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11/2

Form 990-PF

## turn of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

			<del></del>	be able to use a copy of this		rting requirements.	2011
	For	calen	dar year 2011 or tax year beginning		, and ending		
	Na	me of	torudation			A Employer Identification	n number
			MPSON DEAN FAMILY FOUNT		13-3942201	<u> </u>	
			nd street (or P.O. box number if mail is not delivered to stree		Room/suite	B Telephone number	
			REGEN, BENZ&MACKENZIE	37 W.38 ST.	3RD FL	(212)661-2	2720
			own, state, and ZIP code YORK, NY 10018			G If exemption application is p	nending, check here
			all that apply: Indial return	Initial return of a to	ormer public charity	D 1 Foreign organization:	s. check here
			Final return	Amended return	<b>, , ,</b>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			Address change	Name change		Foreign organizations ma 2 check here end attach co	enting the 65% test.
	H	heck	type of organization X Section 501(c)(3) e		<del></del>	E II private foundation sta	
		Sec		Other taxable private founds	node	under section 507(b)(1)	. [-
	Ĩ F		<del></del>	ing method X Cash	Accrual	F If the foundation is in a	
	(fi	rom F	Part II col (c), Ime 16)	ther (specify)		under section 507(b)(1)	
		-\$	3,183,068 . (Part I, cold	ımn (d) must be on cash i	basis.)		
		rt (	Analysis of Revenue and Expenses [The total of amounts in columns (a), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Distoursements for chartable purposes (cash basis only)
		1	Contributions, giffs, grants, etc., received	2,822,030.			
		1.	Check I I'm to smelation as not required to attach Sch &				
<u> </u>			Interest on sevings and temporary Cash investments				
2014			Dividends and interest from securities	374.	374.		Statement 1
ro			Gross rents				
SCANNED DEC 1	Revenue	ь	Net rental income or (loss)				A PERSONAL PROPERTY.
		61	Net gain or (loss) from sale of assets not on line 10	5,293.			
		ь	Gross sales price for all aparts on time 6a 497,775.				Translation is translation
		-	Capital gain net income (from Part IV (ind 2)		5,293.		
يَيَ		8	Net short-term capital gain	ale a page 1			
-			Income modifications				Part leaves
₹		10a	Gross sales less returns and allowances				
<u> </u>		ľ	Lass Cost of goods sold			The state of the s	
- 7/		·	Gross profit or (loss)	<u></u>	- Local F	<del></del>	
			Other income	- A A A A A A A A A A A A A A A A A A A		<del></del>	<b>一种工作,和图像</b>
			Total Add lines 1 through 11	2,827,697.	5,667.		
			Compensation of officers directors trustees etc.	0,	0.		0.
			Other employee salaries and wages	<del></del>	<del></del>	received E	)\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
			Pension plans, employee benefits Legal fees	ļ <del>-</del>	<del>-</del> -	KBC-INCA-	F
	9036		Accounting fees	}		HOY 9 1 20	<u> </u>
	Š		Other professional fees	DEOCH	~	<del>1101 3 1 20</del>	<del> `</del>
	9		Interest	1 L V L 151	<u>-L\</u>	# O = 400	Utan 0.
	reti	l	Taxes Stmt 2	54.		<del>ਨੂੰ ਉਪੋਵਾਂ</del>	0.
	íst	19	Depreciation and depletion	175 D + 201	7-1		
	Ē	20 (	Occupancy				
	Ad	21	Travel, conferences, and meetings	( FAST	7		
	P	22	Printing and publications		ITAH		
•	Bu	23 (	Other expenses Stmt 3	137.	137.		0.
	Ē	24	Total operating and administrative				
~	Operating and Administrative Expen		expenses Add lines 13 through 23	342.	137.		0.
	٦		Contributions, gifts, grants paid	441,845.			441,845.
)			Total expenses and disbursements	440 407	1 2 17		441 045
			Add lines 24 and 25	442,187.	137.		441,845.
			Subtract line 26 from line 12.	HEAT 10 15 15 15 15 15 15 15 15 15 15 15 15 15	A STATE OF THE STA		The second secon
			Excess of revenue over expenses and disbursements	2,385,510.	FREE TO SEE		
	1		Net investment income (if negative, enter -0-)	Out suggested and the suggested of the s	5,530.	11/2	Mind and the second
	1235		Adjusted net income (if regative enter-0)			N/A	Form <b>990-PF</b> (2011)
	12-02	11	LHA For Paperwork Reduction Act Nobce, see	1894 <b>800 8</b>			roma <b>330" FT (2</b> 011)

Form **990-PF** (2011)

