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-EZ

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

For organizations with gross receipts less than $100,000 and total assets less than $250,000 at the end of the year.

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

For the 2005 calendar year, or tax year beginning , 2005, and ending

---

**B Name of organization**

United States District Court for the

District of New Jersey Society

144 St., Atlantic City, New Jersey, 012400, NJ

Room/suite

---

**D Employer identification number**

22-2857248

**E Telephone number**

(973) 881-1100

**F Group Exemption Number**

---

**G Accounting method:**

X, CASH, Accrual

**H Check**

X, if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

---

**I Website:**

None

---

**J Organization type**

check only one -

X, 501(c)(3) (insert no.) 4947(a)(1) or 527

---

**K Check**

if the organization's gross receipts are normally not more than $25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

---

**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if $100,000 or more, file Form 990 instead of Form 990-EZ.**

---

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

(See page 38 of the instructions.)

---

**1 Contributions, gifts, grants, and similar amounts received**

2,475

---

**2 Program service revenue including government fees and contracts**

0

---

**3 Membership dues and assessments**

5,550

---

**4 Investment income**

0

---

**5 Gross amount from sale of assets other than inventory**

---

**5a**

---

**5b Less: cost or other basis and sales expenses**

0

---

**5c Gain or (loss) from sale of assets other than inventory**

---

**5c**

---

**6 Special events and activities (attach schedule). If any amount is from gaming, check here**

---

**6a Gross revenue (not including $ of contributions reported on line 1)**

---

**6b Less: direct expenses other than fundraising expenses**

---

**6c Net income (or loss) from special events and activities**

---

**6c**

---

**7 Gross sales of inventory, less returns and allowances**

0

---

**7a**

---

**7b Less: cost of goods sold**

0

---

**7c Gross profit or (loss) from sales of inventory**

---

**7c**

---

**8 Other revenue (describe)**

---

**8**

---

**9 Total revenue (add lines 1, 2, 3, 4, 5a, 5b, 5c, 6a, 6b, 6c, 7a, 7b, and 8)**

8,025

---

**10 Grants and similar amounts paid (attach schedule)**

---

**10**

---

**11 Benefits paid to or for members**

---

**11**

---

**12 Salaries, other compensation, and employee benefits**

---

**12**

---

**13 Professional fees and other payments to independent contractors**

---

**13**

---

**14 Occupancy, rent, utilities, and maintenance**

---

**14**

---

**15 Printing, publications, postage, and shipping**

---

**15**

---

**16 Other expenses (describe Books, Meetings, Public Events, Displays)**

---

**16**

---

**17 Total expenses (add lines 10 through 16)**

42,302

---

**18 Excess or (deficit) for the year (line 9 less line 17)**

-35,273

---

**19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)**

53,193

---

**19**

---

**20 Other changes in net assets or fund balances (attach explanation)**

329

---

**20**

---

**21 Net assets or fund balances at end of year (combine lines 18 through 20)**

17,651

---

**Part II Balance Sheets**

(See page 41 of the instructions.)

(A) Beginning of year (B) End of year

---

**22 Cash, savings, and investments**

53,193 17,651

---

**23 Land and buildings**

0 0

---

**24 Other assets (describe )**

0 0

---

**25 Total assets**

53,193 17,651

---

**26 Total liabilities (describe )**

0 0

---

**27 Net assets or fund balances (line 27 of column (B) must agree with line 21)**

53,193 17,651

---

* 2004 expense check cleared in 2005
### Part III  Statement of Program Service Accomplishments (See page 42 of the instructions.)

