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Form 990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

For	calen	dar year 2011 or tax year beginning		, and ending		
Na	me of	foundation			A Employer identificatio	n number
		YES TO EDUCATION FOUND		·	20-891654	5
	_	nd street (or P O box number if mail is not delivered to street	•	Room/suite	B Telephone number	
	/0	GEORGE WEISS ASSOC., O	NE STATE ST.	FL 20	(860) 240-	-8900
		own, state, and ZIP code TFORD, CT 06103-3113			C If exemption application is	pending, check here
_		all that apply Initial return	D 1 Foreign organization	s check here		
_		Final return	i roloigh organization	,		
		Address change	Amended return Name change		Foreign organizations m 2 check here and attach of	neeting the 85% test,
H (Check	type of organization X Section 501(c)(3) ex			1	
	_		Other taxable private founda	ition	E If private foundation st under section 507(b)(1	
I F		rket value of all assets at end of year J Accounti	·	X Accrual	1	
·			ther (specify)		F If the foundation is in a under section 507(b)(1	
	\$	25,260,792. (Part I, colu		basis)		7(0); 0.10011 11010
P	art I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	1,000,000.		N/A	
	2	Check I if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	224.	224.		STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)				
a	6a	Net gain or (loss) from sale of assets not on line 10	5,607,709.			
Š	b	Gross sales price for all assets on line 6a 69, 368, 230.				
Revenue	7	Capital gain net income (from Part IV, line 2)		5,607,709.		
<u> </u>	8	Net short-term capital gain				
	9	Income modifications ECEIVED				
	10a	and allowances				
	b	Less Cost of grades sold				
	C	Gross profitor (loss) UV 1 5 2012	152 401	150 401		
	11	Other income	153,421.	153,421.		STATEMENT 2
	12	Total Add lines (th Ough) T. A. 1 T. Compensation of officers, durectors, trustees, etc.	6,761,354.	5,761,354.		
	13		0.	0.		0.
	14	Other employee salaries and wages				<u> </u>
es	15	Pension plans, employee benefits Legal fees STMT 3	1,215.	0.		1,215.
	1	Legal fees STMT 3 Accounting fees STMT 4	82,152.	0.		82,152.
ğ		Other professional fees	02,132.			02,132.
ē M	[Interest				
and Administrative Expens		Taxes STMT 5	55,200.	0.		0.
istr	19	Depreciation and depletion	00,200			·
를.	20	Occupancy				
Ą	21	Travel, conferences, and meetings				
P	22	Printing and publications				
6	23	Other expenses STMT 6	1,799.	0.		1,799.
atir		Total operating and administrative				
Operating		expenses. Add lines 13 through 23	140,366.	0.		85,166.
Ō	25	Contributions, gifts, grants paid	5,275,280.			5,275,280.
}	1	Total expenses and disbursements.				
<u> </u>	L	Add lines 24 and 25	5,415,646.	0.		5,360,446.
)	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	1,345,708.			
	b	Net investment income (if negative, enter -0-)		5,761,354.		
1226		Adjusted net income (if negative, enter -0-)			N/A	

_			
Pa	n	ρ	9

D		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	E	nd o	f year
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing	5,880,554.	4,913,79	2.	4,913,792.
	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				
		disqualified persons				
	7	Other notes and loans receivable				
		Less allowance for doubtful accounts ▶				
ts	8	Inventories for sale or use				
ssets	9	Prepaid expenses and deferred charges				
₹	10a	Investments - U S and state government obligations				
	b	Investments - corporate stock				
	C	Investments - corporate bonds				 -
	11	Investments - land buildings and equipment basis				
		Less accumulated depreciation		·-·· ··· · · · · · · · · · · · · · · ·		
	12	Investments - mortgage loans	10 040 050		_	
	13	Investments - other STMT 8	18,049,053.	20,347,00	0 -	20,347,000.
	14	Land, buildings, and equipment basis			1	
		Less accumulated depreciation				
	15	Other assets (describe ►)				
			22 020 607	25 260 70	_	25 260 702
		Total assets (to be completed by all filers)	23,929,607.	25,260,79	2 -	25,260,792.
		Accounts payable and accrued expenses	20,952.	3,00	0.	
	18	Grants payable			\dashv	
ies	19	Deferred revenue			\dashv	
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			\dashv	
Liabilities	21	Mortgages and other notes payable	12.		0.	
	22	Other liabilities (describe SECURITIES PAYABLE)	12.		 	
		T 4 14 44 45 (44 by 47 45 by 47 46 by	20,964.	3,00	_	
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	20,904.	3,00	•	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	į			
S	24	·	23,893,643.	25,257,79	2	
Š		Unrestricted Tomography restricted	15,000.	23,231,13	0.	
or Fund Balance	25 26	Temporarily restricted Permanently restricted	13,000.	······································	•	
ď	20	Foundations that do not follow SFAS 117, check here		<u> </u>		
Ē		and complete lines 27 through 31.				
9	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			\dashv	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds				
et	30	Total net assets or fund balances	23,908,643.	25,257,79	2.	
~		10.01 110.1 2000.10 5.1 12.11 20.12.11000				
	31	Total liabilities and net assets/fund balances	23,929,607.	25,260,79	2.	
\equiv			· ·			
P	<u>art</u>	Analysis of Changes in Net Assets or Fund B	alances			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30			
		st agree with end-of-year figure reported on prior year's return)			1	23,908,643.
	•	r amount from Part I, line 27a			2	1,345,708.
		r increases not included in line 2 (itemize)	SEE STA	ATEMENT 7	3	11,326.
-		lines 1, 2, and 3			4	25,265,677.
		eases not included in line 2 (itemize) > IOU DISTRIBUTI	ON IN EXCESS O	OF BASIS	5	7,885.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	·· ·· · · · · · · · · · · · · · · · ·		6	25,257,792.

