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SCANNED OCT 1 2 2012

990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

Dep	artmer anal Re	it of the Treasury venue Service	Note	. The f	oundation may	Tre be able	eated as a Prive to use a copy of	ate Foundati	on satisfy state r	eporting	requirements	2011	
Fo	r cal	endar year 2011							, and endir			, 20	_
1	Name	of foundation					•			A	Employer identifi	cation number	
1	DONA	ALD A. PELS	CHA	RITA	BLE TRUS	T U/T/	/D 8/18/92				13-699809	1	
1	dumb	er and street (or P (box	number	ıf mail is not delr	vered to str	reet address)		Room/suit	te B	Telephone numb	er (see instructions)	
1	63 I	EAST 79TH S	ree	T AF	PT. 4B						() –	
_	City o	r town, state, and Z	IP coc	de					1		•		
,	NEW	YORK, NY 10	1021							C	If exemption applications pending, check here	ation is	
_		ck all that apply:	7021	7	al return		Initial return	of a former	nublic chari	tv			\neg
G	CHE	скап пасарру.	_	Fina	al return		Amended re	eturn	public criari	ם	1 Foreign organiza 2 Foreign organiza 85% test, check l	ations meeting the	_ _
_	<u> </u>				ress change	1()(0)	Name chang				computation .		
H		ck type of organi			_	_				E	•	n status was terminated	\neg
+		ection 4947(a)(1) r market value of a					Other taxable p method: X C		crual		·	o)(1)(A), check here . P	
'					1,		pecify)	asn Ac	Ciuai	F		s in a 60-month termination ()(1)(B), check here .	\neg
		ear (from Part II, o ▶ \$29,		, 637			n (d) must be o	n cash basis			under securi 307(c	ATADA CHECK TIETE . P	
		Analysis of Re				ام		1				(d) Disbursements	
	ar c i	total of amounts in may not necessal column (a) (see in	colur dy equ	nns (b) ual the	, (c), and (d)	(a)	Revenue and xpenses per books	(b) Net inv			Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, gran						ļ <u> </u>					
	2	Check ▶ ☐ if the	e foun ch Sch	idation is	s not required to			1				ļ	
	3	Interest on savings a	nd tem	porary o	ash investments		540.045		10 045				 -
	4	Dividends and inte	erest f	rom se	curities	.	519,247	5.	19,247.			ATCH 1	
	5a	Gross rents				•							;
	ь	Net rental income or	(loss) _				64,015					 	
Revenue		Net gain or (loss) fro Gross sales pnce for assets on line 6a		of asse	ts not on line 10 160,812	2.	64,015						=
eve	7	Capital gain net in	come	(from	Part IV, line 2)			1	64,015.				
ď	8	Net short-term ca		•	•								
	9	Income modificati	ons ·										
		Gross sales less retur and allowances • •				_		· ·			 -		
	l	Less Cost of goods s	-			+							
		Gross profit or (los				•				-		i	
	11	Other income (att					583,262	. 5	83,262.			·	
-	12	Total. Add lines 1 Compensation of of						d	10,100				
	14	Other employee s			_	- 1							_
es	15	Pension plans, en			-	•	- · ·						
ens	l	Legal fees (attach				•							
×	ь	Accounting fees (attach	sched	ule)ATCH 2	•	25,300		12,650.		_	12,	650
and Administrative Expense	c	Other professiona											
aţį	17	Interest . R.F.	CF	'i\ /[-D].								
str	18	Taxes (attach sched	<u> </u>	• -	ions)	* *	74,148	•	22,148.				
Ē	19	Deprégation (atta	ch _a sc	:beduje	and depeton		·						
Å	20	Occupancy .U.L.	l. ≛.	∓ Yñ	14								
9	21	Travel conferenc			ings 💢								
l ar	22	Printing and publ	cáto	N··	114			ļ				<u> </u>	750
Operating	23	Other expenses			ie ATCH 4	·	950	<u> </u>	200.		*		750
irat	24	Total operating a			rative expense	s.	100 200		24 000			13	400
g	-	Add lines 13 thro	-			•	100,398		34,998.			3,125,	
_	25	Contributions, gif	-	•		• —	3,125,571		34 000			0 3,123,	
_	26	Total expenses and dis			id lines 24 and 2	25	3,225,969	1	34,998.			3,130,	 _
	27	Subtract line 26 f				-	-2,642,707						i
	1	Excess of revenue over			-	•	2,042,707		48,264.				
	l p	Net investment i	ncome	e (ir ne	gauve, enter -0	7 L			,				

c Adjusted net income (if negative, enter -0-). .

