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#### Form **990-PF**

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

Treated às a Private Foundation

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements and ending For calendar year 2011 or tax year beginning Name of foundation A Employer identification number 13-7154951 THE DAVID B AND MAY T SKINNER FOUNDATION Room/suite Number and street (or P O box number if mail is not delivered to street address) B Telephone number 212-686-7160 7484 TOWNLINE ROAD C if exemption application is pending, check here City or town, state, and ZIP code VICTOR, NY 14564 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 22,237. (Part I, column (d) must be on cash basis.) ▶\$ Part I | Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) chantable purposes (cash basis only) expenses per books income income 22,528 ·N/A Contributions, gifts, grants, etc., received Check In the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 2 2. STATEMENT 3 2,010. 2,010 Dividends and interest from securities 5a Gross rents h Net rental income or (loss) -1,079: . 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 131,066. J-14 2 -5 221 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications ss Cost of Goods (So c Gross profit or (loss) OSC 11 Other income 2 2 8 77112

12 Total Add lines 1 through 77112 23,461 22,233 0. moerisation of officers-directors-trustee Other employee salaries and wades Pension plans, employee benefits 15 16a Legal fees 5,207. 5,207 10,414 **b** Accounting fees STMT 4 c Other professional fees Operating and Administrative 17 Interest 0. 0. 8 . 18 STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 243 243 0 STMT 23 Other expenses 24 Total operating and administrative 10,665 5,450. expenses. Add lines 13 through 23 49,963 49,963 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 60,628 207 55,413. Add lines 24 and 25 27 Subtract line 26 from line 12: 37,167 Excess of revenue over expenses and disbursements

123501 12-02-11 LHA For Paperwork Reduction Act Notice, see instructions.

b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)

Form **990-PF** (2011)

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| Fo                   | orm 9 | 90-PF(2011) THE DAVID B AND MAY T S  | KINNER FOUNDA      | TION 13-       | 7154951 Page 2   |
|----------------------|-------|--|--------------------|----------------|--|
|                      | Part  | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year  |                | of year  |
|                      | Part  | column should be for end-of-year amounts only  | (a) Book Value     | (b) Book Value | (c) Fair Market Value  |
|                      | 1     | Cash - non-interest-bearing  | 6,247.             | 12,061.        | 12,061.  |
|                      | 2     | Savings and temporary cash investments   |                    |                |  |
|                      | 3     | Accounts receivable -  |                    | ·              |  |
|                      |       | Less: allowance for doubtful accounts  |                    |                |  |
|                      | 4     | Pledges receivable >   | ] `                |                |  |
|                      |       | Less: allowance for doubtful accounts ▶  |                    |                |  |
|                      | 5     | Grants receivable  |                    |                |  |
|                      | 6     | Receivables due from officers, directors, trustees, and other  |                    |                |  |
|                      | 1     | disqualified persons   |                    |                |  |
|                      | 7     | Other notes and loans receivable   |                    | A-2 32 44 44   | (**;   |
|                      |       | Less: allowance for doubtful accounts ▶  |                    |                |  |
| ম                    | 8     | Inventories for sale or use  |                    |                |  |
| Assets               | 9     | Prepaid expenses and deferred charges  |                    |                |  |
| ä                    | 10a   | Investments - U.S. and state government obligations  |                    |                |  |
|                      | b     | Investments - corporate stock  |                    |                |  |
|                      | c     | Investments - corporate bonds  |                    |                |  |
|                      | 11    | Investments - land, buildings, and equipment basis   |                    |                |  |
|                      | 1     | Less accumulated depreciation  |                    |                |  |
|                      | 12    | Investments - mortgage loans   |                    |                |  |
|                      | 13    | Investments - other STMT 8   | 53,263.            | 10,282.        | 10,176.  |
|                      | 14    | Land, buildings, and equipment basis   |                    |                |  |
|                      | Ì     | Less accumulated depreciation  |                    |                |  |
|                      | 15    | Other assets (describe ►)  |                    |                |  |
|                      |       |  |                    |                |  |
| _                    | 16    | Total assets (to be completed by all filers)   | 59,510.            | 22,343.        | 22,237.  |
|                      | 17    | Accounts payable and accrued expenses  |                    |                |  |
|                      | 18    | Grants payable   |                    |                |  |
| Š                    | 19    | Deferred revenue   |                    |                |  |
| Liabilities          | 20    | Loans from officers, directors, trustees, and other disqualified persons                                       |                    |                |  |
| abi                  | 21    | Mortgages and other notes payable  |                    |                |  |
| _                    | 22    | Other liabilities (describe >)   |                    |                |  |
|                      |       |  |                    |                |  |
| _                    | 23    | Total liabilities (add lines 17 through 22)  | 0.                 | 0.             |  |
|                      |       | Foundations that follow SFAS 117, check here   |                    |                | and the same of th |
|                      |       | and complete lines 24 through 26 and lines 30 and 31.  |                    |                |  |
| <b>Fund Balances</b> | 24    | Unrestricted   |                    |                |  |
| <u>a</u>             | 25    | Temporarily restricted   |                    |                | ا من الله الأمراط الأمراط الأمراط الله الأمراط الله الأمراط الله الأمراط الله الأمراط الله الأمراط الله الأمراط<br>المن الله الله الله الله الله الله الله الل   |
| Ва                   | 26    | Permanently restricted   |                    |                |  |
| 힡                    |       | Foundations that do not follow SFAS 117, check here  |                    |                |  |
| Ē                    |       | and complete lines 27 through 31.  |                    | _              |  |
| 8                    | 27    | Capital stock, trust principal, or current funds   |                    | 0.             |  |
| set                  | 28    | Paid-in or capital surplus, or land, bldg., and equipment fund   | 0.                 |                |  |
| Net Assets or        | 29    | Retained earnings, accumulated income, endowment, or other funds   | 59,510.            | 22,343.        | STATEMENT 7  |
| Šet                  | 30    | Total net assets or fund balances  | 59,510.            | 22,343.        | Tuge , with the second of the  |
| _                    |       |  |                    |                |  |
|                      | 31    | Total liabilities and net assets/fund balances   | 59,510.            | 22,343.        |  |
| ها                   | art   | Analysis of Changes in Net Assets or Fund B  | alances            |                |  |
| _                    |       |  |                    |                |  |
|                      |       | net assets or fund balances at beginning of year - Part II, column (a), line                                   | 30                 |                |  |
|                      |       | t agree with end-of-year figure reported on prior year's return)   | •                  | 1              | <u>59,510.</u>   |
| 2                    | Enter | amount from Part I, line 27a   |                    | 2              | -37,167.   |
| -                    |       | increases not included in line 2 (itemize)   |                    | 3              | 0.   |
| -                    |       | ines 1, 2, and 3   | 4                  | 22,343.        |  |
| -                    |       | eases not included in line 2 (itemize)   |                    | 5              | 0.   |
| 6                    | Total | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co                                 | olumn (b), line 30 | 6              | 22,343.  |
|                      |       |  |                    |                | Form <b>990-PF</b> (2011)  |

|  | and Losses for Tax on Ir ribe the kind(s) of property sold (e.g |                                   | t income                             | (b) H            | low a           | cquired<br>hase       | (c) Date acquire                    | ed (d) Date sold        |
|--|---|-----------------------------------|--------------------------------------|------------------|-----------------|-----------------------|-------------------------------------|-------------------------|
| 2-story brick wa   | arehouse; or common stock, 200 sh                               | s. MLC Co.)                       |                                      | D<br>D           | - Purc<br>- Don | hase<br>ation         | (mo., day, yr.)                     | (mo., day, yr.)         |
| <u>1a</u>  |   |                                   | <del></del>                          |                  |                 |                       |                                     |                         |
| b SEE ATTACHED   | STATEMENT   |                                   | <del></del>                          | -                |                 |                       |                                     |                         |
| d  |   |                                   |                                      | $\vdash$         |                 |                       |                                     |                         |
| e  |   |                                   |                                      |                  |                 |                       |                                     |                         |
| (e) Gross sales price  | (f) Depreciation allowed (or allowable)                         |                                   | st or other basis<br>expense of sale |                  |                 | <u> </u>              | (h) Gain or (<br>(e) plus (f) mi    |                         |
| <u>a</u>   |   |                                   |                                      | _                |                 |                       |                                     |                         |
| <u>b</u>   |   |                                   |                                      | <del>-  </del> - |                 | <del></del> -         | · <del></del>                       |                         |
| <u>c</u>   |   |                                   |                                      | +                |                 | <del></del>           |                                     |                         |
| e 131,066.   |   |                                   | 110,84                               | 5.               |                 |                       |                                     | 20,221.                 |
| Complete only for assets showing   | ig gain in column (h) and owned by                              | the foundation                    | on 12/31/69                          |                  |                 |                       | Gains (Col. (h)                     |                         |
| (i) F.M.V. as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69                            |                                   | cess of col. (1)<br>col. (j), if any |                  |                 | COI.                  | (k), but not less<br>Losses (from o |                         |
| <u>a</u>   | ····································                            |                                   |                                      |                  |                 | <del></del>           |                                     |                         |
| <u>b</u>   | <del> </del>  |                                   |                                      |                  | -               |                       |                                     |                         |
| d  | · · · · · · · · · · · · · · · · · · ·                           |                                   |                                      |                  |                 |                       |                                     |                         |
| е  |   |                                   |                                      |                  |                 |                       |                                     | 20,221.                 |
| 2 Capital gain net income or (net ca   | pital loss) If gain, also enter If (loss), enter -0-            | n Part I, line<br>In Part I, line | 7<br>7                               | }                | 2               |                       |                                     | 20,221.                 |
|  | s) as defined in sections 1222(5) an                            | d (6):                            |                                      |                  |                 |                       |                                     |                         |
| If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8    | column (c).   |                                   |                                      |                  | 3               |                       | N                                   | /A                      |
| Part V Qualification U   | nder Section 4940(e) for  | Reduced                           | Tax on Net                           | Inve             | stn             | ent Inc               |                                     |                         |
| For optional use by domestic private   | foundations subject to the section 4                            | 1940(a) tax on                    | net investment in                    | come.            | )               |                       |                                     |                         |
| f section 4940(d)(2) applies, leave th   | nis part blank.   |                                   |                                      |                  |                 |                       |                                     |                         |
|  |   |                                   | in the base nam                      |                  |                 |                       |                                     | Yes X No                |
| Nas the foundation liable for the sect<br>f "Yes," the foundation does not quali |   |                                   | -                                    | iour             |                 |                       |                                     | . L_1 162 LAL NO        |
|  | each column for each year; see instru                           |                                   |                                      | es.              |                 |                       |                                     |                         |
| (a)<br>Base period years   | (b)   |                                   |                                      | (c)              |                 |                       | D                                   | (d)<br>stribution ratio |
| Calendar year (or tax year beginning   |   |                                   | Net value of nor                     | ncharii          |                 |                       | (col. (b                            | ) divided by col. (c))  |
| 2010<br>2009   |   | <u>6,463.</u><br>7,886.           |                                      |                  |                 | <u>5,334</u><br>5,561 |                                     | .351276<br>.187168      |
| 2008   |   | 6,8 <u>55</u> .                   |                                      | •                |                 | 5,568                 |                                     | .257061                 |
| 2007   |   | 3,940.                            |                                      |                  |                 | 8,494                 |                                     | .287458                 |
| 2006   |   | 782.                              |                                      |                  | 3               | 9,338                 |                                     | .019879                 |
| 2 Total of line 1, column (d)  |   |                                   |                                      |                  |                 |                       | 2                                   | 1.102842                |
| Average distribution ratio for the 5<br>the foundation has been in existen       | i-year base period - divide the total once if less than 5 years | on line 2 by 5,                   | or by the number                     | of yea           | rs              |                       | 3                                   | .220568                 |
| Enter the net value of noncharitable   | le-use assets for 2011 from Part X, !                           | ine 5                             |                                      |                  |                 |                       | 4                                   | 72,816.                 |
| Multiply line 4 by line 3  |   |                                   | -                                    |                  |                 |                       | 5                                   | 16,061.                 |
| Enter 1% of net investment incom   | e (1% of Part I, line 27b)                                      |                                   |                                      |                  |                 |                       | 6                                   | 170.                    |
| Add lines 5 and 6  |   |                                   |                                      |                  |                 |                       | 7                                   | 16,231.                 |
| Enter qualifying distributions from  | Part XII, line 4  |                                   |                                      |                  |                 |                       | 8                                   | 55,413.                 |
| , , ,  | line 7, check the box in Part VI, line                          | 1b, and comp                      | lete that part using                 | g a 1%           | tax ra          | ate.                  |                                     |                         |