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Part IV	Capital Gains	and Losses for Tax on I	nvestment	Income						
•		ribe the kind(s) of property sold (e circhouse, or common stock, 200 sh			` P	b) How acquired P - Purchase D - Donation		(c) Date : (mo , d		(d) Date sold (mo , day, yr)
1a DEU	TSCHE BANK	ACCOUNT					P	VARI	ous	VARIOUS
b IOU	LIMITED PA	RTNERSHIP					P	VARI	ous	VARIOUS
C					<u> </u>					
<u>d</u>		ма								
<u>e</u>			1		L					
(e) (Gross sales price	(f) Depreciation allowed (or allowable)	plus e	st or other basis expense of sale					ain or (loss (f) minus	(g)
a (69,360,345.		6	3,760,52	1.					5,599,824. 7,885.
_b	7,885.									7,885.
<u>c</u>										
<u>d</u>				 					···	
<u>e</u>			<u> </u>							
Comple	te only for assets showing	ng gain in column (h) and owned by	1				(I) Gains (C	ol (h) gain iot less tha	minus
(ı) F N	1V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (1) col (j), if any			COI	Losses	(from col	(h))
<u>a</u>								_		5,599,824. 7,885.
b										7,885 <u>.</u>
d										
<u>e</u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>				Γ			
2 Capital g	ain net income or (net ca	ipital loss) { If gain, also enter-	er in Part I, line 0- in Part I, line	7 7	}	2				5,607,709.
3 Net short	t-term capital gain or (los	ss) as defined in sections 1222(5) a	ind (6)							
If gain, a	lso enter in Part I, line 8,				•				/-	
	enter -0- in Part I, line 8		D	T N-4		3			N/A	<u> </u>
	4	nder Section 4940(e) fo					nent inc	ome		 -
(For optiona	I use by domestic private	e foundations subject to the section	4940(a) tax on	net investment in	come	e)				
If section 49	40(d)(2) applies, leave ti	his part blank								
		•		Ab a b	10					Yes X No
		tion 4942 tax on the distributable a			rioa /					L Yes A INO
		lify under section 4940(e) Do not c each column for each year, see inst			es					
	(a)	(b)			(c)					(d)
Calendar	Base periód years year (or tax year beginni	المنافقة الأماني والمنافقة المنافقة المنافقة الأمانية المنافقة المنافقة المنافقة المنافقة المنافقة المنافقة ال	stributions	Net value of no			-use assets			bution ratio vided by col. (c))
	2010		37,150.		23	. 44	0,274		((-)	.327946
	2009		18,960.				0,618			.153080
	2008	4	13,880.		20	,40	8,205			.020280
	2007		0.				O			.000000
	2006									
2 Total of	line 1, column (d)							2		.501306
3 Average	distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the number	of ye	ars				
the found	dation has been in existe	nce if less than 5 years						3		.125327
4 Enter the	net value of noncharitat	ole-use assets for 2011 from Part X	, line 5					4_	2	6,613,887.
									•	
5 Multiply	line 4 by line 3							5		3,335,439.
6 Enter 1%	of net investment incon	ne (1% of Part I, line 27b)						6		57,614.
7 Add lines	s 5 and 6							7		3,393,053.
8 Enter qua	alifying distributions fron	n Part XII, line 4						8		5,360,446.
•	, ,	n line 7, check the box in Part VI, lin	e 1b. and como	lete that nart usin	ທ a 1	% tax	rate	<u> </u>		
	Part VI instructions	, one on the box in rule FI, iii				tun				

orm 990	-PF(2011) SAY YES TO EDUCATION FOUNDATION							8916			Page 4
Part \				··	4940(e), or 4	948	- see i	nstru	ictio	ns)
1a Exe	mpt operating foundations described in section 4940(d)(2), check here 🕨 🔙 and ei)					
	e of ruling or determination letter (attach copy of letter if nec								_		
b Dor	nestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒	• [X	J a	ind enter 1	%)	1	<u></u>	5	7,6	14.
	art I, line 27b										
	other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%				ol (b)	}					_
2 Tax	under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	hers e	ente	er -0-)			2				0.
3 Add	lines 1 and 2						3		5	7,6	14.
4 Sut	title A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only $$ O $$	thers e	ent	er -0-)			4		_		0.
5 Tax	based on investment income Subtract line 4 from line 3 If zero or less, enter -0-						5		5	7,6	14.
6 Cre	dits/Payments	ı									
a 201	1 estimated tax payments and 2010 overpayment credited to 2011	6a	1		5/,	788.					
b Exe	mpt foreign organizations - tax withheld at source	6b	-								
c Tax	paid with application for extension of time to file (Form 8868)	6c	4								
d Bac	kup withholding erroneously withheld	6d							_		
	al credits and payments. Add lines 6a through 6d							ļ	5	7,7	88.
	er any ${f penalty}$ for underpayment of estimated tax. Check here $\overline{f X}$ if Form 2220 is atta	ched					_8_	ļ			36.
	due If the total of lines 5 and 8 is more than line 7, enter amount owed						9				
	rpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				1		10			1	38.
	er the amount of line 10 to be Credited to 2012 estimated tax			138	• Refun	ded ►	11	L			0.
	/II-A Statements Regarding Activities									V	NI.
	ing the tax year, did the foundation attempt to influence any national, state, or local legis	lation	0 r	did it parti	cipate or i	ntervene	ın		<u> </u>	Yes	
•	political campaign?								1a		X
	it spend more than \$100 during the year (either directly or indirectly) for political purpos								1b		
	ne answer is "Yes" to 1aor 1b, attach a detailed description of the activities an	d cop	oies	s of any r	naterials	publishe	ed or				
	tributed by the foundation in connection with the activities										v
	the foundation file Form 1120-POL for this year?								1c		X
	er the amount (if any) of tax on political expenditures (section 4955) imposed during the		Φ.			0.					
	On the foundation \$ 0 \(\) (2) On foundation managers										
	er the reimbursement (if any) paid by the foundation during the year for political expendingers $ ightharpoonup$ \$ 0 .	ture ta	ax i	mposea a	n toundat	ЮП					
	nagers > \$0 . the foundation engaged in any activities that have not previously been reported to the II	200							2		X
		no'									
	Yes," attach a detailed description of the activities the foundation made any changes, not previously reported to the IRS, in its governing i	netrun	mar	at articles	of incorp	oration o			1		
	tive, or other similar instruments? If "Yes," attach a conformed copy of the change		1161	it, articies	or meorp	Jianon, C	''		3		Х
•	the foundation have unrelated business gross income of \$1,000 or more during the year								4a		X
	res," has it filed a tax return on Form 990-T for this year?	•					N	/A	4b		
	s there a liquidation, termination, dissolution, or substantial contraction during the year?	,							5		<u>X</u>
	Yes," attach the statement required by General Instruction T.										
	the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther							1		i
	y language in the governing instrument, or								1		
	y state legislation that effectively amends the governing instrument so that no mandator	y direc	ctio	ins that co	nflict with	the state	law				
	emain in the governing instrument?	•							6	Х	i
	the foundation have at least \$5,000 in assets at any time during the year?								7	X	
	Yes," complete Part II, col. (c), and Part XV.										
8a Ent	er the states to which the foundation reports or with which it is registered (see instructio	ns) 🕨	>								
С									}		
b If th	e answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorne	y G	General (or	designate	;)					
	ach state as required by General Instruction G? If "No," attach explanation				-				8b	Х	
	ne foundation claiming status as a private operating foundation within the meaning of se	ction 4	494	12(j)(3) or	4942(j)(5) for cale	ndar				
	r 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," c								9		X
	any persons become substantial contributors during the tax year? If "Yes," attach a schedu					es S	TMT	9	10	X	