What is the organization's primary exempt purpose?  **USDC of DNJ Historical Preservation**

Describe what was achieved in carrying out the organization’s exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

#### 28  Historical exhibits, other public educational events and historic preservation activities

<table>
<thead>
<tr>
<th>Grants($)</th>
<th>If this amount includes foreign grants, check here</th>
<th>28a</th>
<th>6,927</th>
</tr>
</thead>
</table>

#### 29

<table>
<thead>
<tr>
<th>Grants($)</th>
<th>If this amount includes foreign grants, check here</th>
<th>29a</th>
<th>0</th>
</tr>
</thead>
</table>

#### 30

<table>
<thead>
<tr>
<th>Grants($)</th>
<th>If this amount includes foreign grants, check here</th>
<th>30a</th>
<th>0</th>
</tr>
</thead>
</table>

#### 31  Other program services (attach schedule)

<table>
<thead>
<tr>
<th>Grants($)</th>
<th>If this amount includes foreign grants, check here</th>
<th>31a</th>
<th>0</th>
</tr>
</thead>
</table>

#### 32  Total program service expenses (add lines 28a through 31a)

<table>
<thead>
<tr>
<th></th>
<th>32</th>
<th>6,927</th>
</tr>
</thead>
</table>

### Part IV  List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 42 of the instructions.)

#### (A) Name and address

**SEE ATTACHED SCHEDULE**

<table>
<thead>
<tr>
<th>(B) Title and average hours per week devoted to position</th>
<th>(C) Compensation (if not paid, enter 0)</th>
<th>(D) Contributions to employee benefit plans &amp; deferred compensation</th>
<th>(E) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

### Part V  Other Information  (Note the attachment requirement in General Instruction V. page 14.)

#### 33  Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>33</td>
<td>X</td>
</tr>
</tbody>
</table>

#### 34  Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformal copy of the changes.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>34</td>
<td>X</td>
</tr>
</tbody>
</table>

#### 35  If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others, but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.

| a | Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements? |
|---|-----------------------------------------------------------------------------------------------------------------------------|---|
| 35a | ![ ] Yes  
| ![ ] No |

<table>
<thead>
<tr>
<th>b</th>
<th>Did &quot;Yes,&quot; has it filed a tax return on Form 990-T for this year?</th>
</tr>
</thead>
</table>
| 35b | ![ ] Yes  
| ![ ] No |

#### 36  Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>36</td>
<td>X</td>
</tr>
</tbody>
</table>

#### 37 a  Enter amount of political expenditures, direct or indirect, as described in the instructions.

| ![ ] 37a | None |

#### 37 b  Did the organization file Form 1120-POL for this year?

| ![ ] 37b | X |

#### 38 a  Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?

| ![ ] 38a | X |

#### 39  501(c)(7) organizations Enter:

<table>
<thead>
<tr>
<th>a</th>
<th>Initiation fees and capital contributions included on line 9</th>
</tr>
</thead>
<tbody>
<tr>
<td>39a</td>
<td>![ ] N/A</td>
</tr>
</tbody>
</table>

#### 40 a  501(c)(3) organizations Enter amount of tax imposed on the organization during the year under:

| section 4911 | ![ ] None |
| section 4912 | ![ ] None |
| section 4955 | ![ ] None |

<table>
<thead>
<tr>
<th>b</th>
<th>Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If &quot;Yes,&quot; attach an explanation.</th>
</tr>
</thead>
<tbody>
<tr>
<td>40b</td>
<td>![ ] None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>c</th>
<th>Enter the amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958.</th>
</tr>
</thead>
<tbody>
<tr>
<td>40c</td>
<td>![ ] None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>d</th>
<th>Enter: Amount of tax on line 40c reimbursed by the organization.</th>
</tr>
</thead>
<tbody>
<tr>
<td>40d</td>
<td>![ ] None</td>
</tr>
</tbody>
</table>

---

Form 990-EZ (2005)
Part V Other Information (Note the attachment requirement in General Instruction V, page 14.) (Continued)

41 List the states with which a copy of this return is filed. ► New Jersey

42a The books are in care of ► Sean R. Kelly Telephone no ► (973) 622-3333
Located at ► Salber, Schlesinger, One Gateway Ctr, Newark, NJ ZIP + 4 ► 07102-5311

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? ◄ Yes □ No

See the instructions for exceptions and filing requirements for Form TD F 90-22.1.

