

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



HURRICANE SANDY RELIEF

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

OMB No 1545-0052 2011

Inte	mal Re	evenue Service	Note. The foundate	on may be	e able t	o use a copy of				ing requirements		
Fo	r cal	lendar year 201	1 or tax year begi	nning			, 2011	, and endi	~			20
N	lame	of foundation								A Employer identifi	cation number	
Ι	OAV]	ID F. & KARI	EN K. THOMAS	FOUNDA	ATION					20-568108	6	
	lumb	er and street (or P	O box number if mail is	not delivere	ed to stre	et address)		Room/sui	te	B Telephone numb	•	
										(21	.2) 752-60)25
3	345	PURCHASE S'	TREET									
	ity o	or town, state, and	ZIP code								-	
										C If exemption application pending, check here	ation is	▶[
E	RYE	, NY 10580								pending, dieck nere	,	
_		ck all that apply	Initial retu	'n		Initial return	of a former i	oublic char	ity	D 1 Foreign organiza	tions check here .	▶□
•		он он индиарру	Final retur			Amended re	turn .		1	2 Foreign organiza	•	
			Address c			Name chang	е		- 1	85% test, check computation		ightharpoonup
н	Che	ck type of organ	ization X Secti		:)(3) ex	empt private	foundation			•		
Ë	_		nonexempt charitable			ther taxable pi		tion		E If private foundation	n status was terminat	- I
1			all assets at end	J Accou		nethod X C				F If the foundation is		
		ear (from Part II,		1	_	ecify)	٠)(1)(B), check here	
	•		744,984.			(d) must be or	cash basis					
P		<u> </u>	evenue and Expens	''''''		`-i	1			· . · ·	(d) Disburse	ements
قله	ent l	total of amounts i	n columns (b), (c), an	d (d)		Revenue and penses per	(b) Net inv	I	(c) Adjusted net	for charit	abl e
		may not necessa column (a) (see II	nnly equal the amount	s ın	EA	books	incor	ne		income	purpose (cash basis	
Т	_			hadula)		15,412.					, Guari basis	<u></u>
	1	or if t	ints, etc., received (attach sc he foundation is not r eq	uired to	,	,	<u> </u>				<u> </u>	
	2		ach Sch B		•	2,586		2,586.			ATCH 1	
	3	•	and temporary cash inve								711 011 1	
	4		erest from secunties									
				Г								
			r (loss)			244						
Revenue		Net gain or (loss) fr Gross sales price for	om sale of assets not on r all	244.								
le l		assets on line 6a						244.			}	
æ	7	. •	ncome (from Part IV,					244.)			ļ	
	8		apital gain							 	 	· · · · · · · · · · · · · · · · · · ·
	9 10 a	Income modificat Gross sales less retu	ions · · · · · · ·				 					
		and allowances · ·	• • • • • • • • • • • • • • • • • • • •				 		· · · · · · · · · · · · · · · · · · ·	~	<u></u>	
ŀ		Less Cost of goods					 					
- 1			ss) (attach schedule)			857.	 	857.			ATCH 2	
	11		tach schedule)			19,099.		3,687.		······································	AICH Z	
-			Lithrough 11	1		10,000.		3,0011				
1	13	Compensation	fficers, directors, trustees	, etc		 					1	
ses	14	Other entravee	safānes) and wages . mployes panefits								+	
	150	ension plans, el	mployee penetits	5· · · · · · · · · · · · · · · · · · ·		250.	 				 	250
Administrative Expen	16 ā	Legal tees (attack	schedule), ATCH (attach schedule) ^{ATCH}	ا ٠٠٠ ا		3,325.		1,663.		****	 	1,662
/ū	(b	Accounting tees	(attach schedule)ATC				 				+	_, 502
ξį	<u>&</u> (Quite profession	ertees (attach schedu	ile)							 	
Ē	(<u>\$</u> \	Interest	lule) (see instructions)	••••			 				1	
nis	/8				_			-			+	
Ē	19		ach schedule) and de	` [-			 	
Ad	20`			1			 				-	
and	21	·	ces, and meetings	[125	 					125
a	22		lications			481	<u> </u>	481.		-		
Operating	23		(attach schedule) AT	,		481	' -	401.			+	
ra	24		and administrative e			4 101		2 1/4				2 02-
ğ			ough 23	1		4,181.		2,144.			 -	2,037 20,000
٦	25		fts, grants paid			20,000	 	2 144				
_	26	Total expenses and di	sbursements Add lines	24 and 25		24,181.	 	2,144.			4	22,037
	27	Subtract line 26	from line 12					ļ				
			er expenses and disbursen			-5,082		1 5 4 2			-	
	b	Net investment	income (if negative, e	nter -0-)			ļ	1,543.	-			
	c	Adjusted net inc	ome (if negative, ente	er -0-)			<u>'</u>				<u>L</u>	

Form 990-PF (2011)