Х

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

All other program-related investments. See instructions

Total. Add lines 1 through 3

F	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	19,977,117.
	Average of monthly cash balances	1b	7,042,058.
	Fair market value of all other assets	10	0.
d	Total (add lines 1a, b, and c)	1d	27,019,175
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	27,019,175.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	405,288.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	26,613,887
6	Minimum investment return. Enter 5% of line 5	6	1,330,694.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part)	d certain	
1	Minimum investment return from Part X, line 6	1	1,330,694.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 57, 614.		· · · · · · · · · · · · · · · · · · ·
b			
C	Add lines 2a and 2b	2c	57,614.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	57,614. 1,273,080.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,273,080.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,273,080.
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	5,360,446.
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		
a	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	5,360,446.
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	57,614. 5,302,832.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,302,832.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	ualifies f	or the section

Part XIII Undistributed Income (see instructions)

		_		
	(a)	(b) Years prior to 2010	(c) 2010	(d) 2011
Distributable amount for 2011 from Part XI,	Corpus	Tears prior to 2010	2010	2011
line 7				1,273,080.
2 Undistributed income, if any, as of the end of 2011		*		
a Enter amount for 2010 only			0.	
b Total for prior years				
	1	0.		
3 Excess distributions carryover, if any, to 2011				
short a From 2007 13,321.				
4 ⁶⁴ b From 2007 1,471,545.				
c From 2008 O .				
d From 2009 2,233,517.				
e From 2010 6,656,860.				
f Total of lines 3a through e	10,375,243.			
4 Qualifying distributions for 2011 from				
Part XII, line 4. \triangleright \$ 5,360,446.	j		0	
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		0.		•
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2011 distributable amount	0.			1,273,080.
e Remaining amount distributed out of corpus	4,087,366.			1/2/0/0001
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,462,609.			
b Prior years' undistributed income Subtract				***************************************
line 4b from line 2b		0.		
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		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.	
f Undistributed income for 2011 Subtract		į		
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.			
8 Excess distributions carryover from 2006				······································
not applied on line 5 or line 7	13,321.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	14,449,288.			
10 Analysis of line 9				
a Excess from 2007 1,471,545.				
b Excess from 2008				
c Excess from 2009 2,233,517.				
d Excess from 2010 6,656,860.				
e Excess from 2011 4,087,366.				Form 990-PF (2011)
				Form 990-PF (2011)

123581 12-02-11

	TO EDUCAT			20-89	16545 Page 10
Part XIV Private Operating I			II-A, question 9)	N/A	
1 a If the foundation has received a ruling	·				
foundation, and the ruling is effective for		•	▶ ∟		
b Check box to indicate whether the foun	dation is a private operat	ing foundation described		4942(j)(3) or 49	942(1)(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					
each year listed					
b 85% of line 2a					
c 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					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c Gomplete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter					
(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 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 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	}			1	
(4) Gross investment income	-				
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5.000 or mo	ore in assets
at any time during					
1 Information Regarding Foundation	on Managers:				
List any managers of the foundation what year (but only if they have contributed in the second	o have contributed more	than 2% of the total con	tributions received by the	foundation before the clos	e of any tax
GEORGE A. WEISS					
b List any managers of the foundation who other entity) of which the foundation ha	no own 10% or more of the	ne stock of a corporation	(or an equally large portio	on of the ownership of a pa	irtnership or
NONE	or grouter mere				
	ion Count Off I :	Cabalar-Iris : 5			
2 Information Regarding Contribut Check here ► X if the foundation the foundation makes gifts, grants, etc	only makes contributions	to preselected charitable	organizations and does n	ot accept unsolicited requi	ests for funds If
a The name, address, and telephone num					
b The form in which applications should	pe submitted and informa	tion and materials they s	hould include		
c Any submission deadlines				· · · · · · · · · · · · · · · · · · ·	
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or c	ther factors	
123601 12-02-11		<u> </u>			Form QQO_DE (2011)