42c At any time during the calendar year, did the organization maintain an office outside of the U.S.? ◄ Yes □ No

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ◄ Yes □ No

and enter the amount of tax-exempt interest received or accrued during the tax year ◄ Yes □ No

Please Sign Here

Signature of officer Date

Sean R. Kelly, Treasurer

Type or print name and title

Paid Preparer's Use Only

Preparer's signature Firm's name (or yours if self-employed), address, and ZIP + 4 Date Check if self-employed Preparer's SSN or PTIN (See Gen Inst W)

M. Carter & English, LLP 11/15/04 □ McCarter & English, LLP EIN ▬ 22-1534652
PO Box 652, Newark, NJ 07102 Phone no ▬ (973) 622-4444

Form 990-EZ (2005)
**Part I**  Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

<table>
<thead>
<tr>
<th>(a) Name and address of each employee paid more than $50,000</th>
<th>(b) Title and average hours per week devoted to position</th>
<th>(c) Compensation</th>
<th>(d) Contributions to employee benefit plans &amp; deferred compensation</th>
<th>(e) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
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<td></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of other employees paid over $50,000 . . . . . .</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part II-A  Compensation of the Five Highest Paid Independent Contractors for Professional Services**
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

<table>
<thead>
<tr>
<th>(a) Name and address of each independent contractor paid more than $50,000</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of others receiving over $50,000 for professional services</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

**Part II-B  Compensation of the Five Highest Paid Independent Contractors for Other Services**
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

<table>
<thead>
<tr>
<th>(a) Name and address of each independent contractor paid more than $50,000</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of other contractors receiving over $50,000 for other services</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.
### Part III Statements About Activities (See page 2 of the instructions.)

1. During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities $_________  (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B.)  

   - Yes: X
   - No:  

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

2. During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

   a. Sale, exchange, or leasing of property?  
   - Yes: X
   - No:  

   b. Lending of money or other extension of credit?  
   - Yes: X
   - No:  

   c. Furnishing of goods, services, or facilities?  
   - Yes: X
   - No:  

   d. Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?  
   - Yes: X
   - No:  

   e. Transfer of any part of its income or assets?  
   - Yes: X
   - No:  

3. a. Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)  
   - Yes: X
   - No:  

   b. Do you have a section 403(b) annuity plan for your employees?  
   - Yes: X
   - No:  

   c. During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?  
   - Yes: X
   - No:  

4. a. Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?  
   - Yes: X
   - No:  

   b. Do you provide credit counseling, debt management, credit repair, or debt negotiation services?  
   - Yes: X
   - No:  

### Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

5. A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)  
6. A school. Section 170(b)(1)(A)(ii). (Also complete Part V)  
7. A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).  
8. A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).  
9. A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(vii). Enter the hospital's name, city, and state.  
10. An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)  
11a. An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vii). (Also complete the Support Schedule in Part IV-A.)  
12. An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)  
13. An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization:  
   - Type 1  
   - Type 2  
   - Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

<table>
<thead>
<tr>
<th>(a) Name(s) of supported organization(s)</th>
<th>(b) Line number from above</th>
</tr>
</thead>
</table>

14. An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)
**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2004</th>
<th>(b) 2003</th>
<th>(c) 2002</th>
<th>(d) 2001</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)</td>
<td>25,597</td>
<td>16,577</td>
<td>35,755</td>
<td>880</td>
<td>78,809</td>
</tr>
<tr>
<td>16 Membership fees received</td>
<td>10,600</td>
<td>8,975</td>
<td>3,700</td>
<td>0</td>
<td>23,275</td>
</tr>
<tr>
<td>17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>19 Net income from unrelated business activities not included in line 18</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>23 Total of lines 15 through 22</td>
<td>36,197</td>
<td>25,552</td>
<td>39,455</td>
<td>880</td>
<td>102,084</td>
</tr>
<tr>
<td>24 Line 23 minus line 17</td>
<td>36,197</td>
<td>25,552</td>
<td>39,455</td>
<td>880</td>
<td>102,084</td>
</tr>
<tr>
<td>25 Enter 1% of line 23</td>
<td>361.97</td>
<td>255.52</td>
<td>394.55</td>
<td>8.80</td>
<td>871.60</td>
</tr>
</tbody>
</table>