For Paperwork Reduction Act Notice, see instructions.

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** ATCH 001-23254-400

Form 990-PF (2011)

PAGE 2

Part II

Assets

12

15

16

17

18

19 Liabilities 20

21

22

23

25

26

27 28

29

30

31

Balances 24

Fund

ö

Beginning of year

(a) Book Value

209,417.

3,471,000.

2,340,625.

17,170,595.

23,213,225

23,213,225.

23,213,225.

21,588.

.

Attached schedules and amounts in the

amounts only (See instructions)

Balance Sheets description column should be for end-of-year

Accounts receivable Less allowance for doubtful accounts ▶ _____ Pledges receivable

Less allowance for doubtful accounts ▶ _____ Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts ▶ _____ Inventones for sale or use

Investments - other (attach schedule) ATCH 6

Other assets (describe ATCH 7)

Total assets (to be completed by all filers - see the

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule)

Other liabilities (describe

10 a Investments - U S and state government obligations (attach schedule). b Investments - corporate stock (attach schedule) c Investments - corporate bonds (attach schedule). Investments - land, buildings, and equipment basis

Investments - mortgage loans

Grants payable

Total liabilities (add lines 17 through 22)

Foundations that do not follow SFAS 117,

Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31.

check here and complete lines 27 through 31. $\blacktriangleright |X|$

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg , and equipment fund

Retained earnings, accumulated income, endowment, or other funds . .

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis
Less accumulated depreciation

(attach schedule)

	instructions)	23,213,225.	20,570,518.	
E	art III Analysis of Changes in Net Assets or Fund E	Balances		
1	Total net assets or fund balances at beginning of year - Part I end-of-year figure reported on prior year's return)		1 1	23,213,225
2	Enter amount from Part I, line 27a			-2,642,707
3	Other increases not included in line 2 (itemize) ▶		3	
4	Add lines 1, 2, and 3		4	20,570,518
5	Decreases not included in line 2 (itemize) ▶		5	
6	Total net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II, column (b), II	ne 30 6	20,570,518
_	*******		-	Form 990-PF (2011

ATCH 5

20,570,518.

20,570,518.

	number of years the foundation has been in existence if less than 5 years	3	0.062877
4	Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	33,775,404.
5	Multiply line 4 by line 3	5	2,799,204.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	5,483.
7	Add lines 5 and 6	7	2,804,687.
8	Enter qualifying distributions from Part XII, line 4	8 hat part	3,138,971.
	Part VI instructions	Fu	

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JSA

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4DW0C4 0114

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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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011? .