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year EDWIN GOULD SERVICES FOR CHILDREN & N/A 501(C)(3) TO SUPPORT PROGRAMS **FAMILIES** THAT BENEFIT FOSTER 1365 YORK AVENUE, SUITE 10K CHILDREN IN THE NEW NEW YORK, NY 10021 YORK CITY AREA. 25,000. FACING HISTORY AND OURSELVES N/A 501(C)(3) TO SUPPORT PROGRAMS 225 WEST 34TH STREET, SUITE 1416 THAT COMBAT RACISM AND NEW YORK, NY 10122 PREJUDICE AND NURTURE DEMOCRACY. 25,000. JEWISH FEDERATION OF GREATER HARTFORD N/A 501(C)(3) OPERATION PROMISE 333 BLOOMFIELD AVENUE, SUITE C PROGRAM IN SUPPORT OF WEST HARTFORD, CT 06117 THE RESETTLING OF ETHIOPIAN JEWS. 200,000. SAY YES TO EDUCATION INC. N/A 501(C)(3) TO SUPPORT PROGRAMS ONE STATE STREET, FLOOR 20 THAT PROMOTE HARTFORD, CT 06103 POST-SECONDARY EDUCATION FOR AT-RISK CHILDREN. 1,200,000. SEEDS OF PEACE N/A 501(C)(3) TO SUPPORT PROGRAMS 370 LEXINGTON AVE., SUITE 401 THAT DEVELOP NEW YORK, NY 10017 LEADERSHIP SKILLS REQUIRED TO ADVANCE LASTING PEACE 25,000. SEE CONTINUATION SHEET(S) Total ➤ 3a 5,275,280. b Approved for future payment NONE Total

nter gross amounts unless otherwise indicated		es		,	
anter gross amounts umess otherwise mulcateu	(a) Business	(b)	(C) Exclu- sion	(d)	(e) Related or exempt
Program service revenue	code	Amount	code	Amount	function income
a	_				
b	-				
<u> </u>	-				
d	_		_		
e	-				
Topo and contracts from coverement accordes					
g Fees and contracts from government agencies Membership dues and assessments			 		
Interest on savings and temporary cash			<u> </u>		
investments					
4 Dividends and interest from securities			14	224.	
5 Net rental income or (loss) from real estate		· · · · · · · · · · · · · · · · · · ·			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	5,607,709.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
a INCOME FROM INVESTMENT	_		1.0	152 421	
b PARTNERSHIP	_		18	153,421.	
C	-				*
d	_				
8 8 8 8	- 			5,761,354.	
2 Subtotal Add columns (b), (d), and (e)	<u> </u>	<u> </u>	<i>y</i> •	13	5,761,35
				13	5,101,35
3 Total. Add line 12, columns (b), (d), and (e)	١				
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations				_	
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations		nplishment of	Exempt	Purposes	
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities	s to the Accon				olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities	s to the Accon	column (e) of Part XV	'I-A contribut		olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	'I-A contribut		olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	'I-A contribut		olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	'I-A contribut		olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	'I-A contribut		olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	'I-A contribut		Dishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	'I-A contribut		olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	'I-A contribut		olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	′I-A contribut		olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	′I-A contribut		Dishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	′I-A contribut		Dishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	′I-A contribut		Dishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	′I-A contribut		olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accon	column (e) of Part XV	′I-A contribut		olishment of

123621 12-02-11

Form 99					FOUNDATION	-	20-8916545	Pa	ge 13
Part :	XVII			Transfers To a	and Transactions	and Relationships Wi	th Noncharitable	9	
4 0.4		Exempt Organ		ra anu aé tha éallacus		an danashad ta anaban 504 (a)		V	N.
		-			ig with any other organizati 27, relating to political organ	on described in section 501(c)	OI	Yes	No
	•	from the reporting found			• .	ilizations,			
	Cash	nom the reporting round	ation to a non	chantable exempt of	yamzation of		1a(1)		Х
٠,	Other	accate					1a(2)		X
		sactions					14(2)		<u> </u>
		of assets to a noncharita	ble exempt or	กลกเรลร์เกก			16(1)		Х
• •		ases of assets from a no	-	•			1b(2)		X
		I of facilities, equipment,					1b(3)		X
٠,		oursement arrangements		-			1b(4)		Х
٠.		or loan guarantees					1b(5)		Х
		rmance of services or me	mbership or f	undraising solicitation	ons		1b(6)		Х
c Sha	aring of	facilities, equipment, ma	iling lists, oth	er assets, or paid em	ployees		1c		Х
d Ifti	he answ	ver to any of the above is	"Yes," comple	te the following sch	edule Column (b) should at	ways show the fair market value	e of the goods, other ass	ets,	
						ue in any transaction or sharing	-		
col	umn (d) the value of the goods,	other assets,	or services received					
(a) Line n	10	(b) Amount involved	(c) N		e exempt organization	(d) Description of transfers,	transactions, and sharing ar	rangeme	nts
				N/A					
					* ·n				
	-								
	_								
	+								
	+			-					
									
-	+								
2a ls t	he foun	dation directly or indirect	lly affiliated wi	th or related to one	or more tax-exempt organ			-	
		501(c) of the Code (other				izations described	Yes	X	No
		mplete the following sch		30 ((0)(0)) 01 111 000			163		1 140
	,	(a) Name of org			(b) Type of organization	(c) Descript	tion of relationship		
	•	N/A					······································		
									