	Attached schedules and amounts in the	Beginning of year	End o	of year
Part	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	100,003.	100,495.	100,495.
2	Savings and temporary cash investments			
3	Accounts receivable ▶	<u>-</u>		1
	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			
	disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule)		or 4 A she	`
	Less allowance for doubtful accounts ▶			
_ω 8	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
¥ 10 :	Investments - U.S. and state government obligations (attach schedule).			
	Investments - corporate stock (attach schedule)			
(Investments - corporate bonds (attach schedule)			
11	Investments - land, buildings, and equipment basis	na tana ma		
	Less accumulated depreciation (attach schedule)			
12	Investments - mortgage loans			
13	Investments - other (attach schedule) ATCH 6	216,997.	231,423.	644,489.
14	Land, buildings, and equipment basis		* *** ***	* 1
	Less accumulated depredation (attach schedule)			
15	Other assets (describe			
16	Total assets (to be completed by all filers - see the			
	instructions Also, see page 1, item i)	317,000.	331,918.	744,984.
17	Accounts payable and accrued expenses			,
18	Grants payable			
ഗ്ല 19	Deferred revenue			1
<u>≅</u> 20	Loans from officers, directors, trustees, and other disqualified persons			·
Liabilities 19	Mortgages and other notes payable (attach schedule)			
⊐ ₂₂	Other liabilities (describe		- <u></u>	
				- 1
23	Total liabilities (add lines 17 through 22)		C	* , **
	Foundations that follow SFAS 117, check here ▶			
	and complete lines 24 through 26 and lines 30 and 31.			
alances 25	Unrestricted			
<u>E</u> 25	Temporarily restricted			
	Permanently restricted			
힏	Foundations that do not follow SFAS 117,			<u> </u>
리	check here and complete lines 27 through 31. $\blacktriangleright X$			
ට 27	Capital stock, trust principal, or current funds	317,000.	331,918.	*
Assets or Fund E 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Paid-in or capital surplus, or land, bldg , and equipment fund			, .
S 29	Retained earnings, accumulated income, endowment, or other funds			х ,
30	Total net assets or fund balances (see instructions)	317,000.	331,918.	
30 31	Total liabilities and net assets/fund balances (see			,
	instructions)	317,000.	331,918.	
	III Analysis of Changes in Net Assets or Fund			т —
	al net assets or fund balances at beginning of year - Part		•	
	d-of-year figure reported on prior year's return)			317,000.
2 En	ter amount from Part I, line 27a		2_	-5,082
		MENT 7		20,000
	d lines 1, 2, and 3		4	331,918.
5 De	creases not included in line 2 (itemize) ▶			<u> </u>
6 To	al net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b	o), line 30 6	331, 918.

Page	

Part IV Capital Gains	s and Losses for Tax on Inv	estment Income	(b) How	(a) Data	
	d describe the kind(s) of property sold		acquired P-Purchase	(c) Date	(d) Date sold (mo , day, yr)
	prick warehouse, or common stock, 200	J shs MLC Co)	D-Donation	(mo, day, yr)	(****, ***, ***,
	DOLE		 		
<u>b</u>			 		
d					<u> </u>
e			 	-	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a					
b		<u> </u>			
c					
d					
e					
Complete only for assets	showing gain in column (h) and own	ed by the foundation on 12/31/69		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	col	(k), but not less Losses (from co	
a			<u> </u>		
b			-		
c			ļ		
<u>d</u>			 		
е			 		
2 Capital gain net income o	r (not contol loce)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	. 2		244.
Net short-term capital gai	n or (loss) as defined in sections 1				
		structions) If (loss), enter -0- in 🕽	.		
Part I, line 8	<u> </u>	<u> </u>	3		0
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net Investment	ncome		
	r the section 4942 tax on the distr not qualify under section 4940(e	butable amount of any year in the b	oase peno	d?	Yes X No
		ar, see the instructions before making	n anv enti	188	
(a)	(b)	(c)	g arry crit	(d)	•
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution r (col (b) divided by	
2010		173,943.	 	_(=====================================	, (-),
2009		83,417.	-		
2008		83,001.			
2007		54,523.			
2006					
					
2 Total of line 1, column (c	0		2		. 0
3 Average distribution ratio	o for the 5-year base period - divid	de the total on line 2 by 5, or by the			
number of years the four	ndation has been in existence if le	ss than 5 years	3		
4 Enter the net value of no	ncharitable-use assets for 2011 for	rom Part X, line 5	4		692,373.
5 Multiply line 4 by line 3			5	••	
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		15.
			1		15.
					22,037.
8 Enter qualifying distribut If line 8 is equal to or g Part VI instructions	reater than line 7, check the box	c in Part VI, line 1b, and complete	that part	using a 1% ta	

٠				
orm	990-PF (2011) DAVID F. & KAREN K. THOMAS FOUNDATION 20-568	L086	F	age 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions)
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			15.
	here X and enter 1% of Part I, line 27b			;
C	All 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-) 2			
3	Add lines 1 and 2		_	15.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			15.
6	Credits/Payments			j
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 1,783.			,
b	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		1,	783.
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			160
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			768.
1	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 1,768. Refunded ▶ 11			
_	t VII-A Statements Regarding Activities			T
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No X
	or intervene in any political campaign?	1a		<u> </u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the	46		X
	instructions for definition)?	1b	·	_ ^
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities	4.		x
	Did the foundation file Form 1120-POL for this year?	1 c		 ``
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation >\$ (2) On foundation managers > \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
2		-		
	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x x
4.	D. Life of the control of the contro	4a		Х
4a	name and the same of the same	4b		Х
_ b	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
5	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1
٥	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	_		
	conflict with the state law remain in the governing instrument?	6	Х	1
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	
, 8 a	The state of the s			
- 4	NY,			ĺ
b	f. F. w. 600 PF. de Albarray Constal			-
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	Х	<u>L</u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			.
-	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	Did dily polocile become debutantial continuation deling the text year in test states a content with the name	1	1	Y

and addresses

4a

b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

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

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

Total. Add lines 1 through 3.