X

X

om	990-PF (2011) DONALD A. PELS	CHARITABLE	TRUST U/T/D 8	3/18/92 13-6	5998091	Page 6
Par	VII-B Statements Regarding Activities fo	r Which Form 47	20 May Be Requi	ired (continued)		
5,a	During the year did the foundation pay or incur any amour	nt to		· · · · · · · · · · · · · · · · · · ·		1
	(1) Carry on propaganda, or otherwise attempt to influen	ce legislation (section	4945(e))?	. Yes X No		1
	(2) Influence the outcome of any specific public elec-	ction (see section 4	955), or to carry or	١,		
	directly or indirectly, any voter registration drive?			. Yes X No		,
	(3) Provide a grant to an individual for travel, study, or oth	ner sımılar purposes?		. Yes X No	.	1
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described i			
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	ee instructions)		. Yes X No	·	
	(5) Provide for any purpose other than religious, cha		•			
	purposes, or for the prevention of cruelty to children o	r anımals?		. Yes X No	·	,
þ	If any answer is "Yes" to 5a(1)-(5), did any of the		• •	xceptions described in		
	Regulations section 53 4945 or in a current notice regard	-	,	· · · · · · · · · · · · · · · · · · ·	5b	
	Organizations relying on a current notice regarding disasti			· · · · · · · 		ì
С	If the answer is "Yes" to question 5a(4), does the f		•			- 1
	because it maintained expenditure responsibility for the gr		• • • • • • • • •	. Yes No	'	
e -	If "Yes," attach the statement required by Regulations sect	• •	atly to now areas	•		
оа	Did the foundation, during the year, receive any function a personal benefit contract?	•				4
ь	Did the foundation, during the year, pay premiums, direc			. — —	6ь	X
_	If "Yes" to 6b, file Form 8870	try or maneotry, on a p	ersonal beliefit contrat			
7 a	At any time during the tax year, was the foundation a pai	rty to a prohibited tax	shelter transaction?	Yes X No	,	
	If "Yes," did the foundation receive any proceeds or have		•	• —	7ь	" '
Pai	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers,	Highly Paid Emplo	oyees,	
1	and Contractors List all officers, directors, trustees, foundation n	nanagers and their	compensation (see	instructions).		
•	 	(b) Title, and average	(c) Compensation			
	(a) Name and address	hours per unch	(c) Compensation	(d) Contributions to	(e) Expens	
	(a) Name and address	hours per week devoted to position	(If not paid, enter	employee benefit plans and deferred compensation		se account, owances
		hours per week	(If not paid, enter	employee benefit plans		owances
AT'	· · · · · · · · · · · · · · · · · · ·	hours per week	(If not paid, enter	employee benefit plans		
AT'		hours per week	(If not paid, enter	employee benefit plans		owances
AT'	FACHMENT 8	hours per week	(If not paid, enter	employee benefit plans		owances
AT'	FACHMENT 8	hours per week	(If not paid, enter	employee benefit plans		owances
AT'	FACHMENT 8	hours per week	(If not paid, enter	employee benefit plans		owances
AT'	FACHMENT 8	hours per week	(If not paid, enter	employee benefit plans		owances
AT'	FACHMENT 8	hours per week devoted to position	(If not paid, enter	employee benefit plans and deferred compensation	other all	0
	FACHMENT 8	hours per week devoted to position	(If not paid, enter	employee benefit plans and deferred compensation C	other all	0
2	Compensation of five highest-paid employees "NONE."	devoted to position (other than thos	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C d) Contributions to employee benefit	ons). If no	one, enter
2	FACHMENT 8 Compensation of five highest-paid employees	devoted to position	(If not paid, enter	employee benefit plans and deferred compensation C C T O O O O O O O O O O O O	ons). If no	owances 0 one, enter
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter
2	Compensation of five highest-paid employees "NONE."	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter
2 (a	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	devoted to position (other than those) (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation C C (d) Contributions to employee benefit plans and deferred	ons). If no	one, enter

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	34,083,128.
b	Average of monthly cash balances	1b	206,622.
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	34,289,750.
0	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	
3		3	34,289,750.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	514,346.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	33,775,404.
6	Minimum investment return. Enter 5% of line 5	6	1,688,770.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this p	oart.)	
1	Minimum investment return from Part X, line 6	1	1,688,770.
2 a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	5,483.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,683,287.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,683,287.
6	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	1,683,287.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	3,138,971.
b	Program-related investments - total from Part IX-B	1b	
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,138,971.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	5,483.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,133,488.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years.	lculating	whether the foundation

Form 990-PF (2011)

a Excess from 2007 . . .

b Excess from 2008 . . .

c Excess from 2009 . . .

d Excess from 2010 . . .

e Excess from 2011 . . .

1,753,923.

2,242,538.

1,541,890.

1,455,684.

Form 990-PF (2011)

factors:

c Any submission deadlines.

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

Part XV Supplementary Information (continued)									
3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Purpose of grant or contribution Amount Purpose of grant or contribution Purpose of grant									
Recipient	it recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount					
Name and address (home or business)	any roundation manager or substantial contributor	recipient	contribution						
Name and address (home or business) a Paid during the year SEE ATTACHED STATEMENT	snow any reauonship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	3,125,571.					
Total	1	1	▶ 0-	3,125,571.					
Total	 		▶ 3a	3,123,3/1.					
b Approved for future payment Total			▶ 3b						