							· ·		
						I statements, and to the best of my kill mation of which preparer has any kno	May the IRS of	iscuss t	:his
Sign			7 _				return with th shown below		
Here		1111		 	11-6-2019	Trustec	X Yes	L	No
	Sign	ature of officer or trustee		10	Date	Title			
		Print/Type preparer's na	ime	Preparer's s	ignature	Date Check	if PTIN		
Doid		ET 1736EMU	COT ECV	T / 1	^′	self- empl	· 1	171	
Paid Prepa	2505	ELIZABETH Firm's name ► BLU			MPANY, P.C.,	1976/12	$P00235$ $N \triangleright 06-10092$		
Use (ı	riim s name - BLO	ы, эпн	PIRO/& CO	TIFAUL, P.C.,	FIRM'S EI	N ► 00-10092	U D	
J 35 (J. 11 y	Firm's address ► 29	S. MA	IN STREET	, P.O. BOX 2	72000			
					06127-2000	Phone no	860 561-	400	0
						j i none no	5000 301		

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-004

2011

Employer identification number

SAY YES TO EDUCATION FOUNDATION 20-8916545 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 X 501(c)(3) exempt private foundation Form 990-PF 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 (i) Form 990, Part VIII, line 1h, or (ii) 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 more during the year. 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)

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)

Employer identification number

SAY YES TO EDUCATION FOUNDATION

20-8916545

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.
--------	--------------------------------	---

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHRISTIE'S 20 ROCKEFELLER PLAZA NEW YORK, NY 10020	\$1,000,000.	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 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)
122452 01.2	3.12	Schodulo R / Form	990 990-F7 or 990-PF) (2011)

Employer identification number

SAY YES TO EDUCATION FOUNDATION

20-8916545

Part II	Noncash Property (see instructions) Use duplicate copies of Part	il if additional space is needed.	
(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
			00 000 E7 or 000 PE\ (2011)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Page 4 Name of organization Employer identification number 20-8916545 SAY YES TO EDUCATION FOUNDATION Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once) Use duplicate copies of Part III if additional space is needed. (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, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift

a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Relationship of transferor to transferee

Part XV. Supplementary Information	TO EDUCATION I	CONDATION	20-891	3343
3 Grants and Contributions Paid During the Yo				
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
				······································
THE POSSE FOUNDATION, INC.	N/A	501(C)(3)	TO SUPPORT HIGH SCHOOL	
14 WALL STREET; SUITE 8A-60			STUDENTS THROUGH	25 222
NEW YORK, NY 10005			COLLEGE.	25,000
UNIVERSITY OF PENNSYLVANIA	N/A	501(C)(3)	TO SUPPORT THE AWE	
3451 WALNUT ST., 433 FRANKLIN BUILDING			PENN ENGINEERING	
PHILADELPHIA, PA 19104			PROGRAM.	10,000
BRITISH SCHOOLS AND UNIVERSITIES	N/A	501(C)(3)	TO SUPPORT THE WORK OF	
FOUNDATION INC			U.K. SCHOLARS STUDYING	
575 MADISON AVENUE, SUITE 1006			IN THE U.S. AND U.S.	
NEW YORK, NY 10022			SCHOLARS STUDYING IN	
			THE U.K.	50,000
UNIVERSITY OF PENNSYLVANIA	N/A	501(C)(3)	TO SUPPORT UNIVERSITY	
3451 WALNUT ST., 433 FRANKLIN BUILDING			PROFESSORSHIPS.	
PHILADELPHIA, PA 19104				2,000,000
ADMINISTRA OF DENINCAL VANTA	N/A	501(C)(3)	TO SUPPORT COLLEGIATE	
UNIVERSITY OF PENNSYLVANIA 3451 WALNUT ST., 433 FRANKLIN BUILDING	N/A	501(0)(3)	ATHLETIC PROGRAMS.	
PHILADELPHIA, PA 19104			Timberic recorded:	112,280
,				· · · · · · · · · · · · · · · · · · ·
UNIVERSITY OF PENNSYLVANIA	N/A	501(C)(3)	TO SUPPORT THE PENN	
3451 WALNUT ST., 433 FRANKLIN BUILDING			CENTER FOR ORPHAN	
PHILADELPHIA, PA 19104			DISEASE RESEARCH AND	
•			THERAPY.	1,000,000
UNIVERSITY OF PENNSYLVANIA	N/A	501(C)(3)	TO SUPPORT THE OPKA	
3451 WALNUT ST., 433 FRANKLIN BUILDING			RESEARCH GRANT FUND.	
PHILADELPHIA, PA 19104				200,000
UNIVERSITY OF PENNSYLVANIA	N/A	501(C)(3)	TO SUPPORT THE MIAMI	
UNIVERSITY OF PENNSILVANIA 3451 WALNUT ST., 433 FRANKLIN BUILDING			POSSE PROJECT.	
			FOSSE PRODECT.	100 000
PHILADELPHIA, PA 19104 WOODROW WILSON NATIONAL FELLOWSHIP	N/A	501(C)(3)	TO SUPPORT PROGRAMS	100,000
FOUNDATION	, , ,	[]	THAT ATTEMPT TO	
5 VAUGHN DR., SUITE 300			MAXIMIZE HUMAN	
PRINCETON, NJ 08540.			POTENTIAL THROUGH	
PRINCEION, NO 00340.			EDUCATION.	200,000
THE V FOUNDATION	N/A	501(C)(3)	TO SUPPORT CANCER	
106 TOWERVIEW CT.			RESEARCH AND RELATED	
CARY NC 27513			PROGRAMS	20,000
Total from continuation sheets				3,800,280