**26 Organizations described on lines 10 or 11:**

- a Enter 2% of amount in column (e), line 24
- b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return.
- c Total support for section 509(a)(1) test Enter line 24, column (e)
- d Add. Amounts from column (e) for lines. 18
- e Public support (line 26c minus line 26d total)
- f Public support percentage (line 26e numerator divided by line 26d denominator)

**27 Organizations described on line 12:**

- a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:

  - (2004) N/A
  - (2003) N/A
  - (2002) N/A
  - (2001) N/A

- b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) $5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:

  - (2004) N/A
  - (2003) N/A
  - (2002) N/A
  - (2001) N/A

- c Add. Amounts from column (e) for lines: 15
- d Add Line 27a total and line 27b total
- e Public support (line 27c minus line 27d total)
- f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)
- g Public support percentage (line 27e numerator divided by line 27f denominator)
- h Investment income percentage (line 18, column (e) numerator divided by line 27f denominator)

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

---

JSA 5E1221 1 000  
Schedule A (Form 990 or 990-EZ) 2005
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>29</strong> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>30</strong> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>31</strong> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; please describe; if &quot;No,&quot; please explain. (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>32</strong> Does the organization maintain the following.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Records indicating the racial composition of the student body, faculty, and administrative staff?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Copies of all material used by the organization or on its behalf to solicit contributions?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;No&quot; to any of the above, please explain. (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>33</strong> Does the organization discriminate by race in any way with respect to:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Students' rights or privileges?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Admissions policies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Employment of faculty or administrative staff?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Scholarships or other financial assistance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Educational policies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Use of facilities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Athletic programs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Other extracurricular activities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to any of the above, please explain. (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>34 a</strong> Does the organization receive any financial aid or assistance from a governmental agency?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Has the organization's right to such aid ever been revoked or suspended?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to either 34a or b, please explain using an attached statement.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>35</strong> Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If &quot;No,&quot; attach an explanation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VI-A  Lobbying Expenditures by Electing Public Charities

(See page 9 of the instructions.)

(To be completed ONLY by an eligible organization that filed Form 5768)

- **Check a** if the organization belongs to an affiliated group
- **Check b** if you checked "a" and "limited control" provisions apply

#### Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

<table>
<thead>
<tr>
<th></th>
<th>(a) Affiliated group totals</th>
<th>(b) To be completed for ALL electing organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>36</td>
<td>Total lobbying expenditures to influence public opinion (grassroots lobbying)</td>
<td>36</td>
</tr>
<tr>
<td>37</td>
<td>Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td>37</td>
</tr>
<tr>
<td>38</td>
<td>Total lobbying expenditures (add lines 36 and 37)</td>
<td>38</td>
</tr>
<tr>
<td>39</td>
<td>Other exempt purpose expenditures</td>
<td>39</td>
</tr>
<tr>
<td>40</td>
<td>Total exempt purpose expenditures (add lines 38 and 39)</td>
<td>40</td>
</tr>
</tbody>
</table>
| 41 | Lobbying nontaxable amount. Enter the amount from the following table -

   **If the amount on line 40 is -**

   **The lobbying nontaxable amount is -**

   - Not over $500,000: 20% of the amount on line 40
   - Over $500,000 but not over $1,000,000: $100,000 plus 15% of the excess over $500,000
   - Over $1,000,000 but not over $1,500,000: $175,000 plus 10% of the excess over $1,000,000
   - Over $1,500,000 but not over $17,000,000: $225,000 plus 5% of the excess over $1,500,000
   - Over $17,000,000: $1,000,000

|   | 41 |

| 42 | Grassroots nontaxable amount (enter 25% of line 41) | 42 |
| 43 | Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 | 43 |
| 44 | Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 | 44 |