Form 990-PF (2011) THOMPSON DEAN FAMILY FOUNDATION					3942201	Page 2	
13		Balance Sheets Affected wheddes and amounts in the description column should be for and of seet amounts only	Beginning of year	End	End of year		
-		calumn should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market	Value	
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments	104,490.	188,982.		,982.	
	3	Accounts receivable					
	Ì	Less- allowance for doubtful accounts			<u>L</u>		
	4	Pledges receivable					
		Less allowance for doubtful accounts			<u> </u>		
	5	Grants receivable					
	8	Receivables due from officers, directors, trustees, and other			1		
		disqualified persons			<u> </u>		
	7	Other potes and loans recevable					
	ł	Less aflowance for doubtful accounts			,		
2	8	inventories for sale or use			]		
2	9	Prepaid expenses and deferred charges			T		
₹		Investments - U.S. and state government obligations			1		
		Investments - corporate stock Stmt 4	2,013,300.	4,314,318.	2,994	,086.	
	، ا	Investments - corporate bonds					
	11	investments land, buildings, and equipment, basis					
	Į	Last accumulated depreciation	Carles of the first the state of the state o	The state of the s		<del></del>	
	12	Investments - mortgage loans			<del> </del>		
	13	Investments - other		<del> </del>	<del>                                     </del>		
	1	Land, buildings, and equipment basis					
	``	Less accumulated depreciation		Action of a f B f to the factor of the facto			
	15	Other assets (describe >	<del></del>	··	<del> </del> -		
	"	The state of the s		<del></del> _	<del> </del>		
	16	Total essets (to be completed by all iders)	2,117,790.	4,503,300.	3,183	.068.	
_	17	Accounts payable and accrued expenses					
	18	Grants payable	<b></b>				
_	18						
<u> </u>	1		<del></del>			17.	
	21	Loans from officers, directors, trustees, and other dequalified persons.  Mortgages and other notes payable	<del></del>			122	
5	1	_	<del></del>	<del></del>			
	~~	Other habilities (describe			THE PROPERTY.	23-25	
	1,,	Total lighthelistes (add light 17 through 20)	о.	0.	Marie acts to the	(* <del>*</del>	
_	123	Total liabilities (add lines 17 through 22)	<del></del>	<del></del>			
		Foundations that follow SFAS 117, check here			V INSTRUCT		
2	١.,	and complete lines 24 through 26 and lines 30 and 31					
Š	24	Unrestricted Temporarily contraded					
<u></u>	1	Temporarily restricted	<del></del> -				
2	20	Permanently restricted  Foundations that do not follow SFAS 117, check here					
Fund Balanc	1	•					
<u>გ</u>	]	and complete lines 27 through 31	2 117 700	4,503,300.			
50 TS		Capital stock, trust principal, or current funds	2,117,790. 0.	4,303,300.		1.4	
ASS.		Paid-in or capital surplus, or land, bidg , and equipment fund					
֡֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֓֓֓֓֓֓֓֓֓֓֡	i	Retained earnings, accumulated income, endowment, or other funds	2,117,790.	4,503,300.			
ž	30	Total net assets or fund balances	2,111,730.	4,303,300.	Carlotte Carlotte		
	l	* and the limit of the second of the second	2,117,790.	4,503,300.			
_	131	Total liabilities and net assets/fund balances	<del></del>	4,303,300.	KIND TELEFORE		
P	41	Analysis of Changes in Net Assets or Fund B	alances				
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	1			
		st agree with end-of-year figure reported on prior year's return)		<u>1</u>	2,117		
		amount from Part I, line 27a		2	2,385	,510.	
		r increases not included in line 2 (demize)		3		0.	
		lines 1, 2, and 3		<u>-</u>	4,503	,300.	
-		eases not included in line 2 (itemize)		5		0.	
		net assets or fund balances at end of year (line 4 minus line 5) • Part II or	nlumn (b) line 30		4,503	,300.	

	ON DEAN FAMIL					1.	3-3942	201	Page 3
Capital Gains and	Losses for Tax on I	nvestmen	t Income						
(a) List and describe the kind(s) of property sold (e.g., real estate, P - Purcha 2-story brick warehouse; or common stock, 200 shs. MLC Co ) D - Donabs					ruichase [	(c) Date a (mo , da		(d) Dat (mo., d	
	JP MORGAN ACCOUNT 36549009 P								
b		<del>-</del>		_	<del></del>	_			
C									
d	<del></del>			1					
£									
(e) Gross sales price	(1) Depreciation allowed (or allowable)		st or other basis expense of sale				មា or (loss) (វ) ភាអាបន (ព្	-	
497,775.	<del></del>	<del>                                     </del>	492,48	12.				5	.293.
Ь				$\neg \neg$					
c									
4									
6									
Complete only for assets showing gair	n in column (h) and owned by	the foundation	on 12/31/69		(1)	Gains (Co	ol (h) gain n	าเกนร	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		coss of col (i)		COL	Losses (	ot less than from col (h	-0-) <b>ar</b> ))	
1								5	,293.
b									
<u>c</u>	<u></u>								
d		<u> </u>							
<u> </u>					<del></del>			_	
2 Capital gain net income or (net capital li	oss) { If gain, also enter of if (loss), enter of			}[	2			5	,293.
3 Net short-term capital gain or (loss) as	defined in sections 1222(5) a	nd (6):							
If gam, also enter in Part I, line 8, colum	ın (c)	(-)		- }			4-		
If (loss), enter -0- in Part I, line 8				71	3		N/A		
Qualification Unde	<del></del>					ome			
(For optional use by domestic private foun	dations subject to the section	4940(a) tax on	net investment m	come	)				
If section 4940(d)(2) applies, leave this pai	rt blank.								
							ſ	<del>-</del>	<b>.</b>
Was the foundation liable for the section 4			•	nod?			l	Yes	X No
If Yes," the foundation does not qualify un  1 Enter the appropriate amount in each of				00					
(a)		uctions before	maxing any entire			<del></del>		<u>a)</u>	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying dis	stributions	Net value of no	(e) Inchani	lable-use assets	1 (	Distribu col (b) divid	d) tion ratio led by col	(c))
2010		3,621.	<del></del> -	1.	961,052		400 (8) 4111		45218
2009	2.79	6.573.			059,718				13997
2008	34	6,273.		5.	674,211				61026
2007		7,158.			719,152				68038
2006		7,898.			854,116			.0	71183
	<del></del>				<del></del>				
2 Total of line 1, column (d)	_					2	_	2.0	59462
3 Average distribution ratio for the 5-year	base period - divide the total	on line 2 by 5,	or by the number	of year	rs				
the foundation has been in existence if	less than 5 years					3		. 4	<u> 11892</u>
						1		<i>c</i> 10	004
4 Enter the net value of noncharitable-use	assets for 2011 from Part X,	line 5				4	2	,619	,094.
						1 . 1	•	070	704
5 Multiply line 4 by line 3	•					5		,078	, 784.
						1.[			
8 Enter 1% of net investment income (1%	i of Part I, line 27b)					6			55.
3 444 have 5 and 6						7	1	በ7ይ	,839.
7 Add lines 5 and 6						<del>  </del>		,070	, 000
8 Enter qualifying distributions from Part	XII, line 4					8		441	,845.
If line 8 is equal to or greater than line 7	, check the box in Part VI, line	e 16, and comp	lete that part usin	g a 1%	tax rate				
See the Part VI instructions.									
·									SE 100