123521 12-02-11

| Eart VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)  1a Exempt operating foundations described in section 4940(a)(c), clost him bit and analysis of the section 4940(a)(c), clost him bit and the various of the section 4940(a)(c), clost him bit and the various of the section 4940(a)(c), clost him bit and the section 4940(a) and the section 4940(a)(c), clost him bit and the section 4940(a)(c), clost him bit and the section 4940(a)(c) and the section 4940(a)(c) trusts and taxable foundations only. Others enter 1% of Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(a)(f) trusts and taxable foundations only. Others enter -0-)  3 Add thes 1 and 2  3 Add thes 1 and 2  4 Subtlet & (normal) sax (domestic section 4947(a)(f) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or 858, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or 858, enter -0-  5 Exempt foreign oparazations - tax withheld at source  6 Subtract & (normal primets)  2 Otto estimated tax polyments and 2010 overpayment creded to 2011  5 Exempt foreign organizations - tax withheld at source  6 Subcept with organization for extension of time to the (Form 2856)  6 Earlier any peacity for underspayment or destimated tax Chlock here I if Form 2220 is attached  7 Total credits and polyments. Add time 65 through 66  8 Enter any peacity for underspayment or destimated tax Chlock here I if Form 2220 is attached  9 Tax dee, If the total of lones 5 and 8 is more than line 7, enter amount over 6 is 1 in 1  |    |  |  | 4951                | -4:-    | Page 4   |
|--|----|--|--|---------------------|---------|----------|
| Date of ruling or determination letter:  |    |  | <u> </u>                                     | Instru              | CTIO    | ns)      |
| b Domesic foundations that meet the section 4540(e) requirements in Part V, check here ►   X   and enter 1% of Part I, line 27b    6 All other domesics foundations enter 2% of tine 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  7 Tax under section 511 (domesic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  8 Add lines 1 and 2  8 Subtlet A (income) bax (domesic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  9 Tax based on investment incomes. Subtract line 4 from line 3. If zero or less, enter -0-  10 Credits/Payments:  9 2011 estimated bax payments and 2010 overpayment credited to 2011  10 Exempt foreign organizations - tax withheld at source  11 Enter the payment of the 10 to be the form 8688)  11 Total credits and payments. Add lines 5s through 60  12 Tax due. If the total of lines 5 and 8 is more than line 7, other amount owed  13 Tax due. If the total of lines 5 and 8 is more than line 12, other amount owed at 10 Overpayment. It line 7 is more than line 12 or lines 5 and 8, enter the amount owed at 11 Enter the amount of line 10 to be; Gradited to 2012 estimated bax. ►  14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  15 Dut of spond more than 5100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  15 If the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  16 Dut the foundation line Form 1120-POL for this year?  17 Line the first amount (if any) of tax on political expenditures (section 4955) imposed during the year:  18 Line 18 amount (if any) of tax on political expenditures (section 4955) imposed during the year:  19 Line the amount of the oundation of the activities.  10 Unit the foundation have unrelated business prass isonal instruction of the activities and coopess of any materials published or distributiv          | 18 | a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.  |  |                     | -       |          |
| of Part I, line 27b  At other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lines 1 and 2  3 L70 .  4 O .  5 Substite A (noticene) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment lineome. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment lineome. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment lineome. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment lineome. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment lineome. Subtract line 4 from line 3.1 zero or less, enter -0-  6 D   |    | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)  |  |                     | · .     | 70       |
| c All other domestic foundations enter 2% of time 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).   2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lines 1 and 2  3 170.  4 0.  5 Tax based on investment iscense. Subtract line 4 from line 3. if zero or less, enter -0-)  5 Tax based on investment iscense. Subtract line 4 from line 3. if zero or less, enter -0-)  5 Tax based on investment iscense. Subtract line 4 from line 3. if zero or less, enter -0-)  5 Tax based on investment iscense. Subtract line 4 from line 3. if zero or less, enter -0-  6 Credist/Payments:  2 2011 estimated tax payments and 2010 overpayment credited to 2011  1 Exempt foreign organizations - tax withheld at source  6 Tax pad with application for extension of time to the (Form 8868)  6 Backsup withholding erroneously withheld  7 Total credits and payments. Add lines 6s through 6d  8 Enter any penalty for underpayment of estimated tax. Chock here   | t  | i 1  | <del></del>                                  |                     | +       | 70.      |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 1 Add lines 1 and 2 3 170. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 1 Tax based on livestiment income. Subtract line 4 from line 3.1 2010 or less, enter -0- 5 1 770. 5 1 770. 5 1 770. 6 Decisits/Pyrments 2 2011 estimated tax payments and 2010 overpayment credited to 2011 6 Exempt foreign organizations - Lax withheld at source 6 B   |    |  | 1 - 1  |                     |         | - '      |
| 3 170.  3 170.  3 170.  5 1x2 based on investment income. Subtract line 4 from line 3. It zero or less, enter -0-  5 1x2 based on investment income. Subtract line 4 from line 3. It zero or less, enter -0-  6 Credistr-Ryments:  a 2011 estimated tax payments and 2010 overpayment credited to 2011  b Exempt foreign organizations - Isax withhelid at source  c Tax yaid with application for extension of time to file (Form 8868)  b Bed  | 0  |  | -  |                     |         |          |
| Subtitle A (mocme) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 17.0 .  5 17.0           | 2  |  |  |                     |         |          |
| 5 Tax based on investment income. Subtract the 4 from line 3. If zero or less, enter -0.  6 Cedsti2-Payments; 2 2011 estimated tax payments and 2010 overpayment credited to 2011  b Exempt foreign organizations - Lax withheld at source c Tax paid with application for extension of time to the (Form 8888) d Eackup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached 8 Enter the amount of line 10 to be: Credited to 2012 estimated tax.   | 3  | Add into 3 and 2   |  |                     |         |          |
| 6 Credits/Payments: a 2011 estimated tax payments and 2010 overpayment credited to 2011 b Exempt toreign organizations—stax withheld at source c Tax paid with application for extension of time to file (Form 868) d Eachier withholding strenously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 9 9 170. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 bet. Credited to 2012 estimated tax.  Part VIII-A   Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inference in any political campaign?  b Did it spend more than 5100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  If the answer is 'Yes' to far or 15, attach a detailed description of the activities.  1b During the tax year, did the foundation in connection with the activities.  1c Did the foundation file Form 1128-POL for this year?  4 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.  (1) On the foundation, in S 0 (2) On foundation managers. In S 0 (2) On the changes is the foundation manager of the section of the activities.  1 Has the foundation made any changes, not previously reported to the IRS?  If 'Yes, "attach a detailed description of the activities.  1 Has the foundation made any changes, not previously reported to the IRS?  If 'Yes, "attach in a detailed description of the activities.  2 Was there a liquidation, termina  | 4  | Subtitle A (income) tax (domestic section 4547 (d)(1) it asis and taxable foundations only. Satisfies the  |  |                     | 1       |          |
| a 2011 estimated tax payments and 2010 overpayment credited to 2011 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of wed SEX STATEMENT 9 ■ 9 1.70.  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed SEX STATEMENT 9 ■ 9 1.70.  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 11 Enter the amount of line 10 to be. Credited to 2012 estimated tax ▶ Refunded ▶ 11  Part VIIA S Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  11 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities.  1a During the tax year, did the foundation in connection with the activities.  1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  11 If the answer is "Yes" to 1a or 1b, attach a detailed description in connection with the activities.  1c Did the foundation negaged in any activities that have not previously been reported to the IRS?  1f 'Yes, attach a detailed description of the activities.  1 If Yes is that flue data tax textur on Form 990-T for this year?  1 If 'Yes, attach a detailed description of the activities.  2 If Yes, the sit flied a tax return of        | 5  | Tax based on investment income. Substituting a north mice of the say, since the  | <del>'  </del>                               |                     |         | 70.      |
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| To Did any porsons occome substantial contributors during the tax, year, if 160, action to the restriction to the restriction of the restriction o         | 46 |  |  |                     |         |          |
|  | 10 | DIO ANY PERSONS DECOME SUDSIGNAL COMMUNICAS COMMING THE LAX YEAR? IT "YES," attach a schedule listing their names and addresses  | F  |                     | -PF     | _        |