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundatio	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	110,492.
С	Fair market value of all other assets (see instructions)	1c	592,425
d	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and	1d	702,917
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	_1	
!	Acquisition indebtedness applicable to line 1 assets	2	
}	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	3	702,917
Ļ	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	4	10,544
5	• •	5	692,373
3	Minimum investment return. Enter 5% of line 5	6	34,619
Pa	Table 1 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this part of the part	part)	
_	Minimum investment return from Part X, line 6	1	34,619
a!	Tax on investment income for 2011 from Part VI, line 5		· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2011 (This does not include the tax from Part VI) 2b	1	
-	Add lines 2a and 2b	2c	15
3	Distributable amount before adjustments Subtract line 2c from line 1	3	34,604
ı	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	34,604
;	Deduction from distributable amount (see instructions)	6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	34,604
Pa	rt XII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	22,037
b		1 b	
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
-	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	22,037
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		······································
-	Enter 1% of Part I, line 27b (see instructions)	5	15
3	Adjusted qualifying distributions. Subtract line 5 from line 4	6	22,022
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		ther the foundation

Form 990-PF (2011)

Form 990-PF (2011) Page 9 Part XIII Undistributed Income (see instructions) (b) (d) (c) Years prior to 2010 2010 2011 Corpus Distributable amount for 2011 from Part XI, 34,604. Undistributed income, if any, as of the end of 2011 6,729 Enter amount for 2010 only 10,998. b Total for pnor years 20 09 ,20 08 ,20 07 Excess distributions carryover, if any, to 2011 From 2006 **b** From 2007 c From 2008 d From 2009 e From 2010 f Total of lines 3a through e Qualifying distributions for 2011 from Part XII, 22,037. line 4 ▶ \$ _____ 6,729 a Applied to 2010, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election required - see instructions) 15,308 d Applied to 2011 distributable amount e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract 10,998. line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions

Undistributed income for 2010 Subtract line
4a from line 2a Taxable amount - see
instructions 10,998 f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be 19,296. distributed in 2012 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2007 . . . b Excess from 2008 . . . c Excess from 2009 . . . d Excess from 2010 . . . e Excess from 2011 . . .

Form 990-PF (2011)

	990-PF (2011)			MAS FOUNDATION	- 0\	20-	5681086 Page 10
		rating Foundations (NOT APPLICABLE
а	If the foundation has	_					
	foundation, and the ruling					1042/	1942(1)(5)
þ	Check box to indicate wh		private operating four		<u> </u>	4942())(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	(4) 00		(e) Total
	justed net income from Part I or the minimum investment	(a) 2011	(b) 2010	(c) 2009	(d) 20	<u> </u>	···-
	return from Part X for each						
_	year listed				<u> </u>		
b c	85% of line 2a						
٠	Qualifying distributions from Part XII, line 4 for each year listed						
d	Amounts included in line 2c not						
	used directly for active conduct of exempt activities						
ę	Qualifying distributions made						
	directly for active conduct of exempt activities. Subtract line						
3	2d from line 2c Complete 3a, b, or c for the	· · · · · · · · · · · · · · · · · · ·				•	· · · · · · · · · · · · · · ·
	alternative test relied upon						
а	"Assets" alternative test - enter						
	(1) Value of all assets (2) Value of assets qualifying				 		
	under section 4942(j)(3)(B)(i)				<u> </u>		
b	"Endowment" atternative test-						
	enter 2/3 of minimum invest- ment return shown in Part X,						
	line 6 for each year listed				<u> </u>		
C	"Support" alternative test - enter				1		
	(1) Total support other than gross investment income						
	(interest, dividends, rents payments on securities						
	loans (section 512(a)(5)),						
	or royalties) (2) Support from general						
	public and 5 or more exempt organizations as						
	provided in section 4942						
	(j)(3)(B)(iii) (3) Largest amount of sup-						
	port from an exempt organization				ļ		
	(4) Gross investment income .				1		L
Pa	rt XV Supplement	ary Information (C during the year - see	omplete this par	t only if the found	lation had	\$5,000	or more in assets
1	<u> </u>	g Foundation Manage					
a	List any managers of	the foundation who h	ave contributed mo	ore than 2% of the total	al contributio	ns receiv	ed by the foundation
	before the close of an	y tax year (but only if th	ney have contributed	l more than \$5,000) (S	See section 50)7(d)(2))	
	N/A						
b	List any managers of	the foundation who	own 10% or more	of the stock of a corp	oration (or a	n equally	/ large portion of the
	ownership of a partne	rship or other entity) of	which the foundati	on has a 10% of greate	i interest		
	N/A						
2	Information Regardin	ng Contribution, Grant	, Gift, Loan, Scholar	ship, etc., Programs:			
	_	the foundation only r			itable organi	zations a	and does not accept
	unsolicited requests f	for funds If the found	ation makes gifts, g	rants, etc (see instruc	tions) to indi	viduals o	r organizations under
	•	plete items 2a, b, c, an					
а	The name, address, a	and telephone number	of the person to wh	om applications should t	be addressed		
	The form of the board	dentaria abanda baran	bandled and informa-	tion and materials that	chould racky	lo	
D	The form in which app	piications snould be su	omitted and informa	tion and materials they	anould includ	16	