Forn	n 990-Pf (2011) THOMPSON DEAN FAMILY FOUNDATION				3942			age 4
1.5	Excise Tax Based on Investment Income (Section 494)	0(a), 4940(b	), 4940(e), or 4	948	- see ir	istruc	tion	is)
1:	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and en	iter TVA" on line	1.		6 4 6			
	Date of ruling or determination letter (attach copy of letter if nec							
ì	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter	r 1%	1		-	1.	11.
	of Part 1, line 27b						13.5	
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%		col(b)				Tito	
2	, , , , , , , , , , , , , , , , , , , ,	hers enter -0-)		2	<b></b>		4 4	0.
3	Add lines 1 and 2			3	<b>}</b> -		<u>_ 1 3</u>	11.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -D-)		1	<del> </del>		<del>-</del> 11	11.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			5		*	#####################################	
6	Credits/Payments.	l e. 1			1			
	2011 estimated tax payments and 2010 overpayment credited to 2011	6a   6b						
	Exempt foreign organizations - tax withheld at source							
	Tax paid with application for extension of time to file (Form 8868)	6d 6d						
_	Backup withholding erroneously withhold	00		7	T OS ON	10		0.
7	Total credits and payments. Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	thad		8	-			<del></del>
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	Çile ü	_	9	<del> </del>		11	11.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10	<del>                                     </del>		;	<u></u> -
11	Enter the amount of line 10 to be Credited to 2012 estimated tax		Refunded -	11	<del> </del>			
	Statements Regarding Activities							
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it pai	rticipate or intervene	ın		基建 Y	es/	No
	any political campaign?	•			- 1	1a		X
ŧ	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	es (see instruction	ons for definition)?		Ī	16	$\neg \neg$	X
	If the answer is "Yes" to 18 or 15, attach a detailed description of the activities and	d copies of any	materals publishe	ed or		ф±		
	distributed by the foundation in connection with the activities				5		375	
c	Did the foundation file Form 1120-POL for this year?				Ĺ	1c		<u>X</u>
đ	Finter the amount (if any) of tax on political expenditures (section 4955) imposed during the						À	
	(1) On the foundation. > \$ 0. (2) On foundation managers.	. <b>&gt;</b> \$	0.					
•	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax imposed	on loundation		į.			
	managers. > \$0.				į.		<b>36</b>	191132
2	Has the foundation engaged in any activities that have not previously been reported to the IR	RS7			Į.	2		X
_	If "Yes," attach a detailed description of the activities		_					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in		es of incorporation, o	7	F	AL 1	<u> </u>	#i
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change				- 1	3	-	$\frac{\mathbf{x}}{\mathbf{x}}$
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	77		NT.	(/a }	41	$\dashv$	
	If "Yes," has it filled a tax return on Form 990-T for this year?			14	/A	5	-+	χ
9	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T				Ļ		وعنوا	- <b>1</b>
•	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ext	ther			Į.			- 12 A
٠	By language in the governing instrument, or	<b>рты</b>			Į.			
	By state legislation that effectively amends the governing instrument so that no mandatory	v directions that o	conflict with the state	. krw	1	h e e		
	remain in the governing instrument?	y os conons that t	30(1)1-02 (1/10) 1-10 0-10(1		f	6	X	ALL INVEST
7	Did the foundation have at least \$5,000 in assets at any time during the year?						$\mathbf{x}^{\dagger}$	
·	If "Yes," complete Part II, col. (c), and Part XV				ŀ			
82	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨						<u> </u>
	NY							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	ttorney General (	or designate)		— Ę			
	of each state as required by General Instruction G? If "No," attach explanation	•	•		[		X	
9	Is the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942(j)(3) (	or 4942(j)(5) for cale	nd <b>ar</b>			<b>3</b> 5.	
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," co					9	[	X
10	Did any persons become substantial contributors during the tax year? H-Yes * enach a schedule	le listing their name	and addresses			10		X
					Form	990-1	PF (2	(011)