| Form 990-PF (2011) THE DAVID B AND MAY T SE  |   |                             | <u> 13-71549</u>   | 951 Page                   |
|--|---|-----------------------------|--|----------------------------|
| Part VII-B   Statements Regarding Activities for Which   | Form 4/20 May Be                              | Required (conti             | nued)  |                            |
| 5a During the year did the foundation pay or incur any amount to:  |   |                             |  |                            |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section  |   |                             | es X No  |                            |
| (2) Influence the outcome of any specific public election (see section 4955);  | or to carry on, directly or indi              |                             |  | 1 1                        |
| any voter registration drive?  | •   |                             | es X No  | -  -                       |
| (3) Provide a grant to an individual for travel, study, or other similar purposes  |   | L Y                         | es X No  |                            |
| (4) Provide a grant to an organization other than a charitable, etc., organization   | on described in section                       |                             | . [57]   | •                          |
| 509(a)(1), (2), or (3), or section 4940(d)(2)?   |   |                             | es X No  | *   *                      |
| (5) Provide for any purpose other than religious, charitable, scientific, literary   | , or educational purposes, or                 |                             |  | 1 2                        |
| the prevention of cruelty to children or animals?  |   | <del></del>                 | es X No  | -                          |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un  |   | in Regulations              | 37./3  | -                          |
| section 53.4945 or in a current notice regarding disaster assistance (see instri   |   |                             | N/A  | 5b                         |
| Organizations relying on a current notice regarding disaster assistance check I  |   |                             |  |                            |
| c if the answer is "Yes" to question 5a(4), does the foundation claim exemption f  |   |                             | l  |                            |
| expenditure responsibility for the grant?  | · ·   | 1/A LY                      | es L No  |                            |
| If "Yes," attach the statement required by Regulations section 53.494  |   |                             |  | There Street I are         |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to  | pay premiums on                               |                             | es X No  |                            |
| a personal benefit contract?   |   | . L. Y                      | es LaLINO  |                            |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p  | personal benefit contract?                    | •                           | -  | 6b X                       |
| If "Yes" to 6b, file Form 8870.  | - h - lå- v å                                 |                             | es X No  | J-   T   1-14              |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s   |   | . L. Y                      |  | 7b                         |
| b If 'Yes,' did the foundation receive any proceeds or have any net income attributed in the foundation About Officers, Directors, Trust |   | nagere Highl                |  | /D ]                       |
| Part VIII Paid Employees, and Contractors  | ees, i ouildation ivid                        | inagers, mgm                | y  |                            |
| List all officers, directors, trustees, foundation managers and their  | compensation.                                 | <u> </u>                    |  |                            |
|  | (b) Title, and average hours per week devoted | (c) Compensation            | (d) Contributions to employee benefit plans and deferred       | (е) Ехрепѕе                |
| (a) Name and address   | to position                                   | (If not paid,<br>enter -0-) | and deferred compensation                                      | account, other allowances  |
|  |   |                             |  |                            |
|  |   |                             | ł  |                            |
| SEE STATEMENT 11   |   | 0.                          | 0.   | 0.                         |
|  |   |                             | J  |                            |
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|  |   |                             |  |                            |
|  |   |                             |  |                            |
|  |   |                             |  |                            |
| Compensation of five highest-paid employees (other than those inc  | (b) Title, and average                        | enter NONE."                | (d) Contributions to   | (a) Evpapes                |
| (a) Name and address of each employee paid more than \$50,000  | ` 'hours per week '                           | (c) Compensation            | (d) Contributions to<br>employee benefit plans<br>and deferred | (e) Expense account, other |
| MONTE  | devoted to position                           |                             | compensation   | allowances                 |
| NONE   |   |                             |  | 1                          |
|  |   | <del> </del>                |  |                            |
|  |   |                             |  |                            |
|  | <del></del>                                   |                             |  |                            |
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|  |   |                             |  |                            |
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|  |   |                             |  |                            |
| otal number of other employees paid over \$50,000  |   |                             |  | 0                          |
|  |   |                             | Form 9   | 990-PF (2011)              |
|  |   |                             |  | \··/                       |

| Form 990-PF (2011) THE DAVID B AND MAY T SKINNER FOUNDATION 1   | 3-71549     | 951 Page 7       |
|---|-------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)                                  |             |                  |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."   |             |                  |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service   | <u>e</u>    | (c) Compensation |
| NONE  |             |                  |
|   |             |                  |
|   |             |                  |
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|   |             |                  |
|   |             | ···              |
|   |             |                  |
|   |             |                  |
| Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities                                       | <b>&gt;</b> | 0                |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the                           |             |                  |
| number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  |             | Expenses         |
| 1 N/A   |             |                  |
|   |             |                  |
|   |             |                  |
| 2   |             |                  |
|   | <del></del> |                  |
| 3   |             |                  |
| <u> </u>  |             |                  |
|   |             |                  |
| 4   |             |                  |
|   |             |                  |
| Port IV BIG   |             |                  |
| Part-IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. |             | Amount           |
| 1 N/A   |             |                  |
| 1 21/22   |             |                  |
|   |             |                  |
| 2   |             |                  |
|   |             |                  |
|   |             |                  |
| All other program-related investments. See instructions.  |             |                  |
| 3   |             |                  |
|   |             |                  |
| Total. Add lines 1 through 3  | <b></b>     | 0.               |
|   | Form        | 990-PF (2011)    |

| P        | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations   | ndations,    | see instructions)                     |
|----------|--|--------------|---------------------------------------|
| 1        | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:  |              | · · · · · · · · · · · · · · · · · · · |
| ·a       | Average monthly fair market value of securities  | 1a           | 60,911.                               |
| b        | Average of monthly cash balances   | 1b           | 60,911.<br>13,014.                    |
| c        |  | 1c           |                                       |
| d        | Total (add lines 1a, b, and c)   | 1d           | 73,925.                               |
| _        | Reduction claimed for blockage or other factors reported on lines 1a and   | 1            |                                       |
| ٠        | 1c (attach detailed explanation)   |              |                                       |
| 2        | Acquisition indebtedness applicable to line 1 assets   | 2            | 0.                                    |
| 3        | Subtract line 2 from line 1d   | 3            | 73,925.                               |
| 4        | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)  | 4            | 1,109.                                |
| 5        | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4   | 5            | 72,816.                               |
| 6        | Minimum investment return Enter 5% of line 5   | 6            | 3,641.                                |
|          | art XI. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.) | d certain    |                                       |
| _        | Minimum investment return from Part X, line 6  | 1            | 3,641.                                |
| I<br>0-  | Tax on investment income for 2011 from Part VI, line 5   | -            |                                       |
| 2a       | Income tax for 2011. (This does not include the tax from Part VI.)   |              |                                       |
| b        | Add lines 2a and 2b  | 2c           | 170.                                  |
| C        | Distributable amount before adjustments. Subtract line 2c from line 1  | 3            | 3,471.                                |
| 3        | Recoveries of amounts treated as qualifying distributions  | 4            | 0.                                    |
| 4        | Add lines 3 and 4  | 5            | 3,471.                                |
| 5        | 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            | 3,471.                                |
| <u>_</u> |  | <u> </u>     | 3,11,10                               |
| 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           | 55,413.                               |
| b        | Program-related investments - total from Part IX-B   | 1b           | 0.                                    |
| 2        | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes  | 2            |                                       |
| 3        | Amounts set aside for specific charitable projects that satisfy the:   | 100          |                                       |
| 8        | Surtability test (prior IRS approval required)   | 3a           |                                       |
| b        | Cash distribution test (attach the required schedule)  | 3b           |                                       |
| 4        | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4   | 4            | 55,413.                               |
| 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            | 170.                                  |
| 6        | Adjusted qualifying distributions. Subtract line 5 from line 4   | 6            | 55,243.                               |
|          | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of  | qualifies fo | r the section                         |
|          | 4940(e) reduction of tax in those years.   |              |                                       |

| F | Part XIII Undistributed Income (  | see instructions)                             |   |             |   |
|---|---|---|---|-------------|---|
|   | ,   | (a)<br>Corpus                                 | (b)<br>Years prior to 2010              | (c)<br>2010 | (d)<br>2011                             |
| 1 | Distributable amount for 2011 from Part XI,                                       |   |   | -           | 3,471.                                  |
| 2 |   | · · · · · · · · · · · · · · · · · · ·         |   |             |   |
| _ | a Enter amount for 2010 only  |   |   | 0.          |   |
|   | b Total for prior years:  |   |   | -           |   |
|   |   |   | 0.                                      |             |   |
| 3 | Excess distributions carryover, if any, to 2011:                                  |   |   |             |   |
| • | a From 2006   | ,   |   |             | ,                                       |
|   | b From 2007 10,610.   | 1   | •                                       | ¢           | Ę                                       |
|   | c From 2008 17,060.   | 1   | • •                                     |             |   |
|   | d From 2009 18,127.   |   | e <sup>n</sup>                          |             |   |
|   | e From 2010 26,471.   | 1 .   | ,                                       |             |   |
|   | f Total of lines 3a through e   | 72,268.                                       |   |             | -                                       |
|   | Qualifying distributions for 2011 from  |   |   |             | -                                       |
| • | Part XII, line 4: ►\$ 55, 413.  | -   | *                                       | - 1         | ,                                       |
|   | a Applied to 2010, but not more than line 2a                                      |   |   | 0.          |   |
|   | <b>b</b> Applied to undistributed income of prior                                 |   |   |             | * 4                                     |
|   | years (Election required - see instructions)                                      |   | 0.                                      |             |   |
|   | c Treated as distributions out of corpus  |   | * x !                                   |             |   |
|   | (Election required - see instructions)  | 55,413.                                       |   | ' " "       |   |
|   | d Applied to 2011 distributable amount  |   |   | - " t - "   | 0.                                      |
|   | e Remaining amount distributed out of corpus                                      | 0.  | **                                      |             | -, -                                    |
| 5 | •   | 3,471.  | - J                                     | / .         | 3,471.                                  |
| J | (If an amount appears in column (d), the same amount must be shown in column (a)) | *   |   | بر بر<br>س  |   |
| 6 |   |   |   |             |   |
| 0 | indicated below:  |   |   |             | , |
|   | & Corpus Add lines 3f, 4c, and 4e Subtract line 5                                 | 124,210.                                      |   | ***         |   |
|   | b Prior years' undistributed income. Subtract                                     |   |   | ~ ` `       | , , ,                                   |
|   | line 4b from line 2b  |   | 0.                                      | , , , ,     | ,                                       |
|   | Enter the amount of prior years'  |   |   |             | *                                       |
|   | undistributed income for which a notice of  |   |   |             |   |
|   | deficiency has been issued, or on which   |   |   |             |   |
|   | the section 4942(a) tax has been previously assessed                              |   | 0.                                      |             |   |
|   | d Subtract line 6c from line 6b. Taxable  |   |   |             |   |
| • | amount - see instructions   |   | 0.                                      |             |   |
|   | e Undistributed income for 2010. Subtract line                                    |   | ,                                       |             |   |
| , | 4a from line 2a. Taxable amount - see instr.                                      |   |   | 0.          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|   | Undistributed income for 2011. Subtract   |   |   |             |   |
| • | lines 4d and 5 from line 1. This amount must                                      | [   |   |             |   |
|   | be distributed in 2012  |   | , | ,           | 0.                                      |
| 7 | Amounts treated as distributions out of   | · · · · · · · · · · · · · · · · · · ·         |   |             |   |
| • | corpus to satisfy requirements imposed by   |   |   |             | ·                                       |
|   | section 170(b)(1)(F) or 4942(g)(3)  | 0.  |   |             |   |
| ۰ | Excess distributions carryover from 2006  |   | · -                                     |             |   |
| 0 | not applied on line 5 or line 7   | 0.  | ,                                       |             |   |
| _ |   |   | · •                                     |             |   |
| 3 | Excess distributions carryover to 2012.  Subtract lines 7 and 8 from line 6a      | 124,210.                                      |   | •           |   |
|   |   | 147,410.                                      | 2                                       |             |   |
|   | Analysis of line 9: a Excess from 2007 7,139.                                     |   |   | <br>-       | •                                       |
|   |   | -   | - , :                                   |             |   |
|   | F   | *.<br>*.                                      | - 1                                     | Ţ,          |   |
|   |   |   | · ·                                     | ,           |   |
| - | Excess from 2010 26,471.  | <u>,                                     </u> |   | I           |   |