Part XV. Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor 501(C)(3) TEMPLE EMANU-EL N/A TO SUPPORT THE 1701 WASHINGTON AVE. SYNAGOGUE AND ITS MIAMI, FL 33139 18,000. CHARITABLE PROGRAMS. TRINITY COLLEGE 501(C)(3) TO SUPPORT THE N/A 300 SUMMIT STREET ASSAIANTE ENDOWMENT HARTFORD, CT 06106 CHAIR. 50,000. THE ORPHAN DISEASE PATHWAY PROJECT N/A 501(C)(3) TO SUPPORT RESEARCH TO ONE STATE STREET, FLOOR 20 FIND CURES AND HARTFORD, CT 06103 EFFECTIVE TREATMENTS FOR RARE DISEASES. 15,000. Total from continuation sheets

SOURCE GROSS AMOUNT DIVIDENDS AMOUNT INTEREST FROM SECURITIES 224. 0. TOTAL TO FM 990-PF, PART I, LN 4 224. 0. FORM 990-PF OTHER INCOME STATEMEN DESCRIPTION PER BOOKS MENT INCOME NET INVEST- ADJUSTED CHARL FORM 990-PF LEGAL FEES STATEMEN (A) (B) (C) (II 153,421. 153,4	* 1	STATEMENT	JRITIES	EST FROM SECU	AND INTER	DIVIDENDS A	FORM 990-PF
TOTAL TO FM 990-PF, PART I, LN 4 Column		COLUMN AMOUN'			GROSS		SOURCE
TOTAL TO FORM 990-PF LEGAL FEES STATEMEN	224		0.	224.		JRITIES	INTEREST FROM SECU
CA REVENUE NET INVEST- ADJUSTED	224		0.	224.	4	F, PART I, LN 4	TOTAL TO FM 990-PF
DESCRIPTION REVENUE PER BOOKS MENT INCOME NET IN INCOME FROM INVESTMENT PARTNERSHIP 153,421. 153,421. TOTAL TO FORM 990-PF, PART I, LINE 11 153,421. FORM 990-PF LEGAL FEES STATEMEN (A) (B) (C) (II EXPENSES NET INVEST- ADJUSTED CHARM PER BOOKS MENT INCOME PURE LEGAL RESEARCH 1,215. 0. 1 FORM 990-PF, PG 1, LN 16A 1,215. 0. 1 TO FM 990-PF ACCOUNTING FEES STATEMEN (A) (B) (C) (II EXPENSES NET INVEST- ADJUSTED CHARM PURE (A) (B) (C) (II EXPENSES NET INVEST- ADJUSTED CHARM PURE (A) (B) (C) (II EXPENSES NET INVEST- ADJUSTED CHARM PER BOOKS MENT INCOME PURE	1T	STATEMENT		NCOME	OTHER I		FORM 990-PF
TOTAL TO FORM 990-PF, PART I, LINE 11 153,421. 153,421. FORM 990-PF LEGAL FEES STATEMEN (A) (B) (C) (I EXPENSES NET INVEST- ADJUSTED CHARD NET INCOME PURP LEGAL RESEARCH 1,215. 0. 1 TO FM 990-PF, PG 1, LN 16A 1,215. 0. 1 FORM 990-PF ACCOUNTING FEES STATEMEN (A) (B) (C) (I CONTROL OF THE PROPERTY	STED	(C) ADJUS NET INC	NET INVEST-	REVENUE	;		DESCRIPTION
FORM 990-PF LEGAL FEES STATEMEN (A) (B) (C) (E) (DESCRIPTION DESCRIPTION PER BOOKS MENT INVEST- ADJUSTED CHARD NET INCOME PURPORT NET INCOME NET INCOME NET INCOME NET INCOME NET INCOME PURPORT NET I		•	153,421.	153,421.	HIP	rment partnersh	INCOME FROM INVEST
DESCRIPTION (A) EXPENSES NET INVEST- PER BOOKS MENT INCOME NET INCOME PURE 1,215. 1 TO FM 990-PF, PG 1, LN 16A 1,215. (A) EXPENSES NET INVEST- O. (B) (C) CHARD PURE 1,215. (C) (D) (C) (C) (C) (C) (C) (C)		·	153,421.	153,421.	INE 11	-PF, PART I, LI	TOTAL TO FORM 990-
DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARLED PER BOOKS MENT INCOME PURE LEGAL RESEARCH 1,215. 0. TO FM 990-PF, PG 1, LN 16A 1,215. O. TO FORM 990-PF ACCOUNTING FEES STATEMEN (A) EXPENSES NET INVEST- ADJUSTED CHARLED CHARL	 VT				-		
TO FM 990-PF, PG 1, LN 16A 1,215. O. TO FM 990-PF ACCOUNTING FEES STATEMEN (A) (B) (C) (I) EXPENSES NET INVEST- ADJUSTED CHART PER BOOKS MENT INCOME NET INCOME PURE		STATEMENT		FEES	LEGAL		FORM 990-PF
FORM 990-PF ACCOUNTING FEES (A) (B) (C) (I) EXPENSES NET INVEST- ADJUSTED CHARD PER BOOKS MENT INCOME NET INCOME PURE	O) ITABI	(D CHARI	ADJUSTED	(B) NET INVEST-	(A) XPENSES		
(A) (B) (C) (I EXPENSES NET INVEST- ADJUSTED CHART PER BOOKS MENT INCOME NET INCOME PURE	O) ITABI	(D CHARI E PURPO	ADJUSTED NET INCOME	(B) NET INVEST- MENT INCOME	(A) XPENSES ER BOOKS		DESCRIPTION
DESCRIPTION PER BOOKS MENT INCOME NET INCOME PURE	O) ITABI POSES	(D CHARI' E PURPO	ADJUSTED NET INCOME	(B) NET INVEST- MENT INCOME	(A) XPENSES ER BOOKS	PE 	DESCRIPTION LEGAL RESEARCH
	D) ITABI POSES 1,215	(D CHARI' E PURPO	ADJUSTED NET INCOME	(B) NET INVEST- MENT INCOME 0	(A) XPENSES ER BOOKS 1,215.	PE 1, LN 16A	DESCRIPTION LEGAL RESEARCH TO FM 990-PF, PG 1
	D) ITABI POSES 1,215 1,215 NT D) ITABI	CHARITE PURPO	ADJUSTED NET INCOME (C) ADJUSTED	(B) NET INVEST- MENT INCOME 0 0 NG FEES (B) NET INVEST-	(A) XPENSES ER BOOKS 1,215. 1,215. ACCOUNTI	PE	DESCRIPTION LEGAL RESEARCH TO FM 990-PF, PG 1 FORM 990-PF
TO FORM 990-PF, PG 1, LN 16B 82,152. 0. 82	D) ITABI POSES 1,215 1,215 NT D) ITABI	CHARI' STATEMEN' CHARI' PURPO CHARI' PURPO 1	ADJUSTED NET INCOME (C) ADJUSTED NET INCOME	(B) NET INVEST- MENT INCOME 0 0 NG FEES (B) NET INVEST- MENT INCOME 0	(A) XPENSES ER BOOKS 1,215. 1,215. ACCOUNTI (A) XPENSES ER BOOKS 1,361.	PE	DESCRIPTION LEGAL RESEARCH TO FM 990-PF, PG 1 FORM 990-PF DESCRIPTION ACCOUNTING FEES