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

Form **990-PF** (2011)

c Any submission deadlines

Page 11

Part XV Supplementary Information (continued)						
3 Grants and Contributions Paid Dui Recipient Name and address (home or business)	ing the Year or Appi	oved for F	uture Payment			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount		
a Paid during the year						
a raid daming mit year				į		
ATTACHMENT 9						
ATTACHMENT 9						
		1				
		1				
		1				
			1			
		1				
				1		
			1			
		1				
			1			
			1			
		ļ				
		<u> </u>				
Total	<u> </u>		▶ 3a	20,000		
b Approved for future payment				1		
		l				
			}			
		1				
		1				
		1				
		1				
		1				
Total	<u> </u>	<u> </u>				
IU(d)				1		

Page 12

Part XVI-	A Analysis of Income-Produ	icing Activ	vities			
	amounts unless otherwise indicated	T	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	function income (See instructions)
a				-		
b						
c				 	-	
				 		
е				 		
				 		
•	and contracts from government agencies					
	ship dues and assessments			14	2,586.	
	n savings and temporary cash investments		· · · · · · · · · · · · · · · · · · ·	 	2,300.	
	Is and interest from securities			+		<u> </u>
	al income or (loss) from real estate		<u> </u>			
	-financed property	I	<u> </u>			
	debt-financed property					
	I income or (loss) from personal property			18	1,101.	
	vestment income			 	1,101.	
	loss) from sales of assets other than inventory	/		 		
	me or (loss) from special events			-		
•	rofit or (loss) from sales of inventory					
	venue a			-		
						
				-		
6	Add columns (b), (d), and (e)				3,687.	
	dd line 12, columns (b), (d), and (e)					
Line No. ▼	Explain below how each activi accomplishment of the foundati					
				_		
						···
		•				
			_			
						·
					· · · · · · · · · · · · · · · · · · ·	
						· · · · · · · · · · · · · · · · · · ·
						- 000 DE

JSA 1E1492 1 000 Form **990-PF** (2011)

Form 990	-PF (2011)	•	DAVID F.	& KARE	N K. THOM	MAS FC	UNDATI	ON _	20-56	31086	Pa	age 1 <u>3</u>
Part X		Information Ro Exempt Organ	•	nsfers T	o and Tra	nsacti	ons and	l Relations	hips With No	nchar	itable)
in org	section ganizatio	ganization direct 501(c) of the Co ons? from the reportin	de (other than	section 50	1(c)(3) orga	nization	s) or in se				Yes	No
		rrom the reportin	_							1a(1)		X '
		assets										Х
•	her tran											
(1) Sales	of assets to a no	ncharitable exer	npt organiz	zation						1	Х
		ses of assets fro										Х
		of facilities, equi									ļ	Х
		ursement arrange									T	X
		or loan guarantee										X
•	-	mance of service									 	$\frac{\hat{x}}{x}$
		facilities, equipmed facilities, equipmed									fair m	ــــــــــــــــــــــــــــــــــــــ
		he goods, other:				•			•			
		ny transaction or										
(a) Line i) Amount involved			exempt organiza				rs, transactions, and s			
	N	/A					N/A			•		
												_
						•			· · · · · · · · · · · · · · · · · · ·			
			·- <u>-</u>	***************************************								
									,			
				-								
			ļ									
	11			f.l	b l-4	1 4						
de	escribed	indation directly in section 501(c) complete the follo	of the Code (o							<u> </u>	es 🛚] No
	(а) Name of organization	n	(b) Type of organ	ization		(0) Description of relation	nship		
							-		· · · · · · · · · · · · · · · · · · ·			
						-			· · · · · · · · · · · · · · · · · · ·			
	Under	naities of penury. I decla	are that⊿ have exam⊪	ned this return	n, including accor	npanying so	hedules and	statements, and to	the best of my knowl	edge and	belief, it	is true
Sign	correct, an	nalties of perjury, I declaration of	f preparer (other than t	axpayer) is base	ed on all information	n of which	preparer has a	ny knowledge				
Here	▶ ₹	41			1/21/1	13				IRS discu preparer		
	Signatu	re of officer or trustee		Da	te /		Title		(see instruc	ions)?	Yes [N
				- T								
Paid	i i	rint/Type preparer's		Prepar	er's signature	> ,		Date	Check if	PTIN		
Prepa	rer LE	VELYN CAPA			me <		<u> </u>	01/17/20				38
Use C	_ a <u> [</u>		RICEWATERHO		ERS LLE	, ·			Firm's EIN ▶ 13-	40083	24	
OSE C	יייי ע F ו	rm's address 🕨 30	OU MADISON	AVENUE								