123581 12-02-11

\*\* SEE STATEMENT 12

| Part XIV Private Operating Fo   |                                       |                             | R FOUNDATION<br>'II-A, question 9) | N/A                         | 54951 Page                            |
|---|---------------------------------------|-----------------------------|------------------------------------|-----------------------------|---------------------------------------|
| 1 a If the foundation has received a ruling or o  |                                       |                             |                                    |                             |                                       |
| foundation, and the ruling is effective for 2   |                                       |                             |                                    |                             |                                       |
| <b>b</b> Check box to indicate whether the foundar                                      |                                       |                             | I in section                       | 4942(j)(3) or 49            | 42(j)(5)                              |
| 2 a Enter the lesser of the adjusted net  | Tax year                              |                             | Prior 3 years                      |                             |                                       |
| income from Part I or the minimum   | (a) 2011                              | (b) 2010                    | (c) 2009                           | (d) 2008                    | (e) Total                             |
| investment return from Part X for   | <del></del>                           |                             |                                    |                             |                                       |
| each year listed  |                                       |                             |                                    |                             |                                       |
| b 85% of line 2a  | _                                     |                             |                                    |                             |                                       |
| c Qualifying distributions from Part XII,   |                                       |                             |                                    |                             | · <del>-</del> ·                      |
| line 4 for each year listed   |                                       |                             |                                    |                             |                                       |
| d Amounts included in line 2c not   |                                       |                             | <del></del>                        |                             | · · · · · · · · · · · · · · · · · · · |
| used directly for active conduct of   |                                       |                             |                                    |                             |                                       |
| exempt activities   |                                       |                             |                                    |                             |                                       |
| e Qualifying distributions made directly  |                                       | -                           | <del>-  </del>                     |                             |                                       |
| for active conduct of exempt activities.  |                                       |                             |                                    |                             |                                       |
| Subtract line 2d from line 2c   |                                       |                             |                                    |                             |                                       |
| 3 Complete 3a, b, or c for the  | · · · · · ·                           | <del> </del>                |                                    |                             |                                       |
| alternative test relied upon:   |                                       |                             |                                    |                             |                                       |
| a "Assets" alternative test - enter:  |                                       |                             |                                    |                             |                                       |
| (1) Value of all assets   |                                       |                             | <del></del>                        |                             |                                       |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)                           |                                       |                             |                                    |                             |                                       |
| b "Endowment" alternative test - enter<br>2/3 of minimum investment return              |                                       |                             |                                    |                             |                                       |
| shown in Part X, line 6 for each year listed  |                                       |                             |                                    |                             |                                       |
| c "Support" alternative test - enter:   | •                                     |                             |                                    |                             |                                       |
| (1) Total support other than gross  |                                       |                             |                                    |                             |                                       |
| investment income (interest,  |                                       |                             |                                    |                             |                                       |
| dividends, rents, payments on   |                                       |                             |                                    |                             |                                       |
| securities loans (section<br>512(a)(5)), or royalties)                                  |                                       |                             |                                    |                             |                                       |
| (2) Support from general public   |                                       |                             |                                    |                             |                                       |
| and 5 or more exempt  |                                       |                             |                                    |                             |                                       |
| organizations as provided in section 4942(j)(3)(B)(iii)                                 |                                       |                             |                                    |                             |                                       |
| (3) Largest amount of support from  |                                       |                             |                                    |                             |                                       |
| an exempt organization  |                                       |                             |                                    |                             |                                       |
| (4) Gross investment income   | · · · · · · · · · · · · · · · · · · · |                             |                                    |                             |                                       |
| Part XV   Supplementary Inform  | nation (Comple                        | ete this part only          | if the foundation                  | had \$5,000 or mo           | re in assets                          |
| at any time during the  |                                       |                             |                                    |                             |                                       |
| 1 Information Regarding Foundation  | Managers:                             |                             |                                    |                             |                                       |
| a List any managers of the foundation who h   |                                       |                             | tributions received by the f       | oundation before the close  | e of any tax                          |
| year (but only if they have contributed mor   | e than \$5,000). (See s               | section 507(d)(2).)         |                                    |                             |                                       |
| MAY T SKINNER   |                                       | ·                           | <del></del>                        |                             | <u> </u>                              |
| b List any managers of the foundation who conter entity) of which the foundation has a  |                                       |                             | (or an equally large portion       | n of the ownership of a pai | tnership or                           |
| NONE  |                                       |                             |                                    |                             |                                       |
| 2 Information Regarding Contribution  | . Grant. Gift. Loan                   | . Scholarship, etc., P      | rograms:                           | ,                           |                                       |
| Check here <b>X</b> if the foundation only the foundation makes gifts, grants, etc. (se | makes contributions                   | to preselected charitable   | organizations and does no          |                             |                                       |
|   | <u>-</u>                              |                             |                                    |                             |                                       |
| a The name, address, and telephone number   | of the person to who                  | in applications should be   | auuresseu.                         |                             |                                       |
|   |                                       |                             |                                    |                             |                                       |
| <b>b</b> The form in which applications should be s                                     | submitted and informa                 | tion and materials they s   | hould include:                     |                             |                                       |
| c Any submission deadlines:   |                                       |                             |                                    |                             |                                       |
| A A   | h h                                   | -l                          | lundo of spotavisors == ==         | har factora:                | <del></del>                           |
| d Any restrictions or limitations on awards, s  | uch as by geographic                  | ai areas, charitable tields | , KIIIUS OI INSULULIONS, OF OL     | ner lactors.                |                                       |
|   |                                       |                             |                                    |                             |                                       |
| 20001 10 00 11  | -                                     |                             |                                    |                             | orm <b>QQQ-DE</b> (2011)              |

| 3 Grants and Contributions Paid During the         |   | ayment                                  |  |                       |
|--|---|---|--|-----------------------|
| Recipient  | If recipient is an individual, show any relationship to | Foundation                              | Purpose of grant or                      |                       |
| Name and address (home or business)                | any foundation manager or substantial contributor       | status of<br>recipient                  | contribution                             | Amount                |
| a Paid during the year                             |   | <del></del>                             |  |                       |
|  |   |   |  |                       |
| ALVIN AILEY DANCE FOUNDATION INC                   |   |   | GENERAL PURPOSES                         |                       |
| 405 W 55TH ST                                      |   |   |  | 5.0                   |
| NEW YORK, NY 10019                                 |   | -                                       |  | 50                    |
| AMERICAN MUSEUM OF NATURAL HISTORY                 |   |   | GENERAL PURPOSES                         |                       |
| CENTRAL PARK WEST AT 79TH ST<br>NEW YORK, NY 10024 |   |   |  | 500                   |
|  |   |   |  |                       |
| THE BOWERY MISSION 132 MADISON AVENUE              |   |   | GENERAL PURPOSES                         |                       |
| NEW YORK, NY 10016                                 |   |   |  | 80                    |
|  |   |   |  |                       |
| CENTRAL PARK CONVERVANCY                           |   |   | GENERAL PURPOSES                         |                       |
| 14 EAST 60TH ST FL 8 NEW YORK, NY 10022            |   |   |  | 600                   |
| MIN TORK, NT 10022                                 |   |   |  |                       |
| CORNELL WEILL MEDICAL COLLEGE                      |   |   | DAVID B SKINNER                          |                       |
| 1300 YORK AVENUE                                   |   |   | PROFESSORSHIP                            |                       |
| NEW YORK NY 10065  Total SEE CO                    | NTINUATION SHEET  | '(S)                                    | <b>▶</b> 3a                              | 33, 233<br>49, 963    |
| b Approved for future payment                      |   | . \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | - J. | 49,303                |
| NONE   |   |   |  |                       |
|  |   |   |  |                       |
|  |   |   |  |                       |
|  |   |   |  |                       |
|  |   |   |  |                       |
|  |   |   |  |                       |
|  |   |   |  |                       |
|  |   | <u> </u>                                |  |                       |
| Total  | <del></del>   |   | <b>▶ 3b</b>                              | m <b>990-PF</b> (2011 |

| Part YVI-A | Analysis of Income-Producing | <b>Activities</b> |
|------------|------------------------------|-------------------|
| Fail Avi-A | Analysis of income-rioducing | WCfiAirie2        |