FORM 990-PF	TAXES			STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
EXCISE TAXES	55,200.		0.			0.
TO FORM 990-PF, PG 1, LN 18	55,200.		0.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
OFFICE EXPENSE	1,799.		0.		1,79	99.
TO FORM 990-PF, PG 1, LN 23	1,799.		0.		1,79	99.
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FU	ND BA	ALANCES	STATEMENT	7
DESCRIPTION					AMOUNT	
UNREALIZED GAIN ON INVESTMENT	rs in partne	RSHIPS			11,3	26.
TOTAL TO FORM 990-PF, PART II	II, LINE 3				11,3	26.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	8
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE	r
INVESTMENT IN PARTNERSHIP		FMV	20	0,347,000.	20,347,00	00.
TOTAL TO FORM 990-PF, PART II	LINE 13	•	20	0,347,000.	20,347,00	00.

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

CHRISTIE'S

20 ROCKEFELLER PLAZA NEW YORK, NY 10020

Form 8868-(Rev. 1-2012)					• Pa	age 2
If you are filing for an Additional (Not Automatic) 3-Month I	Extension,	complete only Part II and check this	box		► X	
Note. Only complete Part II if you have already been granted ar				8868		
• If you are filing for an Automatic 3-Month Extension, comp						
Part II Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the origin	al (no c	opies nee	eded)	
		Enter filer's	identifyi	ng number,	see instructi	ons
Type or Name of exempt organization or other filer, see inst	ructions		Employe	r identification	on number (El	IN) or
print						
File by the SAY YES TO EDUCATION FOUNDATION X 20-89						
due date for filing your return See C/O GEORGE WEISS ASSOC., ONE STATE ST., NO. FL 20					er (SSN)	
City, town or post office, state, and ZIP code For a						
HARTFORD, CT 06103-3113						
<u> </u>		· · · · · · · · · · · · · · · · · · ·				
Enter the Return code for the return that this application is for (file a separa	te application for each return)			0	4
,,		,				
Application	Return	Application			Ret	turn
Is For	Code	Is For			1	de
Form 990	01					
Form 990-BL	02	Form 1041-A			0	8
Form 990-EZ	01	Form 4720			0	9
Form 990-PF	04	Form 5227			1	0
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			1	1
Form 990-T (trust other than above)	06	Form 8870			1.	2
STOP! Do not complete Part II if you were not already grante	ed an autor	natic 3-month extension on a previ	ously file	ed Form 886	i8.	
ROBERT GENDRE				-		
• The books are in the care of ▶ ONE STATE STRE	EET -					
Telephone No. ► <u>(860)</u> 240-8900		FAX No. \triangleright (860) 240-8	3923			
If the organization does not have an office or place of business.	ess in the Ur	nited States, check this box			D	
• If this is for a Group Return, enter the organization's four dig	rt Group Exe	emption Number (GEN) If	this is fo	r the whole (group, check	this
box ▶		ich a list with the names and EINs of	all memb	ers the exte	nsion is for.	
4 I request an additional 3-month extension of time until	NOVEM	BER 15, 2012.				
5 For calendar year 2011 , or other tax year beginning		, and ending]			
6 If the tax year entered in line 5 is for less than 12 months,	, check reas	on linitial return	Final r	eturn		
Change in accounting period						
7 State in detail why you need the extension						
ADDITIONAL TIME IS NEEDED TO		LE INFORMATION NEC	ESSAR	Y TO P	REPARE	<u>A</u>
COMPLETE AND ACCURATE TAX RET	rukn.					
		 				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720), or 6069, e	nter the tentative tax, less any			53 30	
nonrefundable credits. See instructions 8a \$ 57						18.
b If this application is for Form 990-PF, 990-T, 4720, or 6069	-					
tax payments made Include any prior year overpayment	allowed as a	a credit and any amount paid	-		E 7 7 0	١٥
previously with Form 8868.			8b	\$	57,78	18.
c Balance due. Subtract line 8b from line 8a. Include your p		n this form, if required, by using		_		^
EFTPS (Electronic Federal Tax Payment System). See ins		t he completed for Part II o	8c	\$		0.
Under penalties of perjury, I declare that I have examined this form, incluit is true, correct, and complete, and that I am authorized to prepare this	uding accomp	st be completed for Part II o panying schedules and statements, and to	-	f my knowled	ge and belief,	
	TRUST	EE	Date	•		
1100			שמנט			