---

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

### 4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

#### Lobbying Expenditures During 4-Year Averaging Period

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2005</th>
<th>(b) 2004</th>
<th>(c) 2003</th>
<th>(d) 2002</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lobbying nontaxable amount</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lobbying ceiling amount</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(150% of line 45(e))</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grassroots nontaxable amount</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grassroots ceiling amount</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(150% of line 48(e))</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grassroots lobbying expenditures</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VI-B  Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- **a** Volunteers
- **b** Paid staff or management (Include compensation in expenses reported on lines c through h)
- **c** Media advertisements
- **d** Mailings to members, legislators, or the public
- **e** Publications, or published or broadcast statements
- **f** Grants to other organizations for lobbying purposes
- **g** Direct contact with legislators, their staffs, government officials, or a legislative body
- **h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- **i** Total lobbying expenditures (Add lines c through h)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td></td>
<td>X</td>
<td>0</td>
</tr>
</tbody>
</table>

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.
Part VII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

<table>
<thead>
<tr>
<th>a</th>
<th>Transfers from the reporting organization to a noncharitable exempt organization of:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i)</td>
<td>Cash</td>
</tr>
<tr>
<td>(ii)</td>
<td>Other assets</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>b</th>
<th>Other transactions:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i)</td>
<td>Sales or exchanges of assets with a noncharitable exempt organization</td>
</tr>
<tr>
<td>(ii)</td>
<td>Purchases of assets from a noncharitable exempt organization</td>
</tr>
<tr>
<td>(iii)</td>
<td>Rental of facilities, equipment, or other assets</td>
</tr>
<tr>
<td>(iv)</td>
<td>Rembursement arrangements</td>
</tr>
<tr>
<td>(v)</td>
<td>Loans or loan guarantees</td>
</tr>
<tr>
<td>(vi)</td>
<td>Performance of services or membership or fundraising solicitations</td>
</tr>
</tbody>
</table>

| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees |

| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |

<table>
<thead>
<tr>
<th>(a) Line no.</th>
<th>(b) Amount involved</th>
<th>(c) Name of noncharitable exempt organization</th>
<th>(d) Description of transfers, transactions, and sharing arrangements</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3) or in section 527? □ Yes □ No

b If "Yes," complete the following schedule:

<table>
<thead>
<tr>
<th>(a) Name of organization</th>
<th>(b) Type of organization</th>
<th>(c) Description of relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IV: List of Officers, Directors, Trustees, and Key Employees

<table>
<thead>
<tr>
<th>(A) Name &amp; Address</th>
<th>(B) Title &amp; Est. Annual hours worked</th>
<th>(C) Compensation</th>
<th>(D) Contrib to Emp. Benef. Plan</th>
<th>(E) Expense Account</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donald A. Robinson</td>
<td>Trustee and Chairman 25-30</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td>c/o Robinson &amp; Livelli Two Penn Plaza East Newark, NJ 07107</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sean R. Kelly</td>
<td>Trustee and Treasurer 25-30</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td>c/o Saiber Schlesinger Satz &amp; Goldstein Gateway One Newark, NJ 07102</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Douglas E. Arpert, c/o Arpert, Sheehy, Higgins, PC</td>
<td>Trustee and President 25-30</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td>1 Garrett Mountain Plaza West Paterson, NJ 07424-3396</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>William J. O'Shaughnessy</td>
<td>Trustee 5 - 10</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td>c/o McCarter &amp; English, LLP 100 Mulberry Street Newark, NJ 07102</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>James C. Cecchi, Esq. Carella Byrne Bain Gilfillen Cecchi, Stewart &amp; Olstein 6 Becker Farm Road Roseland, NJ 07068</td>
<td>Trustee 5 - 10</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
</tbody>
</table>
Michael A. Chagares, Esq.  
Cole Schotz, Meisel, Forman & Leonard  
25 Main Street  
Hackensack, NJ 07601

Stephen M. Greenberg, Esq.  
Net2Phone  
520 Broad Street, 8th Floor  
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Edwards & Angell  
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New York, New York 10022