Part XVI-	A Analysis of Income-Produ	icing Activ	<i>r</i> ities			
	amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
1 Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
-						(GGG MIGH GGR AND)
				-	-	
f						
g Fees a	and contracts from government agencies					
2 Members	ship dues and assessments					
3 Interest or	n savings and temporary cash investments		_	14		
4 Dividends	s and interest from securities			14	519,247.	
5 Net renta	al income or (loss) from real estate			<u> </u>		
a Debt-	financed property					
b Not d	ebt-financed property					
6 Net rental	income or (loss) from personal property .					
7 Other inv	vestment income					
8 Gain or (lo	oss) from sales of assets other than inventory			18	64,015.	
9 Net incor	me or (loss) from special events					
O Gross pro	ofit or (loss) from sales of inventory		<u>-</u> -			
1 Other rev	venue a			 		
b				ļ <u>.</u>		
						
d			<u> </u>	 -		<u> </u>
е			<u> </u>		583,262.	<u>.</u>
	Add columns (b), (d), and (e)					
	dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc				13	000,2021
Part XVI-			complishment of Ex	remnt Puri	2020	
Line No.	Explain below how each activity	ty for whic	h income is reported	ın column (e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation	on's exemp	ot purposes (other than	by providin	g funds for such purpose	s). (See instructions.)
			_	<u> </u>		
				.		
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<u> </u>			··· -			
	l					

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DONALD A. PELS CHARITABLE TRUST U/T/D 8/18/92

Part >	(VII)	Information Re Exempt Organ		nsfers To and Trans	actions	and Relationships W	ith Nonc	hari	table	,
ın		organization directl on 501(c) of the Co	y or indirectly			any other organization on section 527, relating to			Yes	No
			-	a noncharitable exempt o	_			1a(1)	-	x
								1a(2)		Х
		ansactions					,,,,,			
								1b(1)		X
								1b(2)		X
								1b(3)	_	$\frac{\lambda}{x}$
(4) Kein	nbursement arrange	ements		• • • • •			<u>1b(4)</u> 1b(5)		$\frac{x}{x}$
(0) Loai N Perf	ormance of service	s or membersh	or fundraising solicitation	ns			1b(6)		X
								1c		х
						le Column (b) should al		the	faır n	narket
						tion. If the foundation red				
		any transaction or			T	lue of the goods, other a				
(a) Line	no	(b) Amount involved	(c) Name of r	oncharitable exempt organization		Description of transfers, transac	tions, and share	ng ama	angeme	nts
	-				N.	'A				
	+-									
		_								
	_									
			<u> </u>							
		······································								
				·						
d	escrib	ed in section 501(c) complete the follo	of the Code (owing schedule	ther than section 501(c)(3	3)) or in se	more tax-exempt organiz	['es []	No
		(a) Name of organizatio	n	(b) Type of organizat	tion	(c) Descrip	tion of relations	nıp		
						·-·				
										
	Under	penalties of penjury, I decl	are that I have exam	ned this return, including accompar axpayer) is based on all information of	nying schedule which prepar	s and statements, and to the best or has any knowledge.	of my knowledg	e and	belief,	t is true,
Sign Here		mood	Pole	19/24/12		Trista	May the IRS			return below
HEIG	Sign	ature of officer or trustee		Date	Title	71071-9	(see instruction:	• _	Yes	X
							<u> </u>			
Paid		Print/Type preparer's	name ///	Preparer's signature	200	10/20/4	eck	NIT		
Prepa	arer	MARY (, Ke 1/4	May Cle			f-employed			70
Use (NG U.S. LL/#		Firm's E	N ► 34-6	565	596	
U36 (J.IIY	Firm's address > 5		ARE NY		10036 Phone n	o 212-7	73-1	3000	
		I II	TATAL I	.T I		10036 Phone n	U -12-1			

Form 990-PF (2011)

Phone no

DONALD A. PELS CHARITABLE TRUST U/T/D 8/18/92 13-6998091

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of P	roperty						Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis	Excess of FMV over	D	Gain or	
expenses of sale	allowable	basis	12/31/69	as of 12/31/69	adj basis	H	(loss)	
		TOTAL CAPI	TAL GAIN DI	STRIBUTIONS			56,640.	
		1						
OTAL GAIN(L	oss)]			<i>.</i>		64,015.	
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						11		
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ATTACHMENT

V 11-6

001-23254-400

ATTACHMENT 1 PAGE 16

PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

NET INVESTMENT INCOME	122,577. 140,307. 6,417. 72,658. 71,227. 96,182. 9,545.	519,247.
REVENUE AND EXPENSES PER BOOKS	122,577. 140,307. 6,417. 72,658. 71,227. 96,182.	519,247.
DESCRIPTION	VANGUARD SMALL CAPITALIZATION FUND VANGUARD INSTITUTIONAL INDEX FUND AMERICAN FUNDS - SMALL CAP WORLD FUND AMERICAN FUNDS - EUROPACIFIC GROWTH FUND COLUMBIA ACORN INTERNATIONAL FUND Z FIDUCIARY TRUST COMPANY - INTEREST FIDUCIARY TRUST COMPANY - DIVIDEND MSIF EMERGING MARKET CL-1	TOTAL