	13-394 THOMPSON DEAN FAMILY FOUNDATION	2201		Page 9
_	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			l
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			1
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ► N/A			
14	The books are in care of ► THOMPSON DEAN III Telephone no ►212-6		<u>720</u>	!
	Located at ► 550 PARK AVENUE, NEW YORK, NY ZIP+4 ►1	0021		
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	· []
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	ī. Ī	Yes	I -
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign	<i>\$</i>		
_	country	記載	20.	
P	Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any Item is checked in the "Yes" column, unless an exception applies.		Yes	No
11	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			塵
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	高紅		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	震動		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			<b>E</b> 51.
	for the benefit or use of a disqualified person)?	255 H	<b>10</b>	
	(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			
	termination of government service, if terminating within 90 days )			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A	1b		
	Organizations relying on a current nonce 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		ÿ er	
	before the first day of the tax year beginning in 2011?	10		X
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)).			
1	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		1211	
	before 2011?		E.	
	M '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			- 640
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions ) N/A	2ь		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			日言語
	<b>&gt;</b>			
34	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	<b>交通</b> 595年	<u>-2-</u>	
	during the year?	140		
5	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after		*	
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2011)  N/A	3 b		
4a	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	建		
	had not been removed from reopardy before the first day of the tax year beginning in 2011?	45		X

Form 990-PF (2011) THOMPSON DEAN FAMILY FOU			13-39422	201 Pag	ge 6	
Par Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)	rahada Array din D. C	-	
Sa During the year did the foundation pay or incur any amount to		<u></u> .	[Sel.: ]			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	,		es 🔀 No 🚪			
(2) Influence the outcome of any specific public election (see section 4955),		ভিল <sub>য়</sub> হ				
any voter registration drive?		es X No es X No		7		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?					
(4) Provide a grant to an organization other than a charitable, etc., organization	<del></del>	a X No S				
509(a)(1), (2), or (3), or section 4940(d)(2)?			HILANINO E			
(5) Provide for any purpose other than religious, charitable, scientific, literary		es 🔀 No		基		
•	the prevention of cruefty to children or animals?					
b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in regulations	N/A	5b		
section 53 4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check	•				27.	
of the answer is "Yes" to question 5a(4), does the foundation claim exemption		uned			结	
expenditure responsibility for the grant?			es 🗀 No 🖁			
If "Yes," attach the statement required by Regulations section 53 494		•,••				
6a Did the foundation, during the year, receive any tunds, directly or indirectly, to			#5			
a personal benefit contract?	pay proteining off	[ ¬ v.	es X No			
à Did the foundation, during the year, pay premiums, directly or indirectly, on a	nersonal benefit contract?	··	3	6b 2	X	
If "Yes" to 6b, file Form 8870	personal series come set-		ļ.			
7a At any time during the tax year, was the foundation a party to a prohibited tax:	shelter transaction?	[ ] Y	s X No			
b ff Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b		
Information About Officers, Directors, Trust Paid Employees, and Contractors		anagers, Highl		<del>,</del>		
1 List all officers, directors, trustees, foundation managers and their	compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expans	se	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	combauzatiou fing dalacted find dalacted	account, other	her	
THOMPSON DEAN III	CHAIRMAN			T		
550 PARK AVE	]			ł		
NEW YORK, NY 10021	0.00	0.	0.		<u>o.</u>	
CAROLINE W. DEAN	PRESIDENT, DI	R		ł		
550 PARK AVE				١.,	_	
NEW YORK, NY 10021	0.00	0.	0.	<del> </del>	0.	
HUME R. STEYER	SECRETARY	}		Į.		
24 TOWER HILL ROAD			,	١,	^	
TUXEDO PARK, NY 10987	0.00	0.	0.	<b></b>	0.	
	1	ŀ		Į.		
				i		
2 Compensation of five highest-paid employees (other than those in	aludad on line 1) Misana	anter "MONE"	<u></u>	<u> </u>		
Z Compensation of the nightest-paid employees (other than those in	(b) Title and average	enta NONE	(d) Commountons to	(e) Expens	Se	
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Commoditions to employee benefit plans and deferred compensation	account, oth allowance	her	
NONE						
	]	<u> </u>		<u> </u>		
	]	1				
	<u> </u>	<u> </u>	<u> </u>			
	1	1		1		
	ļ	<del> </del>		<del> </del>	_	
	1					
		<del></del>		<del> </del>		
	1	]		]		
	L		<u> </u>	L	_	
Total number of other employees paid over \$50,000					0	

Form 990-PF (2011) THOMPSON DEAN FAMILY FOUNDATION		3942201 Page 7
Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	E."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		j
<del></del>	<del></del>	<del></del>
		ļ
	<del></del>	
	<del></del>	
		]
Total number of others receiving over \$50,000 for professional services	<del></del>	
Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, e		Expenses
1 N/A		
2		
	<del></del>	
3		
·		
4_ <del></del>		
	<del></del>	
Summary of Program-Related Investments		<del></del>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1N/A		
		l
2		<del></del>
<u> </u>	<del></del>	
All other program-related investments. See instructions.  3		
<u> </u>	<del></del>	
Total. Add lines 1 through 3	<b></b>	0.
		Form <b>990-PF</b> (2011)

For	m 990-PF (2011) THOMPSON DEAN FAMILY FOUNDATION	13-	3942201	Page 8
ř.	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	indations,	see instructions )	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	鹽鹽	<u> </u>	<del></del>
1	Average monthly fair market value of securities	10	2,512	,243.
Ь	Average of monthly cash balances	1b	146	<u>,736.</u>
C	Fair market value of all other assets	1c		
d	Total (add lines 1a, b, and c)	14	2,658	,979.
	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	2,658	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4		,885.
5	Not value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,619	
6	Minimum investment return: Enter 5% of line 5	6	130	,955.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here   and do not complete this part.)	nd certain		
1	Minimum investment return from Part X, line 6	1	130	,955.
21	Tax on investment income for 2011 from Part VI, line 5			
	Income tax for 2011 (This does not include the tax from Part VI)			
ε		2¢		111.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	130	,844.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	130	,844.
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	130	,844.
e	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	壁壁		
1	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	441	845.
	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		<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the:			
1	Suitability test (prior IRS approval required)	34		
b	Cash distribution test (attach the required schedule)	35		
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	441	,845.
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		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	441	,845.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for	the section	