10017

Form 990-PF (2011)

Phone no 646-471-3000

NEW YORK, NY

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

Schedule of Contributors

OMB No 1545-0047

► Attach to Form 990, Form 990-EZ, or Form 990-PF. Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization DAVID F. & KAREN K. THOMAS FOUNDATION 20-5681086 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (1) Form 990, Part VIII, line 1h, or (11) Form 990-EZ, line 1 Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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)

Name of organization DAVID F. & KAREN K. THOMAS FOUNDATION

Employer identification number 20-5681086

Part I	Contributors (see instructions) Use duplicate copies of Par	t I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 -	DAVID F THOMAS 345 PURCHASE STREET RYE, NY 10580	\$ <u>15,412</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) 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) No.	(b) 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) No.	(b) 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) No.	(b) 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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization DAVID F. & KAREN K. THOMAS FOUNDATION

Employer identification number

20-5681086

Part II	Noncash Property (see instructions). Use duplicate copies of	Part II if additional space is nee	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 _ _	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization DAVID F. & KAREN K. THOMAS FOUNDATION

Employer identification number 20-5681086

				20 0001000
Part III E	Exclusively religious, charitable, etc., hat total more than \$1,000 for the ye	individual contributions to ear. Complete columns (a) t	section 501(hrough (e) a	c)(7), (8), or (10) organizations nd the following line entry.
F	For organizations completing Part III, econtributions of \$1,000 or less for the	nter the total of exclusively	eligious, chai	ritable, etc ,
ι	Jse duplicate copies of Part III if addition	nal space is needed.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Faiti				
		(e) Transfer of gift		
	Transferee's name, address, an	d ZIP + 4	Relationsh	ip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
			-	
			-	
		(e) Transfer of gift		
	Tanadanala nama addana an	.d 71D ± 4	Polationeh	ip of transferor to transferee
	Transferee's name, address, an	Id ZIP + 4	Relationsii	ip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of gift	· · · · · · · · · · · · · · · · · · ·	
		.,		
	Transferee's name, address, ar	nd ZIP + 4	Relationsh	ip of transferor to transferee
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
			-	
		(e) Transfer of gift		
		•	D olation - t	in of transforms to transforms
	Transferee's name, address, an	10 ZIY + 4	Kelationsh	nip of transferor to transferee
	1			

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	2,507.	2,586.
REVENUE AND EXPENSES PER BOOKS	2,507.	2,586.
		TOTAL
DESCRIPTION	NORTH STREET INVESTMENTS, LLC BANK OF AMERICA, N.A.	

ATTACHMENT 1 PAGE 19

ATTACHMENT 2

INCOME
OTHER
 -
PART
990PF.
FORM

	LLC	INVESTMENTS, LLC	NORTH STREET
PER BOOK			DESCRIPTION
EXPENSES			
AND			
REVENUE			

	NET	INVESTMENT	INCOME	857.
REVENUE	AND	XPENSES	ER BOOKS	857.

857.

857.

TOTALS

FORM 990PF, PART I - LEGAL FEES

ı		
	ď	
ì	_	
ŀ	E-	
l	-	
ı	~	
ı	2	
i	ᄺ	
ı	_	
ı	2	
ı	~	
ı	بار.	
ı	Ę	
١	_	
	~	
١	Н	
ı	E	
ı	_	
ı	-	
l	E-	
ŀ	4	
ŀ		
	Z	
	Z	
	Z	
	4	
	Δ	
	Z A	
	F A	
	Lα	
	ΡΔ	
	PΑ	
	ΤΔ	
	ΤΔ	
	ΤΔ	
	P.A.	
	PΔ	
	F 4	
	PA	

ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	250.	250.
		TOTALS
DESCRIPTION	NYS DEPARTMENT OF LAW	

250.

250.

CHARITABLE PURPOSES ATTACHMENT 4

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1,662.	1,662.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	1,663.	1,663.
REVENUE AND EXPENSES PER BOOKS	3,325.	3,325.
DESCRIPTION	PRICEWATERHOUSECOOPERS LLP	TOTALS

ATTACHMENT 5

REVENUE AND

NET INVESTMENT INCOME

EXPENSES PER BOOKS

481.

DESCRIPTION NORTH STREET INVESTMENTS LLC

481.

TOTALS

481.

ATTACHMENT 5 PAGE 23

DESCRIPTION

NORTH STREET INVESTMENTS, LLC

ENDING BOOK VALUE

ENDING FMV

231,423.

231,423.

644,489.

ATTACHMENT 6 PAGE 24

20-5681086

ATTACHMENT 7

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

CHECK WRITTEN BUT OUTSTANDING AT Y/E

20,000.

TOTAL

20,000.