ATTACHMENT 2

v 11-6

FEES
ACCOUNTING
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н
PART
990PE,
FORM

CHARITABLE PURPOSES	12,650.	12,650.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	12,650.	12,650.
REVENUE AND EXPENSES PER BOOKS	25,300.	25,300.
		TOTALS
DESCRIPTION	ERNST & YOUNG LLP	

13-6998091

ATTACHMENT 3

FORM 990PF, PART I - TAXES

DONALD A. PELS CHARITABLE TRUST U/T/D 8/18/92

	NET	INVESTMENT	INCOME	22,148.		22,148.
REVENUE	AND	EXPENSES	PER BOOKS	22,148.	52,000.	74,148.
						TOTALS
				PAID		
			DESCRIPTION	FOREIGN TAXES I	EXCISE TAXES	

3. 22,148. 001-23254-400 ATTACHMENT 4

ATTACHMENT 4 PAGE 19

EXPENSES
OTHER
_
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PART
990PF,
FORM

NET INVESTMENT	
REVENUE AND EXPENSES	PER BOOKS 750.
	DESCRIPTION NYS FILING FEE FIDUCIARY TRUST FEES

CHAKITABLE PURPOSES 750.	
--------------------------------	--

750.

200.

950.

TOTALS

ATTACHMENT 5 PAGE 20

I 5	ENDING <u>FMV</u>	937,195. 1,446,868.	2,384,063.	
ATTACHMENT 5	ENDING BOOK VALUE	871,172. 1,372,656.	2,243,828.	
AND STATE OBLIGATIONS	BEGINNING BOOK VALUE	967,969. 1,372,656.	2,340,625.	
FORM 990PF, PART II - U.S. AND STAT	DESCRIPTION	US T-NOTES 3.875%DUE 2/15/2013 US T-NOTES 4.0% DUE 11/15/2012	US OBLIGATIONS TOTAL	

ATTACHMENT 6 PAGE 21

ATTACHMENT 6

FORM 990PF, PART II - OTHER INVESTMENTS

ENDING FMV	2,444,123. 3,722,425. 1,582,209. 3,067,241. 6,928,317. 8,980,387.
ENDING BOOK VALUE	1,671,084. 3,075,005. 1,316,820. 2,898,143. 3,770,795. 4,895,971.
BEGINNING BOOK VALUE	1,599,857. 3,013,572. 1,311,781. 2,841,503. 3,630,488. 4,773,394.
DESCRIPTION	COLUMBIA ACORN INTL FUND AMERICAN FUNDS - EUROPACIFIC AMERICAN FUNDS - SMALLCAP MORGAN STANLEY - EMERGING MKT VANGUARD INSTITUTIONAL INDEX VANGUARD SMALL CAPITALIZATION TOTALS

001-23254-400

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ENT /		ENDING <u>FMV</u>	18.	18.
ATTACHMENT		ENDING BOOK VALUE	18.	18.
		BEGINNING BOOK VALUE	38. 21,550.	21,588.
	FORM 990PF, PART II - OTHER ASSETS	DESCRIPTION	ACCRUED DIVIDENDS - FIDUCIARY REIMBURSEMENT RECEIVABLE	TOTALS

ATTACHMENT 8

DONALD A. PELS CHARITABLE TRUST U/T/D 8/18/92

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

TRUSTEE

0

0

0

DONALD A. PELS 63 EAST 79TH STREET NEW YORK, NY 10021

GRAND TOTALS

SCHEDULE D (Form 1041)

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2011

Department of the Treasury Internal Revenue Service

Name of estate or trust
DONALD A. PELS CHARITABLE TRUST U/T/D 8/18/92

Employer identification number 13-6998091

Note	: Form 5227 filers need to complete only Par					
Part	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar or Less	·	
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a						
						