| Enter gross amounts unless otherwise indicated.  | Unrelated  | business income   |                        | ed by section 512, 513, or 514 | (e)                               |
|--|--|---|------------------------|--------------------------------|-----------------------------------|
| •  | (a)<br>Business<br>code                          | (b)<br>Amount   | Exclu-<br>sion<br>code | (d)<br>Amount                  | Related or exempt function income |
| 1 Program service revenue:   | code   |   | 1                      |                                |                                   |
| a<br>b   |  | -   |                        |                                |                                   |
|  | <del></del>                                      |   | 1 1                    |                                |                                   |
| c  | -  |   |                        |                                |                                   |
|  | -  |   | 1 1                    |                                | ······                            |
| e  |  |   |                        |                                |                                   |
| g Fees and contracts from government agencies  |  |   | 1+                     |                                |                                   |
| 2 Membership dues and assessments  | <del>                                     </del> |   | <del>  -</del>         |                                | <del></del>                       |
| 3 Interest on savings and temporary cash   |  |   |                        | 2                              |                                   |
| investments  |  |   | 14                     | 2.                             |                                   |
| 4 Dividends and interest from securities   |  | , *   To The Control of the Control | 14                     | 2,010.                         |                                   |
| 5 Net rental income or (loss) from real estate:  |  |   | -                      | ** '.                          |                                   |
| a Debt-financed property   |  |   | +                      |                                |                                   |
| <b>b</b> Not debt-financed property  |  |   | ╁┼-                    |                                |                                   |
| 6 Net rental income or (loss) from personal  |  |   |                        |                                |                                   |
| property   |  |   | + +                    |                                |                                   |
| 7 Other investment income  |  |   | ╁┈╁╴                   |                                |                                   |
| 8 Gain or (loss) from sales of assets other  |  |   | 10                     | 1 070                          |                                   |
| than inventory   | <del></del>                                      |   | 18                     |                                |                                   |
| 9 Net income or (loss) from special events   | <del>                                     </del> |   |                        |                                |                                   |
| 10 Gross profit or (loss) from sales of inventory  | <u> </u>   |   | <del> </del>           |                                |                                   |
| 1 Other revenue:   |  |   |                        |                                |                                   |
| a  | <u> </u>   |   | +                      |                                |                                   |
| b  | <del> </del>                                     | ·   | +                      |                                |                                   |
| <u> </u>   |  | · · · - · · · · · · · · · · · · · · · ·   | + +                    |                                | ·                                 |
| d  |  |   | + +                    |                                | <del></del>                       |
| 6 Cubtotal Add columns (b) (d) and (s)   |  | 0.  | 3                      | 933                            | 0.                                |
| 2 Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)                | [1   |   | <u> </u>               |                                | 933.                              |
| See worksheet in line 13 instructions to verify calculations.)   |  |   |                        |                                |                                   |
| Part XVI-B Relationship of Activities t  | o the Accon                                      | nplishment of Ex  | kempt                  | Purposes                       |                                   |
| Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than |  |   | Contribu               | ted importantly to the accomp  | olishment of                      |
|  |  |   | ···                    |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  | <del></del>   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  | <del></del>                                      |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |
|  |  |   |                        |                                |                                   |

| Sign<br>Here  | and be | penalties of perjury, I declare that I have examined to elief, it is true, correct, and complete Declaration of proceedings.  The Total Advanced Complete Declaration of proceedings are proceeded. |   | Information of which prepa |                         |   |
|---------------|--------|---|---|----------------------------|-------------------------|---|
| Paid<br>Prepa |        | Print/Type preparer's name  BRIAN J GLOZNEK  Firm's name ► HERTZ, HERS  | Preparer's signature  ON & COMPANY, LLE | Date 10/27/12              | Check if self- employed | PTIN<br>P00106849<br>13-5676811           |
|               |        | Firm's address > 477 MADISON NEW YORK,  | N AVENUE<br>NY 10022                    |                            | Phone no.               | 212-686-7160<br>Form <b>990-PF</b> (2011) |

**EXTENSION ATTACHED** 

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

2011

Name of the organization

Employer identification number

|  | THE DAVID B AND MAY T SKINNER FOUNDATION  | 13-7154951   |
|--|---|--|
| Organization type (chec                                  | ck one):  |  |
| Filers of:   | Section:  |  |
| Form 990 or 990-EZ                                       | 990 or 990-EZ   |  |
|  | 4947(a)(1) nonexempt chantable trust not treated as a private foundation  |  |
|  | 527 political organization  |  |
| Form 990-PF  | X 501(c)(3) exempt private foundation   |  |
|  | 4947(a)(1) nonexempt charitable trust treated as a private foundation   |  |
|  | 501(c)(3) taxable private foundation  |  |
| Note. Only a section 501                                 |   | Rule. See instructions.  |
| General Rule   | <del></del>   |  |
| =  |   | money or property) from any one  |
| Special Rules  |   |  |
| 509(a)(1) and 1  | 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the   |  |
| total contribution                                       | ons of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or e  |  |
| contributions fo<br>If this box is che<br>purpose. Do no | or use exclusively for religious, charitable, etc., purposes, but these contributions did not the ecked, enter here the total contributions that were received during the year for an exclusive to complete any of the parts unless the General Rule applies to this organization because | otal to more than \$1,000.  vely religious, charitable, etc., it received nonexclusively |
|  | n that is not covered by the General Rule and/or the Special Rules does not file Schedule   |  |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

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

Name of organization

Employer identification number

#### THE DAVID'B AND MAY T SKINNER FOUNDATION

13-7154951

| Part I     | Contributors (see instructions) Use duplicate copies of Part I if addition | nal space is needed.       |   |
|------------|--|----------------------------|---|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Total contributions    | (d) Type of contribution  |
| 1          | MAY T SKINNER P.O. BOX 129 SAWYER , MI 49125                               | \$ 22,470.                 | Person Payroll Noncash X (Complete Part II if there is a noncash contribution.) |
| (a)<br>No. | (b) Name, address, and ZIP + 4   | (c) Total contributions    | (d) Type of contribution  |
|            |  | \$                         | Person Payroll Omnicash Complete Part II if there is a noncash contribution.)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Total contributions    | (d) Type of contribution  |
|            |  | \$                         | Person Payroll Noncash (Complete Part II of there is a noncash contribution.)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Total contributions    | (d)<br>Type of contribution   |
|            |  | \$                         | Person Payroli Noncash (Complete Part II of there is a noncash contribution.)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Total contributions    | (d) Type of contribution  |
|            |  | \$                         | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)   |
| (a)<br>No  | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution   |
|            |  | \$                         | Person Payroll Noncash Complete Part II if there is a noncash contribution.)    |

Employer identification number

#### THE DAVID'B AND MAY T SKINNER FOUNDATION

13-7154951

| Part II N                    | Noncash Property (see instructions). Use duplicate copies of Part II i | if additional space is needed                       |                      |
|------------------------------|--|---|----------------------|
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                             | (c) FMV (or estimate) (see instructions)            | (d)<br>Date received |
|                              | 250 SHS LABORATORY CORP OF AMERICA                                     | -   |                      |
|                              |  | \$ <u>22,470.</u>                                   | 01/20/11             |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                             | (c) FMV (or estimate) (see instructions)            | (d)<br>Date received |
|                              |  | -<br>-<br>-<br>-<br>-<br>-<br>-<br>*                |                      |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                             | (c) FMV (or estimate) (see instructions)            | (d) Date received    |
| _   _                        |  | -<br>-<br>-<br>-<br>\$                              |                      |
| - 1                          | (b)  Description of noncash property given                             | (c) FMV (or estimate) (see instructions)            | (d)<br>Date received |
|                              |  | -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>- |                      |
| No. from Part I              | (b)  Description of noncash property given                             | (c) FMV (or estimate) (see instructions)            | (d)<br>Date received |
|                              |  | -<br>-<br>-<br>\$                                   |                      |
| (a)<br>No.<br>from           | (b)  Description of noncash property given                             | (c) FMV (or estimate) (see instructions)            | (d)<br>Date received |
|                              |  | -<br>-<br>- ¢                                       |                      |
| <u> </u>                     |  | Schedule B (Form 99                                 |                      |

Employer identification number

| Part III                  | VID' B AND MAY T SKINNE:<br>Exclusively religious, charitable, etc., indiv<br>year. Complete columns (a) through (e) and the | ridual contributions to section 501(c   | ()(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter |
|---------------------------|--|---|---|
|                           | the total of exclusively religious, charitable, etc<br>Use duplicate copies of Part III if addition                          | c., contributions of \$1,000 or less to | the year. (Enter this information once )  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift                         | (d) Description of how gift is held   |
| -                         |  |   |   |
|                           | Transferee's name, address, ar   | (e) Transfer of gif                     | Relationship of transferor to transferee  |
| -                         |  |   |   |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift                         | (d) Description of how gift is held   |
| -                         |  | (e) Transfer of gif                     | •   |
|                           | Transferee's name, address, ar   |   | Relationship of transferor to transferee  |
| -                         |  |   |   |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift                         | (d) Description of how gift is held   |
| -<br> -                   |  | (e) Transfer of gif                     | <u> </u>  |
| _                         | Transferee's name, address, an   |   | Relationship of transferor to transferee  |
| -                         |  |   |   |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift                         | (d) Description of how gift is held   |
| -<br> -<br> -             |  | (e) Transfer of gif                     | -   |
| -                         | Transferee's name, address, an   |   | Relationship of transferor to transferee  |
| -                         |  |   |   |

| FORM 990-PF   |            | LIST OF OFFIC    | STATEMENT 11 |          |                                 |                    |
|---|------------|------------------|--------------|----------|---------------------------------|--------------------|
| NAME AND ADDRESS  |            | TITLE<br>AVRG HE |              |          | EMPLOYEE<br>BEN PLAN<br>CONTRIB | EXPENSE<br>ACCOUNT |
| MAY T SKINNER P.O. BOX 129 SAWYER, MI 49125                   |            | PRESIDEN<br>0.00 |              | 0.       | 0.                              | 0.                 |
| CARISE B SKINNER<br>1647 DAVES AVE<br>MOSCOW, ID 83843        |            | SECRETAR<br>0.00 |              | SURER 0. | 0.                              | 0.                 |
| LINDA S CALLANS, M<br>349 CALVERT ROAD<br>MERION STATION, PA  |            | DIRECTOR<br>0.00 |              | 0.       | 0.                              | 0.                 |
| KRISTIN A SKINNER,<br>7484 TOWNLINE ROAD<br>VICTOR, NY 14564  |            | DIRECTOR<br>0.00 |              | 0.       | 0.                              | 0.                 |
| MARGARET L SKINNER<br>73 MONTVIEU COURT<br>COCKEYSVILLE, MD 2 |            | DIRECTOR<br>0.00 |              | 0.       | 0.                              | 0.                 |
| TOTALS INCLUDED ON  | 990-PF, PA | GE 6, PART VII   | I            | 0.       | 0.                              | 0.                 |