FORM 990PF, PART VIII - LIST OF OFFICERS,	ERS, DIRECTORS, AND TRUSTEES		ATTACHMENT 8	MENT 8
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
DAVID F THOMAS 345 PURCHASE STREET RYE, NY 10580	PRESIDENT 1.00	0	0	0
KAREN K THOMAS 345 PURCHASE STREET RYE, NY 10580	TREASURER 1.00	0	0	0
JAMES N BENEDICT 345 PURCHASE STREET RYE, NY 10580	SECRETARY 1.00	0	0	0
	GRAND TOTALS	0	0	0

DAVID F & KAREN K THOMAS FOUNDATION

20-5681086

FORM 950PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

501 (C)(3) NONE

PURPOSE OF GRANT OR CONTRIBUTION

RELIGIOUS BENEFITS

20,000.

AMOUNT

ALTACHMENT 9

Č.

RECIPIENT NAME AND ADDRESS

CARDINAL'S APPEAL 1011 FIRST AVENUE 14TH FLOOR

NEW YORK, NY 10022

20,000.

TOTAL CONTRIBUTIONS PAID

PAGE 27 ATTACHMENT 9

79713N 2532 1/16/2013

V 11-6 4

SCHEDULE D (Form 1041)

Capital Gains and Losses

OMB No 1545-0092

Employer identification number

Department of the Treasury Internal Revenue Service Name of estate or trust ► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

DAVID F. & KAREN K. THOMAS FOUNDATION 20-5681086 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (e) Cost or other basis (a) Description of property (b) Date acquired (c) Date sold (d) Sales price the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2010 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (mo, day, yr) (c) Date sold (mo , day, yr) (e) Cost or other basis (see instructions) the entire year Subtract (e) from (d) (d) Sales price 62 244. 244. ATTACHMENT 1 b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Gain from Form 4797, Part I 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2010 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back For Paperwork Reduction Act Notice, see the Instructions for Form 1041. Schedule D (Form 1041) 2011

JSA

Sche	ule D (Form 1041) 2011					Page 2
Par		T	(1) Beneficiaries'	(2) Esta		(3) Total
	Caution: Read the instructions before completing this part	t	(see instr)	or trus	st's	(3) Total
13	Net short-term gain or (loss)	3				
14	Net long-term gain or (loss):	1	İ			
а	Total for year					244.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14	b				
С	28% rate gain	С				
15	Total net gain or (loss). Combine lines 13 and 14a ▶ 15	5				244.
Note	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or F	om	n 990-T, Part I, line 4a) If lines 14	la and	d 15, column (2), are net
gaıns	go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, compl	lete	Part IV and the Capital	Loss Carryo	ver W	orksheet, as necessary
Par	t IV Capital Loss Limitation					
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I			1		
а	The loss on line 15, column (3) or b \$3,000: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1,				16	
Note Canv	: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, over Worksheet in the instructions to figure your capital loss carryover	line	9 22 (or Form 990-T, lii	ne 34), is a l	oss, c	complete the Capital Loss
Par			-			
	1041 filers. Complete this part only if both lines 14a and 15 in column	(2)	are dains or an am	ount is ent	ered	in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more th				Cica	mr art or rart mana
	ion: Skip this part and complete the Schedule D Tax Worksheet in the instr					
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
	990-T trusts. Complete this part only if both lines 14a and 15 are ga					
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and o	cor	nplete the Schedule	D Tax Wo	rksh	eet in the instructions
it eit	her line 14b, col. (2) or line 14c, col. (2) is more than zero					· · · · · · · · · · · · · · · · · · ·
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		17		^	
18	Enter the smaller of line 14a or 15 in column (2)					
	but not less than zero			į		
19	Enter the estate's or trust's qualified dividends					
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) 19					
20	Add lines 18 and 19					
21	If the estate or trust is filing Form 4952, enter the					
	amount from line 4g, otherwise, enter -0 ▶ 21					
22	Subtract line 21 from line 20 If zero or less, enter -0		. 22			
23	Subtract line 22 from line 17 If zero or less, enter -0		. 23		,	
					•-	
24	Enter the smaller of the amount on line 17 or \$2,300		. 24		•	
25	Is the amount on line 23 equal to or more than the amount on line 24?					
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box.					
	No. Enter the amount from line 23		25		•	
26	Subtract line 25 from line 24		26			
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31	:	27		*	
					,	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			i
29	Subtract line 28 from line 27		. 29		-	
30	Multiply line 29 by 15% (15)				30	
31	Figure the tax on the amount on line 23 Use the 2011 Tax Rate S					
	(see the Schedule Ginstructions in the instructions for Form 1041)				31	<u> </u>
32	Add lines 30 and 31				32	
33	Figure the tax on the amount on line 17 Use the 2011 Tax Rate S					
	(see the Schedule Ginstructions in the instructions for Form 1041)				33	ļ. <u>.</u>
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here					
	G, line 1a (or Form 990-T, line 36)	<u>.</u>	<u> </u>		34	L
					Sche	edule D (Form 1041) 2011

JSA 1F1220 2 000

20-5681086

20-5681086

Schedule D Detail of Long-term Capital Gains and Losses DAVID F & KAREN K THOMAS FOUNDATION