Form 990-PF (2011)

THOMPSON DEAN FAMILY FOUNDATION

13-3942201 Page 9

Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
Distributable amount	for 2011 from Part XI,				
line 7	•			A Company	130,84
Undistributed income, if	any as of the end of 2011	and the second s			
a Enter amount for 201	0 only		4.2	0.	
<b>b</b> Total for prior years					
	<u> </u>		0.	Towns Market	
Excess distributions	carryover, if any, to 2011			No. of the last of	Triple State
aFrom 2006		No.			
<b>b</b> From 2007	111,657.				
c From 2008	62,978.			W. Taranta	
<b>d</b> From 2009	2,644,041.				
eFrom 2010	1,756,896.				
f Total of lines 3a throi	igh e	4,575,572.			STATE OF STREET
Qualifying distribution				and the second second	
Part XII, line 4 - S_	441,845.				t on mot a sile of
a Applied to 2010, but i	not more than line 2a			0.	
b Applied to undistribut	ed income of prior		<del> </del>		
years (Election require	ed - see instructions)		0.		
c Treated as distribution	ns out of corpus				inter state of the same
(Election required - se	e instructions)	0.			
d Applied to 2011 distri			2.72		130,84
Remaining amount di	stributed out of corpus	311,001.			
Excess distributions carry	over applied to 2011 solumn (d), the same amount	0.	7.00		
must be shown in column					
Enter the net total of	each column as				
indicated below:					
Corpus. Add lines 31 4c		4,886,573.			
h Prior years' undistribi	rted income Subtract				
line 4b from line 2b			0.	- Prince Bright Market	
Enter the amount of p undistributed income		The state of the s	' i		
deticiency has been is		THE PARTY OF THE P			Parit - Trans
the section 4942(a) ta	x has been previously		•	The second secon	
assessed			0.		and the second second
Subtract line 6c from			•		ACCOMMENSAGE TO PROPERTY.
amount - see instructi			0.1		
Undistributed income	<b></b>				
4a from line 2a. Taxab				0.	
Undistributed income					
	e 1. This amount must				
be distributed in 2012	-dalla da - a - a - 4				
Amounts treated as du					
corpus to satisfy requi	•				
section 170(b)(1)(F) or Excess distributions ca		0.	A STATE OF S	- man kint and - minters to	
	•	<u> </u>			
not applied on line 5 o	-	<del>0</del> .			
Excess distributions of Subtract lines 7 and 8	_	4,886,573.			THE RESERVE OF THE PARTY OF THE
	nontilite og	4,000,3/3.	mandaright have of product of a	五七十五十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二	
Analysis of line 9:	111 657		الماري المارية المارية المارية المارية المارية المارية المارية		
Excess from 2007 Excess from 2008	111,657. 62,978.				
Excess from 2009	2,644,041.				
Excess from 2009	1,756,896.				
	311,001.	The state of the s			
Excess from 2011	1 311,001.		The state of the s	11111	Form <b>990-PF</b> (20

Form 990-PF (2011) THOMPS	ON DEAN FAM	ILY FOUNDAT	ION		42201 Page 10
Private Operating				N/A	
1 a If the foundation has received a ruling			ı		
foundation, and the ruling is effective i	•	_	▶ ـ		· <del></del>
b Check box to indicate whether the four		ing foundation described		4942(j)(3) or 49	942 <u>(j)(</u> 5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		]
income from Part I or the minimum	(a) 2011	(6) 20 10	(c) 2009	(d) 2008	(e) Total
investment return from Part X for			7		]
each year listed	L	<u> </u>	<u> </u>		
b 85% of line 2a					
e Qualifying distributions from Part XII,					
line 4 for each year listed		<u> </u>	<u> </u>		<u> </u>
d Amounts included in line 2c not			]	Ţ	
used directly for active conduct of					1
exempt activities	<u> </u>	<u> </u>	<u> </u>		
e Qualifying distributions made directly				in .	
for active conduct of exempt activities.	. {	1	1	ľ	
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<ul> <li>Endowment alternative test - enter 2/3 of minimum investment return shown in Part X, fine 6 for each year listed</li> </ul>					
c "Support" afternative test - enter		1			
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(8)(iii)					
(3) Largest amount of support from		1			
an exempt organization	L	<u> </u>	<u> </u>		
(4) Gross investment income	<u> </u>		<u> </u>		
Supplementary Info			of the foundation	n had \$5,000 or mo	ore in assets
at any time during	the year-see inst	ructions.)			
Information Regarding Foundation     List any managers of the foundation w     year (but only 4 they have contributed	ho have contributed more		stributions received by th	ne foundation before the clos	se of any tax
THOMPSON DEAN III					
<ul> <li>b List any managers of the foundation w other entity) of which the foundation had</li> </ul>			(or an equally large por	tion of the ownership of a pa	artnership or
None		<u></u>			
2 Information Regarding Contribut Check here ► X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone num	<del></del>	<del></del>		<del></del>	
			<del></del>		
b The form in which applications should	pe submitted and informa	ntion and materials they s			
c Any submission deadlines.					
d Any restrictions or limitations on award	is, such as by geographic	al areas, charitable fields	, kinds of institutions, or	r other factors	
		-	·		