THE DAVID B AND MAY T SKINNER FOUNDATION 13-7154951

| 3 Grants and Contributions Paid During the           | Year (Continuation)                                     |                        |                     |        |
|--|---|------------------------|---------------------|--------|
| Recipient  | If recipient is an individual, show any relationship to | Foundation             | Purpose of grant or | •      |
| Name and address (home or business)                  | any foundation manager<br>or substantial contributor    | status of<br>recipient | contribution        | Amount |
| THE DOE FUND   |   |                        | GENERAL PURPOSES    |        |
| 345 EAST 102 ST 3RD FLOOR                            |   |                        |                     |        |
| NEW YORK, NY 10029                                   |   | <del></del>            |                     | 10     |
| FIFTH AVENUE PRESBYTERIAN CHURCH                     |   |                        | GENERAL PURPOSES    |        |
| 7 WEST 55TH STREET                                   |   |                        |                     | 6.05   |
| NEW YORK, NY 10019                                   |   |                        |                     | 6.05   |
| FUND FOR PARK AVENUE NEW YORK INC                    |   |                        | GENERAL PURPOSES    |        |
| 445 PARK AVE STE 1000                                |   |                        |                     | 10     |
| NEW YORK, NY 10022                                   |   |                        |                     |        |
| METROPOLITAN MUSEUM OF ART                           |   |                        | GENERAL PURPOSES    |        |
| 1000 FIFTH AVENUE                                    |   |                        |                     |        |
| NEW YORK, NY 10028                                   |   |                        |                     | 2,00   |
| THE METROPOLITAN OPERA                               |   |                        | GENERAL PURPOSES    |        |
| LINCOLN PLAZA  |   |                        |                     |        |
| NEW YORK, NY 10023                                   |   |                        |                     | 4,00   |
| MUSEUM OF MODERN ART                                 |   |                        | GENERAL PURPOSES    |        |
| 11 WEST 53RD STREET                                  |   |                        |                     |        |
| NEW YORK, NY 10019                                   |   |                        |                     | 3(     |
| NEW YORK PHILAHARMONIC                               |   |                        | GENERAL PURPOSES    |        |
| 10 LINCOLN CENTER PLAZA                              |   |                        |                     |        |
| NEW YORK, NY 10023                                   |   |                        |                     | 1(     |
| NEW YORK PUBLIC LIBRARY                              |   |                        | GENERAL PURPOSES    |        |
| 188 MADISON AVE 5TH FL                               |   |                        |                     |        |
| NEW YORK, NY 10016                                   |   |                        |                     | 20     |
| NUNDA PRESERVATION ASSOCIATION INC                   |   |                        | GENERAL PURPOSES    |        |
| PO BOX 341   |   |                        |                     |        |
| NUNDA, NY 14517                                      |   |                        |                     | 5      |
|  |   |                        |                     |        |
| TENDER LOVING CANINES ASSISTANCE DOGS<br>PO BOX 1244 |   |                        | GENERAL PURPOSES    | !      |
| SOLANA BEACH CA 92075                                |   |                        |                     | 10     |
| Total from continuation sheets                       |   | <del></del>            | ·                   | 15.50  |

THE DAVID B AND MAY T SKINNER FOUNDATION 13-7154951

| 3 Grants and Contributions Paid During the | Year (Continuation)   |                     |                                  |             |  |
|--|---|---------------------|----------------------------------|-------------|--|
| Recipient                                  | If recipient is an individual,  | Foundation          | Purpose of grant or              |             |  |
| Name and address (home or business)        | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | status of recipient | Purpose of grant or contribution | Amount      |  |
|  |   |                     |                                  |             |  |
| NITED WAY OF NYC                           |   |                     | GENERAL PURPOSES                 |             |  |
| TWO PARK AVENUE                            |   |                     |                                  | 1,00        |  |
| IEW YORK, NY 10016                         |   |                     |                                  | 1,00        |  |
| UNIVERSITY OF ROCHESTER                    |   |                     | GENERAL PURPOSES                 |             |  |
| 010 GENESEE ST SUITE 200                   |   |                     |                                  |             |  |
| ROCHESTER, NY 14611                        |   | <del></del>         |                                  | 1,50        |  |
|  |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |
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| <del></del>                                |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |
| _  |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |
|  |   |                     |                                  |             |  |

| THE  | DAVID  | В    | AND       | MAY       | т   | SKINNER          | FOUNDATION |   |
|------|--------|------|-----------|-----------|-----|------------------|------------|---|
| Part | Capita | l Ga | ins and L | osses for | Tax | on Investment In | come       | _ |

| Part V Capital Gains and Lo   | sses for Tax on Investment Income  |   |  |   |                           |  |
|---|--|---|--|---|---------------------------|--|
| (a) List and<br>2-story br  | describe the kind(s) of property sol<br>rick warehouse; or common stock, 2 | d, e.g., real estate,<br>00 shs. MLC Co.        | (b) How acquired<br>P - Purchase<br>D - Donation |   | Date sold<br>., day, yr.) |  |
| 1a BEAL SAVINGS B   | P  | 02/22/1108/                                     | 77/11  |   |                           |  |
|   | b AT&T CORP 7.300% 11/15/11  |   |  |   |                           |  |
|   | NEW NY 0.250% 8/   |   | P  | 02/16/1108/   |                           |  |
| d EMERSON ELEC CO   |  |   | P  | 08/24/1111/   | *                         |  |
|   |  | 11/07/2011                                      | P  | 09/13/1011/   |                           |  |
| f AMERICAN EXP F  |  | % 7/8/2011                                      | P  | 06/30/0907/   |                           |  |
| g 250 SHS LABORA  | TORY CORP  |   | D  | 06/19/9702/   | 01/11                     |  |
| h   |  |   | <del></del>                                      |   |                           |  |
| 1   |  |   |  |   |                           |  |
| 1   |  |   |  |   |                           |  |
| <u>k</u>  |  |   |  |   |                           |  |
| m   | <del></del>  |   |  |   |                           |  |
| n   | · · · · · · · · · · · · · · · · · · ·                                      |   |  |   |                           |  |
| 0   |  |   |  |   |                           |  |
| (e) Gross sales price   | (f) Depreciation allowed (or allowable)                                    | (g) Cost or other basis<br>plus expense of sale |  | Gain or (loss)<br>lus (f) minus (g)                 |                           |  |
| a 4,000.  |  | 4,003.  |  |   | -3.                       |  |
| b 20,130.   |  | 20,305.   |  |   | -175.                     |  |
| c 22,000.   |  | 22,000.   |  |   | 0.                        |  |
| d 10,000.   |  | 10,104.   |  |   | -104.                     |  |
| e 27,000.   |  | 28,263.   |  |   | ,263.                     |  |
| f 25,000.   |  | 25,000.   |  |   | 0.                        |  |
| g 22,936.   |  | 1,170.  |  | 71  | ,766.                     |  |
| h   |  |   |  |   |                           |  |
| 1   |  |   |  | <del></del>   |                           |  |
| <u>,                                    </u>                                    |  |   |  |   |                           |  |
|   | <del></del>  |   |  |   |                           |  |
| m   |  |   |  | <del></del> ·                                       |                           |  |
| n   |  |   |  | <del>-</del>  |                           |  |
| 0   |  |   |  |   |                           |  |
| Complete only for assets showing  | g gain in column (h) and owned by t  | he foundation on 12/31/69                       | (I) Los  | ses (from col. (h))                                 | _                         |  |
| (i) F.M.V. as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69                                       | (k) Excess of col. (ı)<br>over col. (ı), ıf any | Gains (excess o                                  | f col. (h) gain over col. (k<br>ot less than "-0-") | <b>()</b> ,               |  |
| a   |  |   |  |   | -3.                       |  |
| b   |  |   | · <del></del>                                    |   | <del>-175.</del>          |  |
| <u>c</u>  |  |   |  |   | 0.                        |  |
| d   |  |   |  |   | -104.                     |  |
| <u>e</u>  |  |   | <del></del>                                      |   | , <u>263.</u><br>0.       |  |
| <u>f</u>  |  |   |  | 21  | <del>,766.</del>          |  |
| g<br>h  |  |   | · · · · · · · · · · · · · · · · · · ·            |   | ,,,,,,,                   |  |
| 1   | ···  |   |  |   |                           |  |
|   |  | ············                                    |  |   |                           |  |
| k   |  |   | <del></del>                                      |   |                           |  |
| T T   |  |   |  |   |                           |  |
| m   |  |   |  |   |                           |  |
| n   |  |   |  |   |                           |  |
| 0   |  |   |  |   |                           |  |
| 2 Capital gain net income or (net cap   | oital loss) { If gain, also enter if (loss), enter "-0-                    | in Part I, line 7<br>In Part I, line 7          | 2  | 20  | ,221.                     |  |
| 3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c | s) as defined in sections 1222(5) and                                      | 5 I   |  |   |                           |  |
| If (loss), enter "-0-" in Part I, line 8  | <u></u>  |   | 3  | N/A   |                           |  |

