS 98978V103	ZTS 98978V103	46632FDH5	22547W4N0	d Transactions Gain or (Loss)
rojidingsagij	OUTFRONT MEDIA INC COM	REPUBLIC SERVICES INC	TIME INC COM	TWENTY FIRST CENTURY FOX INC CLASS A	ZOETIS INC CL A	ZOETIS INC CL A	JPMORGAN CHASE BK NEW YORK N Y CALLABLE CONTINGENT INT NTS LKD LEAST PERFORMING OF S&P500	***CREDIT SUISSE GROUP AG N Y BRH VR 012714-012616	47 ITEMS - Total Long-Term Not Reported
Oateor Dateor Acquisition	07/17/14	10/01/10	10/11/10	10/23/14	01/07/14	01/07/14	11/22/13	01/17/14	
iDate of Sale ork	12/16/15	07/06/15	06/23/15 10/11/10		02/24/15	07/14/15 <b>S</b>	03/02/15	04/27/15	