	·					
h	Enter the short-term gain or (loss), if any, fr	om Schadula D	∟1 line 1h		1b	
b	Lines the short-term gain or (loss), it any, it	om Schedule D	-1, III.E 10			
2	Short-term capital gain or (loss) from Form	ıs 4684, 6252,	6781, and 882	4	2	
3	Net short-term gain or (loss) from partners	hips, S corpora	tions, and other	estates or trusts	3	
4	Short-term capital loss carryover. Enter	the amount, i	if any, from li	ine 9 of the 2010	Capital Loss	,
5	Carryover Worksheet		 ah 4 ın colum		4 d on line 13	,
	column (3) on the back					
Par		1		han One Year		(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	the entire year Subtract (e) from (d)
6a					1	
		0	4.1.01			7 275
b	Enter the long-term gain or (loss), if any, fr	om Schedule D-	-1, line 6b		<u>6</u> ь	7,375.
7	Long-term capital gain or (loss) from Form	ns 2439, 4684,	6252, 6781, a	nd 8824		
8	Net long-term gain or (loss) from partnersh	nios. S corporat	ions, and other	estates or trusts	8	
•						
9	Capital gain distributions				9	56,640.
10	Gain from Form 4797, Part I					
11	Long-term capital loss carryover. Enter	the amount, if	f any, from lii	ne 14 of the 2010	Capital Loss	
12	Carryover Worksheet	nes 6a through	h 11 in colum	n (f). Enter here and	on line 14a,	
	column (3) on the back			* *	▶ 12	
For F	Paperwork Reduction Act Notice, see the Instru	ctions for Form 1	1041.		Schedi	ule D (Form 1041) 2011

JSA

1F1210 2 000 4 DW 0C4 0114

chedule D (Rorm 1041) 2011			Page 2
Part III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	/2) Total
Caution: Read the instructions before completing this part	(see instr)	or trust's	(3) Total
Net short-term gain or (loss)			
4 Net long-term gain or (loss):			64 015
a Total for year	a		64,015.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.) 14			
c 28% rate gain			64,015.
5 Total net gain or (loss). Combine lines 13 and 14a ▶ 15		<u> </u>	
ote: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fi ains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, compl	orm 990-T, Part I, line lete Part IV and the Cap i	4a) If lines 14a and 15 tal Loss Carryover Works	5, column (2), are net sheet as necessarv
Part IV Capital Loss Limitation	- art it and the sup.		
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I	line 4e if e taiet\ the i	emaller of	
		1 40 1/	,
a The loss on line 15, column (3) or b \$3,000 or if Form 1041, page 1,	line 22 (or Form 990-T.	line 34), is a loss, comp	plete the Capital Loss
arryover Worksheet in the instructions to figure your capital loss carryover	<u>'</u>		
Part V Tax Computation Using Maximum Capital Gains Rates			
orm 1041 filers. Complete this part only if both lines 14a and 15 in column		imount is entered in F	Part I or Part II and
nere is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more th			
aution: Skip this part and complete the Schedule D Tax Worksheet in the instr Either line 14b, col (2) or line 14c, col (2) is more than zero, or	uctions ii		
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero			
orm 990-T trusts. Complete this part only if both lines 14a and 15 are ga	ains, or qualified divi	dends are included i	n income in Part I
f Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and o			
either line 14b, col (2) or line 14c, col. (2) is more than zero			
7 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17		
8 Enter the smaller of line 14a or 15 in column (2)			
but not less than zero			
9 Enter the estate's or trust's qualified dividends			
from Form 1041, line 2b(2) (or enter the qualified			
dividends included in income in Part I of Form 990-T) 19			
0 Add lines 18 and 19			
1 If the estate or trust is filing Form 4952, enter the			
amount from line 4g; otherwise, enter -0 > 21			
2 Subtract line 21 from line 20. If zero or less, enter -0	22		
Subtract line 22 from line 17. If zero or less, enter -0	23		
Enter the smaller of the amount on line 17 or \$2,300	24		
5 Is the amount on line 23 equal to or more than the amount on line 24?			
Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.			
No. Enter the amount from line 23	25		
Subtract line 25 from line 24	26		
Are the amounts on lines 22 and 26 the same?			
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27		
Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
Subtract line 28 from line 27			
Multiply line 29 by 15% (.15)	chadula for Catatan		
(see the Schedule Ginstructions in the instructions for Form 1041)		31	
32 Add lines 30 and 31		32	
32 Add lines 30 and 31	chedule for Estatos		
33 Figure the tax on the amount on line 17. Use the 2011 Tax Rate S (see the Schedule Ginstructions in the instructions for Form 1041)			
		I +	
G, line 1a (or Form 990-T, line 36)			ule D /Form 1041) 201