| FORM 99 | 00-Р <b></b>                | AIN OR (LOSS) F               | ROM SALE               | OF A | ASSETS            | Si               | PATEMENT 1        |
|---------|-----------------------------|-------------------------------|------------------------|------|-------------------|------------------|-------------------|
| DESCRIE | (A)<br>PTION OF PROPERTY    |                               |                        |      | MANNER<br>CQUIRED | DATE<br>ACQUIREI | D DATE SOLD       |
| BEAL SA | VINGS BANK NV CD            |                               | -                      | PUF  | RCHASED           | 02/22/11         | 08/17/11          |
|         | (B)<br>GROSS                | (C)<br>COST OR                | (D)<br>EXPENSE         | OF   | (E)<br>DEPRE      | C CAI            | (F)<br>IN OR LOSS |
|         | SALES PRICE 4,000.          | OTHER BASIS 4,003.            | SALE                   | 0.   | DEFRE             | 0.               | -3.               |
| DESCRIE | (A)<br>PTION OF PROPERTY    |                               |                        |      | ANNER<br>CQUIRED  | DATE<br>ACQUIREI | D DATE SOLD       |
| AT&T CC | ORP 7.300% 11/15/           |                               |                        | PUF  | RCHASED           | 08/24/11         | 10/11/11          |
|         | (B)<br>GROSS<br>SALES PRICE | (C)<br>COST OR<br>OTHER BASIS | (D)<br>EXPENSE<br>SALE | OF   | (E)<br>DEPRE      | C. GAI           | (F)               |
|         | 20,130.                     | 20,305.                       |                        | 0.   |                   | 0.               | -175.             |
| DESCRIF | (A)<br>PTION OF PROPERTY    |                               |                        |      | MANNER<br>CQUIRED | DATE<br>ACQUIREI | DATE SOLD         |
| BANK OF | CHINA NEW NY 0.             |                               |                        | PUF  | RCHASED           | 02/16/11         | 08/23/11          |
|         | (B)<br>GROSS<br>SALES PRICE | (C)<br>COST OR<br>OTHER BASIS | (D)<br>EXPENSE<br>SALE | OF   | (E)               | C. GA            | (F)               |
|         | 22,000.                     | 22,000.                       |                        | 0.   |                   | 0.               | 0.                |

|          | (B)                         | (C)   | (D)                    |         | (E)             |            |             | (F)            |
|----------|-----------------------------|---|------------------------|---------|-----------------|------------|-------------|----------------|
| 250 SHS  | LABORATORY CORP             | <del></del>                                   |                        | DO      | NATED           | 06/1       | 9/97        | 02/01/11       |
| DESCRIPT | (A)<br>TION OF PROPERTY     |   |                        |         | ANNER<br>QUIRED | DA<br>ACQU | TE<br>IRED  | DATE SOLD      |
|          | 25,000.                     | 25,000.                                       |                        | 0.      |                 | 0.         |             | 0.             |
|          | (B)<br>GROSS<br>SALES PRICE | (C)<br>COST OR<br>OTHER BASIS                 | (D)<br>EXPENSE<br>SALE | OF      | (E)<br>DEPRE    | c.         |             | (F)<br>OR LOSS |
| AMERICAN | N EXP FSB UTAH C            | <br>D 1.800% 7/8/20                           | 11                     | PUR     | CHASED          | 06/3       | 0/09        | 07/08/11       |
| DESCRIP  | (A)<br>TION OF PROPERTY     | •   |                        |         | ANNER<br>QUIRED |            | TE<br>IRED  | DATE SOLD      |
| _        | 27,000.                     | 28,263.                                       |                        | 0.      |                 | 0.         |             | -1,263.        |
|          | (B)<br>GROSS<br>SALES PRICE | (C)<br>COST OR<br>OTHER BASIS                 | (D)<br>EXPENSE<br>SALE | OF      | (E)<br>DEPRE    | c.         | GAIN        | (F) OR LOSS    |
| AMERICA  | N EXP BK UTAH CI            |   |                        | PUR     | CHASED          | 09/1       | 3/10        | 11/07/11       |
| DESCRIP  | (A)<br>TION OF PROPERTY     | <u>,                                     </u> |                        |         | ANNER<br>QUIRED |            | TE<br>VIRED | DATE SOLD      |
|          | 10,000.                     | 10,104.                                       |                        | 0.      |                 | 0.         |             | -104.          |
|          | (B)<br>GROSS<br>SALES PRICE | (C)<br>COST OR<br>OTHER BASIS                 | (D)<br>EXPENSE<br>SALE | OF      | (E)<br>DEPRE    | c          | GAIN        | (F)<br>OR LOSS |
| EMERSON  | ELEC CO 5.750%              | 11/01/11                                      |                        | PUR     | CHASED          | 08/2       | 4/11        | 11/01/11       |
| DEDCKT   | TION OF PROPERTY            | 7   |                        | M<br>AC | QUIRED          | DA<br>ACQU | JIRED       | DATE SOLD      |

| FORM 990-PF INTEREST ON SAVI                               | INGS AN              | ND TEM | PORARY CA                   | ASH IN    | VESTMENTS                    | STATEMENT | 2         |
|--|----------------------|--------|-----------------------------|-----------|------------------------------|-----------|-----------|
| SOURCE   |                      |        |                             |           |                              | AMOUNT    |           |
| RMA GOVT PORTFOLIO   |                      |        |                             |           |                              |           | 2.        |
| TOTAL TO FORM 990-PF, PART I,                              | LINE                 | 3, CO  | LUMN A                      |           |                              |           | 2.        |
| FORM 990-PF DIVIDEND                                       | S AND                | INTER  | EST FROM                    | SECUE     | RITIES                       | STATEMENT | 3         |
| SOURCE   | GROSS                | AMOUNT |                             | TAL GAINS | COLUMN (A)                   | )         |           |
| UBS FINANCIAL SVCS INC- NOMINUBS FINANCIAL SVCS INC- NOMIN |                      |        | 1,202.                      |           | 0.                           | 1,20      | 02.       |
| TOTAL TO FM 990-PF, PART I, L                              | LN 4 =               |        | 2,010.                      |           | 0.                           | 2,01      | 10.       |
| FORM 990-PF  | ACC                  | COUNTI | NG FEES                     |           |                              | STATEMENT | 4         |
| DESCRIPTION  | (A<br>EXPEN<br>PER E | -      | (B)<br>NET INVE<br>MENT INC |           | (C)<br>ADJUSTED<br>NET INCOM |           |           |
| ACCOUNTANT FEE   | 10                   | ,414.  | 5,                          | 207.      |                              | 5,20      | 07.       |
| TO FORM 990-PF, PG 1, LN 16B =                             | 10                   | ,414.  | 5,                          | 207.      |                              | 5,20      | 07.       |
| FORM 990-PF  |                      | TAX    | ES                          |           |                              | STATEMENT | <br>5<br> |
| DESCRIPTION  | (A<br>EXPEN<br>PER E |        | (B)<br>NET INVE<br>MENT INC |           | (C)<br>ADJUSTED<br>NET INCOM |           |           |
| FEDERAL EXCISE TAX   |                      | 8.     |                             | 0.        |                              |           | 0.        |
| I HOMAN MICION 11M   |                      |        |                             | • •       |                              |           |           |

| FORM 990-PF   | OTHER EXPENSES                      |                             |                |                          | STATEMENT 6                 |                   |
|---|-------------------------------------|-----------------------------|----------------|--------------------------|-----------------------------|-------------------|
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS        | (B)<br>NET INVE<br>MENT INC |                |                          |                             |                   |
| STATUTORY ADVERTISEMENT ACCOUNT FEE FILING FEE  | 43.<br>150.<br>50.                  |                             | 0.<br>0.<br>0. |                          | 1                           | 43.<br>50.<br>50. |
| TO FORM 990-PF, PG 1, LN 23   | 243.                                |                             | 0.             |                          |                             | 43.               |
| FORM 990-PF   | OTHER F                             | UNDS                        |                |                          | STATEMENT                   | 7                 |
| DESCRIPTION   |                                     |                             | BEGI           | (A)<br>INNING OF<br>YEAR | (B)<br>END OF<br>YEAR       |                   |
| ENDOWMENT FUND  |                                     |                             | 59,510.        |                          | 22,343.                     |                   |
| TOTAL TO FORM 990-PF, PART II,  | LINE 29                             |                             |                | 59,510.                  | 22,34                       | 43.               |
| FORM 990-PF   | OTHER INV                           | ESTMENTS                    |                |                          | STATEMENT                   | 8                 |
|   | VA                                  | LUATION                     |                |                          | FAIR MARKET                 | r                 |
| DESCRIPTION   |                                     | ETHOD                       | BOC            | K VALUE                  | VALUE                       |                   |
|   | M                                   |                             | BOC            | 10,282.                  | 10,17                       | 76.               |
| DUKE ENERGY OHIO B/E 2.100% 6/  | <br>/15/13                          | ETHOD                       | BOC            |                          |                             |                   |
| DUKE ENERGY OHIO B/E 2.100% 6/TOTAL TO FORM 990-PF, PART II,  | <br>/15/13                          | ETHOD<br>COST               | ВОС            | 10,282.                  | 10,17                       |                   |
| DESCRIPTION  DUKE ENERGY OHIO B/E 2.100% 6/ TOTAL TO FORM 990-PF, PART II,  FORM 990-PF INTE  TAX DUE FROM FORM 990-PF, PAR LATE PAYMENT INTEREST | M<br>15/13<br>LINE 13<br>REST AND P | ETHOD<br>COST               | ВОС            | 10,282.                  | 10,17<br>10,17<br>STATEMENT | 76.               |

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) TO TREAT EXCESS OUALIFYING DISTRIBUTIONS AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT 12

PURSUANT TO SECTION 4942(H)(2) OF THE INTERNAL REVENUE CODE, THE FOUNDATION HEREWITH ELECTS TO TREAT THE QUALIFYING DISTRIBUTIONS FOR 2011 AS HAVING BEEN MADE OUT OF CORPUS.