Description	Date	Date	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
CAPITAL GAINS (LOSSES) HELD FOR INVESTMENT PURPOSES					
NORTH STREET INVESTMENTS II.C.	VARIOUS	VARIOUS	244		244
TOTAL CAPITAL GAINS (LOSSES) HELD FOR INVESTMENT PURPOSES			244		244.
ירוטה כשנ דוטה לשינים (הסססים) ווחסס נסי דיי הססים					
			244		
Totals					244

JSA 1F0970 2 000

PAGE 30 ATTACHMENT 1

V 11-6.4

12 25.04 PM

79713N 2532 1/16/2013

20-5681086

DAVID F. & KAREN K. THOMAS FOUNDATION 20-568108
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Date Date sold Kind of Property Description acquired Excess of FMV over adj basis FMV Gross sale Depreciation Cost or Adj basis Gain price less allowed/ other as of as of or expenses of sale 12/31/69 (loss) allowable basis 12/31/69 NORTH STREET INVESTMENTS LLC **VARIOUS** VARIOUS PROPERTY TYPE: OTHER 244. 244. 244. TOTAL GAIN(LOSS)

Form **8868**

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the		► File a	separate ap	plication for each return.			
If you are	filing for an	Automatic 3-Month Extension, c	omplete o	nly Part I and check th	ıs box		▶ X
 If you are 	filing for an	Additional (Not Automatic) 3-Mo	onth Extens	sion, complete only Pa	art II (on page 2 of this	form)	
		unless you have already been gran					
a corporation 8868 to req Return for	n required juest an ex Transfers A	You can electronically file Form of the form 990-T), or an addition tension of time to file any of the associated With Certain Personal details on the electronic filing of the	ial (not aut forms liste I Benefit (omatic) 3-month exten d in Part I or Part II w Contracts, which must	ision of time. You can ith the exception of F t be sent to the IRS	electronically Form 8870, Ir S in paper fo	y file Form nformation ormat (see
		-Month Extension of Time. On				 	
		to file Form 990-T and requesting				mplete	
•	-						. ▶ 🗔
All other con	porations (including 1120-C filers), partnersh	ıps, REMIC	s, and trusts must use I	Form 7004 to request a	n extension of	f time
to file incom		- · · · · · · · · · · · · · · · · · · ·			Enter filer's identify		
	Name of ex	cempt organization or other filer, see in	structions		Employer identific	cation number (I	EIN) or
Туре ог					<u> </u>		
print	BREAD	LOAF ROCK FOUNDATION			X 26-39075	41	
File by the due date for	Number, st	reet, and room or suite no. If a P.O. box	k, see instruc	tions	Social security numb		
filing your		RCHASE STREET					
retum See instructions	City, town	or post office, state, and ZIP code For	a foreign add	dress, see instructions			
		Y 10580					. , ,
Enter the Return code for the return that this application is for (file a separate application for each return)							
Application			Return	Application			Return
ls For			Code	Is For			Code
Form 990	13101					07	
01111 300					08		
TOTAL GOODE					09		
Form 990-Pf	F		04	Form 5227			10
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust othe	r than above)	06	Form 8870			12
		care of ▶ HOLLAND & KNIG					
Telephon	e No ▶ _	312 715-5703	F	AX No ▶ 312 578	8-6666	_	
		oes not have an office or place of					▶ 🔲
		Return, enter the organization's for					S IS
		leck this box ▶ 🔝 📗		irt of the group, check	this box ▶	· and atta	ach
a list with the	e names ai	nd EINs of all members the extens	on is for				
1 I reque	est an autoi	matic 3-month (6 months for a cor					
until		08/15, 20 12, to file the	exempt org	ganization return for the	e organization named	above The ex	dension is
		on's return for					
► X		ear 20 $rac{11}{}$ or				00	
▶□	tax year b	eginning	, 20	, and ending		_, 20	
		ered in line 1 is for less than 12 m	onths, ched	ck reason: Initial r	return Final retu	ırn	
20 16 40-0	annhantia	n is for Form 990-BL, 990-PF, 99	O-T 4720	or 6069 enter the	tentative tax less an	ıv I	
nonref	undable cr	edits See instructions				3a \$	
		on is for Form 990-PF, 990-T,				1 1	
		ments made Include any prior yea				3b \$	
		stract line 3b from line 3a Include		ent with this form, if re	equired, by using EFTP:	1 1	
		al Tax Payment System) See instru				3c \$	70 -0 -
		oing to make an electronic fund	withdrawal	with this Form 8868	, see Form 8453-EO	and Form 88	J79-EO for
payment ins							
For Privacy /	Act and Pap	erwork Reduction Act Notice, see Inst	ructions.			Form 8868	(Rev 1-2012)