JSA 1F1220 2 000 Schedule D-1 (Form 1041) 2011 Page 2

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side DONALD A. PELS CHARITABLE TRUST U/T/D 8/18/92

Employer identification number 13-6998091

Part II Long-Term Capital Gains a	nd Losses - Asset	s Held More Tha	n One Year		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
100,000 SHS US TREAS 2/15/03	07/30/2003	12/29/2011	104,172.	96,797.	7,375
			<u> </u>		
· · · · · · · · · · · · · · · · · · ·					
					
	<u></u>	<u> </u>			
·		<u> </u>			
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_					
b Total. Combine the amounts in colum	(0.5.)		- 0	<u> </u>	7,375

STATE OF NEW YORK

County of New York,

PUBLIC NOTICES

THE ANNUAL RETURN OF The Donald A. Pels Charitable Trust ut/d 8/18/92 FOUNDATION. For the calendar year ended December 31, 2011 is available at its principal office located at 63 East 79th Street, New York, New York 10021 for inspection during regular business hours by any citizen who requests it within 180 days hereof. Principal Manager of the Foundation is Donald A. Pels. 1912125 jy6

Mary Pawlina, being duly sworn, says that she is the PRINCIPAL CLERK of the Publisher of the **NEW YORK LAW**JOURNAL, a Daily Newspaper; that the Advertisement hereto annexed has been published in the said **NEW YORK LAW**JOURNAL one time on the 6th day of July, 2012.

TO WIT: JULY 6, 2012

SWORN BEFORE ME, this 6th day

Of July, 2012.

/ Cynthia Byrd
Notary Public, State of New Yorl

No. 01BY6056945

Qualified in Kings County Commission Expires April 09, 2015

	SCHEDULE OF 2011	ABLE TRUST U/T/D 8/18/92 CHARITABLE GRANTS		
	FEIN:13	3-6998091		
				·
Recipient Name	Foundation Status	Purpose of Grant/Contribution		Amount
sphait Green	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		25 000 00
amard College	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	-	50 000 00
vrd Hoffman Watermill Foundation	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		3 000 00
arl Schurz Park Conservancy	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		5 000 00
arl Schurz Park Conservatory	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1,000 00
heckerboard Foundation	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		5,000 00
ity Harvest	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		3,000 00
ompassion & Choices NY	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	\rightarrow	30 000 00
coper Hewit	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		9 000 00
reative Time	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization To Promote the work of the Organization	\rightarrow	5,000 00
ana's Angels Jana's Angels Research	501(c)(3) & 170(b)(1)(a) 501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		5 000 00
lana's Anges Research loctors Without Borders	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		100 000 00
Duke University	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1,000 00
ast End Hospice	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1,000 00
amily Counseling Service	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		500 00
itm Forum	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1,000 00
ootsteps	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		10 000 00
riends of BAM	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	\perp	500 00
nends of the High Line	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	$-\!\!+\!\!\!+$	1 000,000 00
riends of Westhampton Beach Performing Arts	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	- $+$	100 00
Governer's Island Association	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	\longrightarrow	5,000 00
Guggenheim	501(c)(3) & 170(b)(1)(a) 501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization To Promote the work of the Organization	- 	1,000 00
Harlem Stage Henry Street Settlement	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1,000 00
Human Rights Watch	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1 000,000 00
tumane Farm Animai Care	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		2 500 00
earning Leaders	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		6 000 0
uncoin Center For Performing Arts	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		15,000 0
upus Foundation	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		5,000 0
Aaysles Institute	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1,000 0
Aichael Wolk Heart Foundation	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		10 000 0
Moma Contemporary Arts Council	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	-+	1 000 0 26,000 0
Auseum of Art & Design	501(c)(3) & 170(b)(1)(a) 501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization To Promote the work of the Organization	-H	5,000 0
Museum of Modern Art New Dramatists (Duke Univ)	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	-	1 000 0
NPR Foundation	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		15 000 0
NRDC	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		2 000 0
VY Philamonic	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		50,000 0
NY Philharmonic	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		138,357 0
NY Presbyterian Fund, Inc	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		168,686 0
NY Presbytenan Hospital	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		166 667 0
NY Women in Film & Television	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		2 000 0
Park Ave Armory	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	-+	3,000 0
Peer Gynt Project	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization To Promote the work of the Organization	$\overline{}$	500 0 5,000 0
Planned Parenthood Hudson Peconic Poet's House	501(c)(3) & 170(b)(1)(a) 501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	++	2,000 0
Poet's House Prep for Prep		To Promote the work of the Organization	++	5 000 0
Public Art Fund	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1 000 0
Public Radio International	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		10,000 0
Regional Plan Association	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		5 000 0
Riverdale Country School	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		15,000 0
Rockefeller University	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	\bot	50,000 0
The Century Association	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	\longrightarrow	3,781 3
The Doe Fund	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1 000 0
The Film Society of Lincoln Center	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization To Promote the work of the Organization	 	53 000 0 25 000 0
The Metropolitan Museum of Art	501(c)(3) & 170(b)(1)(a) 501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization	 	5,000 0
The NY Botanical Gardens The Body Avenue Armony	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		5,000 0
The Park Avenue Armory Thurteen WNET	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		10,000 0
Wave Hill	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1 000 0
West Hampton Beach for the Performing Arts	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		25,000 (
Westhampton Beach Fire Dept	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		200 0
Westhampton Beach Performing Arts	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		300 (
Whitney Museum of American Art	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		10,000 (
World Monuments Fund	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		2 000 (
World Music Productions	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		500 (
Yale University	501(c)(3) & 170(b)(1)(a)	To Promote the work of the Organization		1,000 (
				2 425 67
Total			}	3,125,57
Less Refunded Chantable Grants			1l	