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13-3942201

THOMPSON DEAN FAMILY FOUNDATION

Form 990-PF (2011)

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor Paid during the year AMERICAN CANCER SOCIETY NONE CHARITY CRARITABLE CONTRIBUTION 132 W 32ND STREET 5,000. NEW YORK, NY 10001 ASPCA CHARITABLE CHARITY NONE CONTRIBUTION 424 E 92ND STREET 5,000. NEW YORK, NY 10128 AUDUBON SOCIETY NONE CHARITY CHARITABLE 71 W 23RD STREET CONTRIBUTION NEW YORK, NY 10010 300. CARPT CHARITY CHARITABLE NONE 69 EAST 93RD STREET CONTRIBUTION 120. NEW YORK, NY 10128 CANCER RESEARCH INSTITUTE NONE CHARITY CHARITABLE 55 BROADWAY CONTRIBUTION 12,500. NEW YORK, NY 10006 See continuation sheet(s) 441,845. **▶** 3a Total b Approved for future payment None Total Form 990-PF (2011)

13-3942201 THOMPSON DEAN FAMILY FOUNDATION Form 990-PF (2011) Page 12 **Analysis of Income-Producing Activities** Unrelated business income Excluded by section 512 513 or 514 Enter gross amounts unless otherwise indicated (e) (C) Exclu-aion code (b) Related or exempt (d) Amount Amount function income code 1 Program service revenue. g. Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash 14 investments 14 374. 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 532420 14 7 Other investment income & Gain or (loss) from sales of assets other 18 5,293 than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue. 12 Subtotal Add columns (b), (d), and (e) 5,667. 5,667. 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) 1. 在最大程度。 Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Exptain 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)

123621

Form **990-PF** (2011)

Form 990	0-PF (2	011) THOMP	SON DEAN	PAMILY	FOUNDATION		13-3	942201	Page 13
	Information Regarding Transfers To and Transactions and Relationships With Nonchantable								
1 Did the a Tra (1) (2) b Oth (1) (2) (3) (4) (5) (6) c Sha	the or Gode ( nsfers Cash Other er tran Sales Purch Renta Reimi Loans Perfo	Exempt Organization directly or indicate than section 50 for from the reporting found assets sactions:  of assets to a noncharital asset of assets from a noil of facilities, equipment, bursement arrangements or loan guarantees rmance of services or medicalities, equipment, mail facilities, equipment, e	nizations  arectly engage in any (3) organizations) of tabon to a noncharte  able exempt organization concharitable exempt or other assets  embership or fundra alling lists, other asset	of the following in section 5: able exempt or attom organization issues solicitations, or paid emissing solicitations, or paid emissing solicitations.	ng with any other organizati 27, relating to political organi ganization of ganization of ganization of ganization of ganization of	on described in sect	ion 501(c) of	1a(1) 1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5) 1b(6)	es No X X X X X X X X
				_	edule. Column (b) should al ed less than fair market vali				••
colt		) the value of the goods, (b) Amount involved			e exempt organization	(4) p			
(+)	<del>'</del> }-	(a) Milopite madraco	(c) Name o	N/A	e excellent organization	(a) ceso plus	n of transfers, transactions	alu sianig aran	
	$\bot$								
	+-			<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>		
	┼		<u> </u>			<del></del>			
	╁╴		<u> </u>	<del></del>	<del></del>	<del></del> -			
		idation directly or indirect			or more tax-exempt organ	zations described		Yes	X No
		mplete the following sch	edule.				<del></del>		
		(a) Name of org	ganization		(b) Type of organization	<b> </b>	(c) Description of rela	lionship	
		11/1			<del> </del>				
					<u></u>	<u> </u>			
Sign Here	and be	penanties of pertury I declare lief it is to correct, and cor	mplete Detoleration of p	s return, including reparer (other than	ng accompanying schedules and in taxpayer) is based on all inform	statements and to the nation of which prepared DIRECT	r has any knowledge	May the IHS disc return with the pr shown below (se X Yes	reparer
		Print/Type preparer s na	ame	Preparer's s		Date		TIN	
Paid Prepa	ırer	Robert C. Firm's name ▶ REG		& MACK	ENZIE. CPAS	11/21/4 PC	self- employed	P002263	
Use C			-			<del></del>	<u> </u>		
	Firm's address ▶ 57 WEST 38TH STREET, 3RD FLOOR  NEW YORK, NY 10018  Phone no 212-661-2720								

Schedule B (Form 890, 990-EZ, or 990-PF)