Form 8868

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

If you are If you are	filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Mo	omplete o	nly Part I and check th	is box	▶ 🗓				
-	lete Part II unless you have already been grain				8				
a corporatio 8868 to req Return for instructions)	ling (e-file). You can electronically file Form on required to file Form 990-T), or an addition uest an extension of time to file any of the Transfers Associated With Certain Persona For more details on the electronic filing of the tomatic 3-Month Extension of Time On	nal (not aut forms liste I Benefit (nis form, vis	tomatic) 3-month extended in Part I or Part II will contracts, which must sit www.irs.gov/efile and	ision of time. You can electronical of the exception of Form 8870, the sent to the IRS in paper for dictick on e-file for Chanties & Non	lly file Form Information format (see				
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete									
Part I only									
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time									
to file incom	e tax returns		,	Enter filer's identifying number, se					
T	Name of exempt organization or other filer, see in	structions		Employer identification number	yer identification number (EIN) or				
Type or				<u> </u>					
print	DAVID F. & KAREN K. THOMAS F			X 20-5681086					
File by the due date for	l ' '	Number, street, and room or suite no. If a P.O. box, see instructions							
filing your return See	345 PURCHASE STREET			<u> </u>					
instructions	City, town or post office, state, and ZIP code For	a foreign ad	aress, see instructions						
Catas the De	RYE, NY 10580 eturn code for the return that this application	e for (file o	s congrate application fo	or oach return)	. 04				
Enter the Re	eturn code for the return that this application	15 101 (1116 6	separate application it	or each return)	· []				
Application	· · · · · · · · · · · · · · · · · · ·	Return	Application		Return				
ls For		Code	is For		Code				
Form 990		01	Form 990-T (corporat	tion)	07				
Form 990-B		02	Form 1041-A		08				
Form 990-E	Z	01	Form 4720		09				
Form 990-P		04	Form 5227		10				
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069		11				
Form 990-T (trust other than above)			Form 8870		12				
	s are in the care of ► HOLLAND & KNIG		FAX No ▶ 312 578	8-6666					
	anization does not have an office or place of				▶□				
	or a Group Return, enter the organization's fo				nis is				
	e group, check this box	-							
a list with the names and EINs of all members the extension is for									
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 20 12, to file the exempt organization return for the organization named above. The extension is									
for the organization's return for									
calendar year 2011 or tax year beginning , 20 , and ending , 20									
tax year beginning, 20, and ending, 20, 20									
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any									
	rundable credits See instructions			3a \$	1,783.				
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and									
estimated tax payments made Include any prior year overpayment allowed as a credit c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS									
(Electronic Federal Tax Payment System) See instructions 3c \$									
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for									
payment instructions									
For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev 1-2012)									

Form 886	8 (Rev 1-2012)				Page 2				
• If you	are filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part II	and check this box	▶ X				
	nly complete Part II if you have already been grai				i8				
• If you	are filing for an Automatic 3-Month Extension, o	complete o	nly Part I (on page 1)						
Part II		dension o	f Time. Only file the origi	inal (no copies needed).					
	Enter filer's identifying number, see instructions								
	Name of exempt organization or other filer, see in	Name of exempt organization or other filer, see instructions							
Туре о	r								
print	DAVID F. & KAREN K. THOMAS FO	UNDATION		X 20-5681086					
-	Number, street, and room or suite no. If a P.O. box	x, see instruc	tions	Social security number (SSN)					
File by the due date i									
filing your	City, town or post office, state, and ZIP code. For a foreign address, see instructions								
return See Instructions RYE, NY 10580									
Enter th	ne Return code for the return that this application	is for (file a	separate application for ea	ch return)	. 0 4				
Applica		Return	Application Return						
ls For		Code	Is For	Code					
Form 9	90	01		<u> </u>					
Form 9		02	Form 1041-A	08					
Form 9		01	Form 4720	09					
Form 9		04	Form 5227	10					
	90-T (sec 401(a) or 408(a) trust)	05	Form 6069	11					
	90-T (trust other than above)	06	Form 8870	12					
		granted ar		automatic 3-month extension on a previously filed Form 8868.					
	books are in the care of ▶ HOLLAND & KNIG								
	phone No ▶ 312 715-5703		FAX No ▶ 312 578-0	6666					
	e organization does not have an office or place of			nis box	▶□				
	s is for a Group Return, enter the organization's fo				this is				
	whole group, check this box ▶ ☐ I				ittach a				
	the names and EINs of all members the extension								
	request an additional 3-month extension of time u		1	1/15 , 20 12					
	or calendar year 2011, or other tax year beginn								
	the tax year entered in line 5 is for less than 12 m				· —				
Ϊ	Change in accounting period								
7 S	tate in detail why you need the extension ADDIT	CIONAL I	NFORMATION IS REQUI	IRED IN ORDER					
	O FILE A COMPLETE AND ACCURATE TAX								
_									
_									
8a If	this application is for Form 990-BL, 990-PF, 99	90-T, 4720	o, or 6069, enter the tent	ative tax, less any					
	onrefundable credits. See instructions			8a \$	1,783.				
b If	this application is for Form 990-PF, 990-T,	4720, o	r 6069, enter any refun	dable credits and					
	stimated tax payments made Include any pr								
	mount paid previously with Form 8868	-		8b \$	1,783.				
	Total Control of the								
	Electronic Federal Tax Payment System) See instru		·	8c \$	0				
	Signature and Verific		st be completed for P						
	enalties of perjury, I declare that I have examined this form, correct, and complete, and that I am authorized to prepare this for	including ac		-	edge and belief,				
	Out & St. Hard		ENDOUGD 44	OFNT -					
Signature	. > Jul & Triudhader		Title ► ENROLLED AC	But y magain					
	•			Form 886	8 (Rev 1-2012)				

JSA