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Form 8868 (Re	ev 1-2012)				P.ige 2	
 If you are 	e filing for an Additional (Not Automatic) 3-Me	onth Extens	sion, complete only Part II a	and check this box	> X	
Note. Only	complete Part II if you have already been gra	nted an aut	omatic 3-month extension o	on a previously filed Form 8868		
 If you are 	e filing for an Automatic 3-Month Extension, o	complete o	nly Part I (on page 1)			
Part II	Additional (Not Automatic) 3-Month Ex			nal (no copies needed).		
	Enter filer's identifying number, see instruction					
	Name of exempt organization or other filer, see instructions			Employer identification number (EIN) or		
Type or						
print	DONALD A. PELS CHARITABLE TRUST U/T/D 8/18/92			X 13-6998091		
Pint	Number, street, and room or suite no. If a P.O. box, see instructions			Social security number (SSN)		
File by the	63 EAST 79TH STREET APT. 4B					
due date for filing your	· · · · · · · · · · · · · · · · · · ·					
return See	ee Name and a second					
Instructions				f	0 4	
	eturn code for the return that this application			ch return)	, 	
Application		Return	Application		Return	
ls For		Code	Is For		Code	
Form 990		01				
Form 990-BL		02	Form 1041-A		80	
Form 990-EZ		01	Form 4720		09	
Form 990-PF		04	Form 5227		10	
Form 990-T (sec 401(a) or 408(a) trust)		0.5	Form 6069		11	
Form 990-T	「(trust other than above)	06	Form 8870		12	
STOP! Do r	not complete Part II if you were not already	granted ar	automatic 3-month extens	sion on a previously filed For	m 8868.	
The book	ks are in the care of ▶ DONALD A. PELS					
	ne No ▶ 212 39 6-0476		AX No ▶			
	ganization does not have an office or place of	— business in	the United States, check the	s box	▶ [
	for a Group Return, enter the organization's fo				nis is	
	ple group, check this box					
	names and EINs of all members the extension		int or the group, check this b	ox	2011 4	
~			11	1/15 , 20 12		
· · · · · · · · · · · · · · · · · · ·						
6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return						
Change in accounting period						
INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.						
	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
	nrefundable credits. See instructions. 8a \$ 10,000					
	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 📑						
amou	8b \$	45,416.				
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS					11	
(Electronic Federal Tax Payment System). See instructions.						
	Signature and Verific	ation mu	st be completed for Pa	art II only.		
	es of perjury, I declare that I have examined this form,	including acc		•	ige and belief,	
n is true, corre	ect, and complete, and that I am authorized to prepare this fo	UIII			,	
, , , , ,	May C 20L		Title > C PA	3)	3/12	
Signature >	May Calh		Title >	Date ▶ X	7111	
	,			Form 8868	(Rev 1-2012)	