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

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

OMB No. 1545-0047

2011

Name of the organizat	ion	Employer Identification number
	THOMPSON DEAN FAMILY FOUNDATION	13-3942201
Organization type (che	ck one)	<del></del>
Filers of:	Section.	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	n
	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	
General Rule  X For an organiza	1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spe stion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or moi implete Parts I and II	
Special Rules		
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.	
total contribute	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one one of more than \$1,000 for use exclusively for religious, charitable, scientific, literary of cruelty to children or animals. Complete Parts I, II, and III	
contributions for If this box is chi purpose Do no	D1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one or use exclusively for religious, charitable, etc., purposes, but these contributions did ecked, enter here the total contributions that were received during the year for an exit complete any of the parts unless the General Rule applies to this organization becable, etc., contributions of \$5,000 or more during the year.	not total to more than \$1,000 rclusively religious, chantable, etc.
but it must answer "No"	in that is not covered by the General Rule and/or the Special Rules does not file Sch on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990 EZ or o seet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Schedule	B (Form 990, 990-EZ, or 990-PF) (2011)	<del></del>	Page 2		
Name of or	ganization	Emp	loyer identification number		
THOMP	SON DEAN FAMILY FOUNDATION	:	13-3942201		
	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	THOMPSON DEAN		Person Payroll		
	550 PARK AVENUE	sssss	<del>-</del>		
	NEW YORK, NY 10021		(Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	THOMPSON DEAN		Person X Payroll		
	550 PARK AVENUE	s8,000.	Noncash		
	NEW YORK, NY 10021		(Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3	THOMPSON DEAN		Person X		
	550 PARK AVENUE	<u> </u>	- 1		
	NEW YORK, NY 10021		(Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4	THOMPSON DEAN		Person X		
	550 PARK AVENUE	s 9,000	Payroll L		
	NEW YORK, NY 10021		(Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		s	Person Payroll (Complete Part II If there is a noncash contribution)		
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		s	Person Payroll Noncash (Complete Part II if there Is a noncash contribution)		
123452 01 23	3 12	Schedule B (For	m 990, 990-EZ, or 990-PF) (2011)		

Schedule E	3 (Form 990, 990 EZ, or 990-PF) (2011)			Page 3
Name of or	anization		Employe	er identification number
THOMP	SON DEAN FAMILY FOUNDATION		13	-3942201
	Noncash Property (see instructions) Use duplicate copies of Part II	if additional space is neede	d	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see Instructions		(d) Date received
1	50,000 SHARES OF ROCKWOOD HOLDINGS INC.	2 702 5	00	04/29/11
(a)		s 2,793,5		
No from Part I	(b)  Description of noncash property given	FMV (or estimate (see instructions		(d) Date recoived
		- - - - - - - - -		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate (see instructions	-	(d) Date received
		- - -   s		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate (see instructions	-	(d) Date received
		s		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate (see Instructions	-	(d) Date received
		- - - \$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions		(d) Date received
		- s		90, 990-EZ, or 990-PF) (2011)
123453 01-23	. 12	Schedule A	. (Form 9	90. 490-EZ. 61 990-PF) (2011)

	Form 990, 990-EZ, or 990-PF) (2011)			Page 4			
Name of organ	nczation			Employer identification number			
THOMPSO	ON DEAN FAMILY FOUNDAT	TON		13-3942201			
	Exclusively religious, charitable, etc., indiv year Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	idual contributions to section 50 (c e following line entry. For organization, contributions of \$1,000 or less for	J(7), (8), or (10) organizati ins completing Part III, enter the year. (Emartis information one	ons that total more than \$1,000 for the			
(a) No from							
Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held			
-	<del></del>						
-			<del></del>	<del></del>			
_							
	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
-							
-				<del></del>			
(a) No from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held			
Part I		<del></del>		<del></del>			
-				<del></del>			
	(e) Transfer of gift						
<del>  -</del>	Transferee's name, address, an	d ZIP + 4	Relationship of tra	ensteror to transferee			
1 -							
-	<del></del>		<u> </u>				
(a) No.			122				
Part I	(b) Purpose of glft	(c) Use of glft	(d) Des	cription of how gift is held			
-							
<del></del>							
		In Transfer of old	<del>_                                    </del>	<del></del>			
	(e) Transfer of gift						
<u> </u>	Transferee's name, address, an	d ZIP + 4	Relationship of tra	insferor to transferee			
-	<del></del>						
[ ]							
(a) No.			<del></del>				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held			
-							
[-							
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transfere			insferor to transferee			
-	<del></del> -						
-		<del></del>					

THOMPSON DEAN FAMILY FOUNDATION

13-3942201

3 Grants and Contributions Paid During th		<del>,</del>	<u> </u>	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any toundation manager or substantial contributor	recipient	Contraction	
BAGLEBROOK SCHOOL	NONE	CHARITY	CHARITABLE	
271 PINE NOOK ROAD P.O. BOX 7			CONTRIBUTION	
DERRFIELD, MA 01342				75,00
KIDS OF NYC	NONE	CHARITY	CHARITABLE	
902 BROADWAY STE 1603		]	CONTRIBUTION	2,50
NEW YORK, MY 10010		<del> </del> -	<del></del>	
LENOX HILL NEIGHBORHOOD	HONE	CHARITY	Charitable	
331 EAST 70TH STREET			CONTRIBUTION	
NEW YORK, MY 10021	<del></del>	<del> </del> -	<del></del>	10,000
LEUKIMIA & LYMPHOMA SOCIETY 175 PARK AVE SOUTH, 8TH FL	NOME	CRARITY	CHARITABLE CONTRIBUTION	
NEW YORK, MY 10016			CONTRIBUTION	1,00
	<del></del>		<del>-</del>	
MSKCC	NONE	CHARITY	CHARITABLE	
1275 YORK AVENUE			CONTRIBUTION	
NEW YORK, NY 10065		<del> </del> -	<del></del>	9,000
MUSEUM OF THE CITY OF NEW YORK	ноив	CHARITY	CHARITABLE	
1220 FIFTH AVENUE	HOM2		CONTRIBUTION	
NEW YORK, MY 10029		ļ	<del> </del>	5,00
NEW YORK DOWNTOWN HOSPITAL	None	CHARITY	CHARITABLE	
170 WILLIAM STREET NEW YORK, NY 10038			CONTRIBUTION	12,10
NEW YORK JUNIOR LEAGUE	NONE	CHARITY	CHARITABLE	
130 EAST 80TH STREET			CONTRIBUTION	44.55
NEW YORK, MY 10075	<del></del>	<del> </del>	<del> </del>	16,22
NEW YORK PUBLIC LIBRARY	NONE	CHARITY	CHARITABLE	
176 PIFTH AVENUE		}	CONTRIBUTION	
NEW YORK, MY 10018		<del> </del>		7,50
NEW YORK FOR CHILDREN	NONE	CHARITY	CHARITABLE CONTRIBUTION	
450 SEVENTH AVENUE, SUITE 403 NEW YORK, NY 10123			2 0.11 11 12 0 1 2 0 1 1	12,500
Total from continuation sheets		·	<del></del>	418,92