Eugene M. Haring, Esq.  
McCarter & English, LLP  
Gateway Four, 100 Mulberry St.  
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P.O. Box 398  
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Saiber, Schlesinger, Satz & Goldstein  
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Newark, New Jersey 07102

Kathryn Renahan, DAG  
Department of Law & Public Safety  
25 Market Street  
P.O. Box 112  
Trenton, NJ 08625

James Waldron, Clerk  
United States Bankruptcy Court  
50 Walnut Street  
Newark, New Jersey 07102

Carl D. Poplar, Esq.  
Poplar & Eastlack  
1010 Kings Highway South  
Cherry Hill, NJ 08034
Joshua L. Markowitz, Esq.  
Markowitz & Zindler  
3131 Princeton Pike  
Lawrenceville, NJ 08648

Kevin H. Marino, Esq.  
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Newark, New Jersey 07102

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Cole, Schotz, Meisel Forman & Leonard, P.A.  
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Newark, NJ 07102

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Post Office Box 1945  
Morristown, New Jersey 07962

John T. O’Brien, Esq.  
Clerk’s Office  
United States District Court  
402 E. State Street  
Trenton, NJ 08608

Leda Dunn Wettre, Esq.  
Robinson & Livelli  
Two Penn Plaza East  
Newark, New Jersey 07105

Claire C. Cecchi, Esq.  
McElroy Deutsch Mulvaney & Carpenter  
Three Gateway Center
Newark, New Jersey 07102

Jonathan Lerner, Esq. Trustee -0- -0- -0-
Skadden Arps Slate Meagher & Flom 5 - 10
Four Times Square
New York, New York 10036

Stephen Del Mauro, Esq. Trustee -0- -0- -0-
McElroy Deutsch Mulvaney
& Carpenter 5 - 10
1300 Mt. Kemble Avenue
Morristown, NJ 07962

Marion Percell, A.U.S.A Trustee -0- -0- -0-
United States Attorney’s Office
and Vice Pres. 10-15
970 Broad Street
Newark, New Jersey 07102

Jemi Goulian Trustee -0- -0- -0-
Greenbaum, Rowe, Smith, Ravin
Davis & Himmell 5 - 10
Post Office Box 5600
Woodbridge, New Jersey 07095

Esther Salas, Esq. Trustee -0- -0- -0-
Assistant Federal Public Defender
and Vice Pres. 10-15
972 Broad Street, 4th Floor
Newark, New Jersey 07102

Colleen Duffy Shiarella, Esq. Trustee -0- -0- -0-
McElroy Deutsch Mulvaney
& Carpenter 5 - 10
1300 Mt. Kemble Avenue
Morristown, NJ 07962

Alan S. Naar, Esq. Trustee -0- -0- -0-
Greenbaum Rowe Smith Ravin
Davis & Himmell, LLP 5 - 10
Post Office Box 5600
Woodbridge, NJ 07095

Liza Walsh, Esq. Trustee -0- -0- -0-
Connell Foley
85 Livingston Avenue
Roseland, New Jersey 07068
<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Start</th>
<th>End</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frances Bajada, Esq.</td>
<td>Trustee</td>
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<td>-0-</td>
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</tr>
<tr>
<td>Chambers of Hon. Susan Wigenton, USMJ</td>
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<td></td>
<td></td>
<td>10-15</td>
</tr>
<tr>
<td>United States District Court</td>
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</tr>
<tr>
<td>50 Walnut Street</td>
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<tr>
<td>Anne Patterson, Esq.</td>
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<td>Morristown, New Jersey 07962</td>
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<td>Office of the Attorney General</td>
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</tr>
<tr>
<td>Post Office Box 432</td>
<td></td>
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<tr>
<td>Roselle Park, NJ 07204</td>
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<tr>
<td>Peter C. Harvey, Attorney General</td>
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<td>Lynne Kosobucki, Esq.</td>
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<tr>
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<td>and Secretary</td>
<td></td>
<td></td>
<td>10-15</td>
</tr>
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<td>United States District Court</td>
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<td>50 Walnut Street</td>
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<tr>
<td>Honorable Helen E. Hoens</td>
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<tr>
<td>1101 North Tower</td>
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<tr>
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<tr>
<td>Newark, NJ 07102</td>
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<td>Stacy Ann Biancamano, A.F.P.D.</td>
<td>Trustee</td>
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<td>Public Defender's Office</td>
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<td>972 Broad Street</td>
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Newark, New Jersey 07102