26

(Rev January 2012)

Department of the Treasury

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

OMB No. 1545-1709

| internal Revent                      | ie Service Prile 8  | i separate a                             | ipplication for each return.   |   |   |   |
|--------------------------------------|---|--|--|---|---|---|
|                                      | e filing for an Automatic 3-Month Extension,  |  |  |   |   | ▶ X   |
|                                      | e filing for an Additional (Not Automatic) 3-M  |  |  |   |   | • 6   |
| _                                    | plete Part II unless you have already been gra  |  |  |   |   |   |
| a corporation 8868 to red Return for | illing (e-file). You can electronically file Form<br>on required to file Form 990-T), or an addition<br>quest an extension of time to file any of the<br>Transfers Associated With Certain Personal<br>For more details on the electronic filing of the | nal (not au<br>forms liste<br>al Benefit | itomatic) 3-month exter<br>ed in Part I or Part II w<br>Contracts, which mus | nsior<br>ith 1<br>t be                  | n of time. You can electronica<br>the exception of Form 8870,<br>e sent to the IRS in paper i | lly file Form<br>Information<br>format (see |
| Part I Au                            | tomatic 3-Month Extension of Time. Or   | nly submit                               | original (no copies ne   | eed                                     | ed).  |   |
|                                      | on required to file Form 990-T and requesting   |  |  |   |   |   |
| Part I only .                        |   |  |  | <u>.</u>                                |   | ▶□  |
|                                      | rporations (including 1120-C filers), partnersh   | ips, REMIC                               | Cs, and trusts must use I  | Fom                                     |   |   |
| to file incom                        | le tax returns  |  | Enter filer's identifying number, see instructions                           |   |   |   |
| Type or                              | Name of exempt organization or other filer, see in  | istructions                              |  | Employer identification number (EIN) or |   |   |
| print                                | THE DAVID B & MAY T SKINNER   | FOUNDAT                                  | TION INC.  | X                                       | 13-7154951  |   |
| File by the due date for             | Number, street, and room or suite no If a P.O. bo   | x, see instru                            | ctions   |   | Social security number (SSN)  |   |
| filing your                          | 79 EAST 79TH STREET, #7   |  |  |   | ]   |   |
| retum See<br>instructions            | City, town or post office, state, and ZIP code. For   | a foreign ad                             | dress, see instructions  |   |   |   |
|                                      | NEW YORK, NY 10075  |  |  |   |   | <del></del>                                 |
| Enter the Re                         | eturn code for the return that this application   | is for (file a                           | a separate application fo  | r ea                                    | ch return)  | . 0 4                                       |
| Application                          |   | Return                                   | Application  |   |   | Return                                      |
| Application<br>Is For                |   | Code                                     | Is For   |   |   | Code  |
| Form 990                             |   | 01                                       | Form 990-T (corporati  | ion)                                    |   | 07  |
| Form 990-BL                          | <del></del>   | 02                                       | Form 1041-A  | <u>,</u>                                |   | 08  |
| Form 990-EZ                          |   | 01                                       | Form 4720  |   |   | 09  |
| Form 990-PF                          | <del></del>   | 04                                       | Form 5227  |   |   | 10  |
|                                      | (sec 401(a) or 408(a) trust)  | 05                                       | Form 6069  |   |   | 11  |
|                                      | (trust other than above)  | 06                                       | Form 8870  |   |   | 12  |
| • The books                          | s are in the care of ▶  |  |  |   | <del></del>   |   |
| Telephone                            | e No. ▶   | F  | AX No. ▶   |   |   |   |
|                                      | inization does not have an office or place of t   |  |  |   |   | ▶ 🔲   |
|                                      | or a Group Return, enter the organization's fou   |  |  |   |   |   |
|                                      |   | -  | rt of the group, check the   | his b                                   | ox  | ach   |
|                                      | names and EINs of all members the extension   |  |  |   | <del></del>   |   |
|                                      | st an automatic 3-month (6 months for a corp<br>AUGUST 15 . 20 12 , to file the   | poration re                              | quired to file Form 990-   | -1) e                                   | extension of time<br>anization named above. The ex  | rtension is                                 |
|                                      | organization's return for   | skempt org                               | jamzadon retam ler die   | o.g.                                    |   | WONDIO!!!                                   |
|                                      | calendar year 20 <u>11</u> or   |  |  |   |   |   |
| ▶                                    | tax year beginning  | . 20                                     | , and ending   |   | , 20  |   |
| 2 If the ta                          | x year entered in line 1 is for less than 12 mo   |  |  |   |   |   |
|                                      | application is for Form 990-BL, 990-PF, 990 and able credits. See instructions  | D-T, 4720                                | or 6069, enter the t   | enta                                    | ative tax, less any 3a \$   | 0   |
|                                      | application is for Form 990-PF, 990-T,  | 4720 or                                  | 6069, enter any ref  | fund                                    |   | <u>~</u>                                    |
|                                      | ed tax payments made Include any prior year   |  |  |   | 3b \$   |   |
|                                      | due. Subtract line 3b from line 3a Include y  |  |  |   |   | <del></del>                                 |
| (Electro                             | (Electronic Federal Tax Payment System) See instructions 3c \$ 0  |  |  |   |   |   |
|                                      | ou are going to make an electronic fund w   |  | with this Form 8868,   | see                                     | Form 8453-EO and Form 88  | 79-EO for                                   |
| ayment instr                         | uctions.  |  |  |   |   |   |
|                                      |   |  |  |   |   |   |

| Earm  | 9969 /0  | 1 2012)  |   |                                |                                      | Page 2        |  |  |  |
|---|--|--|---|--------------------------------|--------------------------------------|---------------|--|--|--|
|   | 8868 (Re   | <del></del>  | lanth Extor                             | scion, complete only Part II   | and check this boy                   |               |  |  |  |
| Moto  | you are  | filing for an Additional (Not Automatic) 3-M complete Part II if you have already been gra                         | ontod on or                             | ision, complete only Farth     | on a previously filed Form 8868      |               |  |  |  |
|   |  | filing for an Automatic 3-Month Extension,   |   |                                | on a previously med roini oood       |               |  |  |  |
| Pa  |  | Additional (Not Automatic) 3-Month E   | vtension (                              | of Time. Only file the orig    | inal (no copies needed)              |               |  |  |  |
| Га  |  | Additional (Not Adtomatic) o-Month E   | ALCHSION                                |                                | nter filer's identifying number, see | instructions  |  |  |  |
|   |  | Name of exempt organization or other filer, see in   | Employer identification number (EIN) or |                                |                                      |               |  |  |  |
| Тур   | A 05   | }  |   | ` ,                            |                                      |               |  |  |  |
| prin  |  | THE DAVID B & MAY T SKINNER FOUNDATION INC.  Number, street, and room or suite no. If a P.O. box, see instructions |   |                                | X 13-7154951                         |               |  |  |  |
| Pilli   |  |  |   |                                | Social security number (SSN)         |               |  |  |  |
| File by   |  |  |   |                                | · · · · · ·                          |               |  |  |  |
| due date for filing your City, town or post office, state, and ZIP code For a foreign address, see instructions |  |  |   |                                | <del></del>                          |               |  |  |  |
| retum   |  | NEW YORK, NY 10075   |   |                                |                                      |               |  |  |  |
|   |  | turn code for the return that this application   | us for (file (                          | s sonarate application for ea  | ch return)                           | . 0 4         |  |  |  |
|   | ication  | torn code for the return that this application   | Return                                  | Application                    | cirretailly                          | Return        |  |  |  |
| Is Fo   |  |  | Code                                    | Is For                         |                                      |               |  |  |  |
|   | n 990  |  | <del></del>                             | 15 1 01                        |                                      | Code          |  |  |  |
|   | 1 990-BL   |  | 01                                      | Form 1041-A                    |                                      | 08            |  |  |  |
|   | 1 990-BL   |  | 01                                      | Form 4720                      |                                      | 09            |  |  |  |
|   | 1 990-LZ   |  | 04                                      | Form 5227                      |                                      | 10            |  |  |  |
|   |  | (sec 401(a) or 408(a) trust)   | <del></del>                             | Form 6069                      |                                      | 11            |  |  |  |
|   |  | (trust other than above)   | 05<br>06                                | Form 8870                      |                                      | 12            |  |  |  |
|   |  | et complete Part II if you were not already  |   |                                | sion on a previously filed Form      |               |  |  |  |
|   |  | are in the care of   | granted an                              | automatic o month extens       | order on a proviously mear on        | 1 0000.       |  |  |  |
|   | elephone   | <del></del>  |   | AX No ▶                        |                                      |               |  |  |  |
|   | •  | nization does not have an office or place of t   |   |                                | is box                               |               |  |  |  |
|   |  | r a Group Return, enter the organization's for   |   |                                |                                      | · •           |  |  |  |
|   |  | group, check this box  |   |                                |                                      |               |  |  |  |
|   |  | ames and EINs of all members the extension   |   | it of the group, shock this s  | 5×   and and                         |               |  |  |  |
|   |  | et an additional 3-month extension of time un  |   | BER 15.                        | , 20 12                              |               |  |  |  |
|   |  | endar year 2011 , or other tax year beginning  |   |                                |                                      |               |  |  |  |
|   |  | x year entered in line 5 is for less than 12 m   |   |                                | <del></del>                          |               |  |  |  |
| -   |  | lange in accounting period   |   |                                |                                      |               |  |  |  |
| 7   |  |  | nation a                                | and third-party so             | ource documents neces                | sarv to       |  |  |  |
|   | State in detail why you need the extension Information and third-party source documents necessary to file a complete and accurate return have not yet been made available to taxpayer. A |  |   |                                |                                      |               |  |  |  |
|   |  | sult, taxpayer is unable to c  |   |                                |                                      |               |  |  |  |
|   |  |  |   |                                |                                      |               |  |  |  |
| 8a  | If this a  | pplication is for Form 990-BL, 990-PF, 99  | 0-T, 4720                               | or 6069, enter the tenta       | ative tax, less any                  |               |  |  |  |
|   | nonrefu  | ndable credits. See instructions   |   |                                | 8a \$                                | 0             |  |  |  |
| b   | If this  | application is for Form 990-PF, 990-T,   | 4720, or                                | 6069, enter any refund         | able credits and                     |               |  |  |  |
|   |  | ed tax payments made. Include any prid   |   |                                |                                      |               |  |  |  |
|   | amount   | paid previously with Form 8868   |   |                                | 8b \$                                |               |  |  |  |
| c   | Balance  | Due. Subtract line 8b from line 8a Include y   | your payme                              | ent with this form, if require | d, by using EFTPS                    |               |  |  |  |
|   | (Electroi  | nic Federal Tax Payment System) See instruc  | ctions                                  |                                | 8c \$                                | 0             |  |  |  |
|   |  | Signature and Verifica   | tion mus                                | t be completed for Pa          | ırt II only.                         |               |  |  |  |
| inder   | penalties o  | of perjury, I declare that I have examined this form, in   |   |                                |                                      | e and belief, |  |  |  |
|   |  | and complete, and that I are enthorized to prepare this form   |   |                                |                                      |               |  |  |  |
|   |  | 1/1  |   |                                | diel                                 |               |  |  |  |
| Signatu   | ire 🕨  | Cup o won aft  |   | Title ► C. P. A                | Date ► 8/14/11                       |               |  |  |  |
|   |  | 77   |   |                                | Form 8868 (6                         | Rev 1-20121   |  |  |  |