13-3942201 THOMPSON DEAN FAMILY FOUNDATION 11 10 10 Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) or substantial contributor recipient NYU LANGONE MEDICAL CENTER NONE CHARITY HARITABLE CONTRIBUTION 550 1ST AVENUE 3,000. NEW YORK, NY 10016 PHILLIPS ACADEMY CHARITY BARITABLE NONE 160 MAIN STREET CONTRIBUTION ANDOVER, MA 01810 25,000 CHARITY HARTTARI.R PLANNED PARENTHOOD OF MYC NONE 26 BLEECKER STREET CONTRIBUTION 400. NEW YORK, NY 10012 SECOND STAGE THRATRE NONE CHARITY CHARITABLE 305 WEST 43 STREET CONTRIBUTION NEW YORK, NY 10036 2,000. SILVER HILL HOSPITAL NONE CHARITY CHARITABLE CONTRIBUTION 208 VALLEY RD NEW CANAAM, CT 06840 38,000. SOUTHAMPTON FRESH AIR HOME NONE CHARITY CHARITABLE 36 BARKERS ISLAND RD CONTRIBUTION SOUTEAMPTON, NY 11968 200, BONE MARROW FOUNDATION NONE CHARITY CHARITABLE CONTRIBUTION 30 EAST END AVENUE, SUITE 19 4,200 NEW YORK, NY 10028 THE BOYS CLUB NY CHARITY CHARITABLE NONE CONTRIBUTION 287 EAST 10TH STREET NEW YORK, NY 10009 200. FOUNTAIN HOUSE NONE CHARITY CHARITABLE 425 WEST 47TH STREET CONTRIBUTION 500. NEW YORK, NY 10036 CHARITY CHARITABLE THE FUND FOR PARK AVENUE NONE

CONTRIBUTION

100.

445 PARK AVENUE, SUITE 1000

Total from continuation sheets

NEW YORK, NY 10022

13-3942201 THOMPSON DEAN FAMILY FOUNDATION Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantal contributor METROPOLITAN MUSEUM OF ART NONE CHARITY HARITABLE CONTRIBUTION 1000 STE AVENUE NEW YORK, NY 10028 1,000. THE ROCKEFELLER UNIVERSITY CHARITY CHARITABLE NONE 1230 YORK AVENUE CONTRIBUTION NEW YORK, NY 10065 350. CHARITY THE SOUTHAMPTON ASSOCIATION THARTTARLE NONE ST ANDREWS CIR CONTRIBUTION 150, SOUTHAMPTON, NY 11968 TRUSTEES OF PHILLIPS ACADEMY NONE CHARITY CHARITABLE CONTRIBUTION 180 MAIN STREET ANDOVER, MA 01810 167,000. VIRGINIA LYMPHOMA SOCIETY NONE CHARITY CHARITABLE 5540 PALMOUTH STREET, SUITE 101 CONTRIBUTION 1,000. RICHMOND , VA 23230 WINDWARD SCHOOL NONE CHARITY CHARITABLE 13 WINDWARD AVENUE CONTRIBUTION WHITE PLAINS, MY 10605 25,000.

Total from continuation sheets

## THOMPSON DEAN FAMILY FOUNDATION

13-3942201

Form 990-PF Dividence	ds and	Inter	est from	Secu	rities 	Statement	1
Source		Gross	Amount	Capital Gains ount Dividends		Column (A) Amount	
DIVIDENDS			374.		0.	374.	
Total to Fm 990-PF, Part I,	ln 4		374.		0.	3	74.
Form 990-PF		Тах	es			Statement	2
Description	Expe	a) nses Books	(b) Net Inve		(c) Adjusted Net Incom		
FOREIGN TAXES		54.		0.		<del>-</del>	0.
To Form 990-PF, Pg 1, ln 18		54.		0.			0.
Form 990-PF	01	ther E	xpenses			Statement	3
	(a Exper	a)	(b)	set_	(c) Adjusted	(d) l Charital	
Description		Books	Net Inve		Net Incom		
Description INVESTMENT MANAGEMENT FEES INVESTMENT EXPENSES							
INVESTMENT MANAGEMENT FEES		Books 102.		102.			0.
INVESTMENT MANAGEMENT FEES INVESTMENT EXPENSES	Per I	102. 35. 137.		102. 35.			0. 0.
INVESTMENT MANAGEMENT FEES INVESTMENT EXPENSES To Form 990-PF, Pg 1, ln 23	Per I	102. 35. 137.	ment Inc	102. 35. 137.		e Purpose	0. 0. 4
INVESTMENT MANAGEMENT FEES INVESTMENT EXPENSES To Form 990-PF, Pg 1, ln 23 Form 990-PF	Per I	102. 35. 137.	ment Inc	102. 35. 137.	Net Incom	Statement Fair Market	0. 0. 4