Thomas P. Scrivo, Esq.  
McElroy Deutsch Mulvaney & Carpenter  
1300 Mt. Kemble Road  
Morristown, New Jersey 07962

Keith J. Miller, Esq.  
Robinson & Livelli  
Two Penn Plaza East  
Newark, New Jersey 07105

Susan Travis  
U.S.D.C. Historical Society Clerk's Office  
50 Walnut Street  
Newark, New Jersey 07102

Gale Raffield  
c/o Robinson & Livelli  
Two Penn Plaza East  
Newark, NJ 07107

Theresa Trivino  
c/o Chambers of Judge Stanley Chesler  
US District Court  
50 Walnut Street  
Newark, NJ 07102
Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I 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.

Part I: Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only. □

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/eFile.

Type or print

File by the due date for filing your return. See instructions.

Name of Exempt Organization: United States District Court for the District of New Jersey
Hosptial Historical Society

Employer identification number: 22-2857248

Number, street, and room or suite no: If a P O box, see instructions

c/o Douglas E. Arpert, Arpert, Seely, Higgins, PC, 1 Garrett Mountain Plaza

City, town or post office, state, and ZIP code. For a foreign address, see instructions

West Paterson, NJ 07424-3396

Check type of return to be filed (file a separate application for each return).

- Form 990
- Form 990-BL
- Form 990-EZ
- Form 990-PF

The books are in the care of: Douglas E. Arpert

Telephone No: (973) 881-1101 FAX No: (973) 881-1369

- 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 will cover.

1 I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until August 15, 2006, to file the exempt organization return for the organization named above. The extension is for the organization's return for □ tax year beginning __________, _____, and ending __________, _____.

2 If this tax year is for less than 12 months, check reason □ Initial return □ Final return □ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions □ $ N/A

3b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit □ $ N/A

3c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions □ $ N/A

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

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 12-2004)
Part II Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.

Name of Exempt Organization: United States District Court for the District of New Jersey Historical Society
File by the extended due date for filing the return See instructions
City, town or post office, state, and ZIP code For a foreign address, see instructions.
West Paterson, NJ 07424-3396

Check type of return to be filed (File a separate application for each return)

☐ Form 990
☐ Form 990-BL
☒ Form 990-EZ
☐ Form 990-PF
☐ Form 990-T (sec. 401(a) or 408(a) trust)
☐ Form 990-T (trust other than above)
☐ Form 1041-A
☐ Form 4720

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

☐ The books are in the care of

Telephone No. ☑
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 additional 3-month extension of time until November 15, 2006

For calendar year 2005, or other tax year beginning

☐ If this tax year is for less than 12 months, check reason: Initial return ☑
Final return ☑
Change in accounting period ☑

State in detail why you need the extension. Additional time is needed to obtain information in order to prepare a complete return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions $ N/A
b If this application is for Form 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 and any amount paid previously with Form 8868 $ N/A
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions $ N/A

Signature and Verification
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ☑
Title ☑ Attorney
Date 8/8/06

Notice to Applicant - To Be Completed by the IRS

☐ We have not approved this application. Please attach this form to the organization's return.

☐ We have approved this application. Please attach this form to the organization's return.

We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made. Please attach this form to the organization's return.

We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.

Director
Date

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print

Name Beth Yingling, Esq.
Number and street (include suite, room, or apt. no.) or a P.O. box number c/o McCarter & English, LLP, 100 Mulberry St., PO Box 652
City or town, province or state, and country (including postal or ZIP code) Newark, NJ 07102-0652