Form 8868 (Rev 1-2012)

Form 8868 (Rev. 1-2012)					Pag
• If you are filing for an Additional (Not Automatic) 3-Month Ex	xtension,	complete only Part II and check thi	s box		▶ 🗓
Note. Only complete Part II if you have already been granted an	automatic	3-month extension on a previously t	iled Form	8868.	
• If you are filing for an Automatic 3-Month Extension, comple					
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no c	opies	needed).
		Enter filer's	identifyi	ng numl	oer, see instruction
Type or Name of exempt organization or other filer, see instru	uctions		Employe	r identifi	cation number (EIN
File by the SAY YES TO EDUCATION FOUNDA	TION		X	20-	8916545
due date for filling your return See C/O GEORGE WEISS ASSOC., ON			Social se	curity n	umber (SSN)
instructions. City, town or post office, state, and ZIP code. For a fellow HARTFORD, CT 06103	oreign ado	fress, see instructions.			
Enter the Return code for the return that this application is for (fike	e a separa	te application for each return)		···· ·	0
Application	Return	Application			Retu
ls For	Code	Is For		8x	Cod
Form 990	01		\$1. ₀ .00		
Form 990-BL	02	Form 1041-A			80
Form 990-EZ	01	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted		natic 3-month extension on a prev	iously file	ed Form	8868.
ROBERT GENDREAU					
 The books are in the care of ► ONE STATE STREE 	ET - I				
Telephone No. ► 860-240-8900		FAX No. ► 860-240-12			
 If the organization does not have an office or place of business 	s in the Un	ited States, check this box			▶ □
 If this is for a Group Return, enter the organization's four digit (Group Exe	mption Number (GEN)	f this is fo	r the wh	ole group, check th
box ▶ . If it is for part of the group, check this box ▶	and atta	ch a list with the names and EINs o	all memb	ers the	extension is for.
	NOVEME	BER 15, 2012.			
5 For calendar year 2011 , or other tax year beginning		, and endin	g		
6 If the tax year entered in line 5 is for less than 12 months, cl	heck reaso	on: Initial return	Final i	eturn	
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS NEEDED TO C	COMPII	E INFORMATION NEC	ESSAR	Y TO	PREPARE A
COMPLETE AND ACCURATE TAX RETU	JRN.				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, er	iter the tentative tax, less any			
nonrefundable credits. See instructions.			8a	\$	57,788
b If this application is for Form 990-PF, 990-T, 4720, or 6069, 6	enter any ı	refundable credits and estimated			
tax payments made. Include any prior year overpayment alid	owed as a	credit and any amount paid			
previously with Form 8868.			8b	\$	57,788
c Balance due. Subtract line 8b from line 8a. Include your pay	yment with	this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See Instru	ctions.		8c	\$	(
Signature and Verificati	on mus	t be completed for Part II c	nly.		
nder penalties of perjury, I declare that I have examined this form, includir is true, correct, and <u>compl</u> ete, and that I am authorized to prepare this for	ng accompa rm.·	anying schedules and statements, and to			
ignature ▶ Title ▶ T	RUSTE	E	Date	▶ 8	5-7-3012
				Fo	rm 8868 (Rev. 1-20

Form 8868

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

If you are	filing for an Automatic 3-Month Extension, c filing for an Additional (Not Automatic) 3-Mo lete Part II unless you have already been gran	nth Exten	sion, complete only Pa	art II (on page 2 of this form)	
a corporation 8868 to req Return for Instructions)	ling (e-file). You can electronically file Form in 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	ial (not au forms liste l Benefit lis form, vis	tomatic) 3-month exter ed in Part I or Part II w Contracts, which mus sit www.irs.gov/efile an	nsion of time You can electronicall with the exception of Form 8870, I t be sent to the IRS in paper for d click on e-file for Charities & Nong	y file Form nformation ormat (see
	tomatic 3-Month Extension of Time. On				
•	required to file Form 990-T and requesting			•	
Part I only .					▶∐
	oorations (including 1120-C filers), partnership	s, REMICs	, and trusts must use F	orm 7004 to request an extension o	f tıme
to file income				Enter filer's identifying number, see	
Type or	Name of exempt organization or other filer, see in	structions		Employer identification number (EIN) or
print					
File by the	SAY YES TO EDUCATION FOUNDATI		······	20-8916545	
due date for	Number, street, and room or suite no. If a P.O. box	•		Social security number (SSN)	
filing your	C/O G. WEISS ASSOC., INC., ONE				
return See instructions	City, town or post office, state, and ZIP code. For a	a foreign add	dress, see instructions		
	HARTFORD,CT 06103				
Enter the Re	turn code for the return that this application is	for (file a	separate application fo	r each return)	. 0 4
Application		Return	Application		Return
Is For		Code	Is For		Code
Form 990		01	Form 990-T (corporat	uon)	07
Form 990-BL		02	Form 1041-A		08
Form 990-EZ		01	Form 4720		09
Form 990-PF		04	Form 5227		10
	(sec 401(a) or 408(a) trust)	05	Form 6069		11
	(trust other than above)	06	Form 8870	12	
<u></u>	are in the care of ► ROBERT GENDREAU	J			
Telephone	No ▶ 860-240-8971	j	FAX No ▶ 860-240	0-1267	
•	inization does not have an office or place of b				
	r a Group Return, enter the organization's fou				-
	group, check this box ▶ ☐ If				
	names and EINs of all members the extension		int or the group, encout t	and atte	1011
	st an automatic 3-month (6 months for a corp		nured to file Form 990-	T) extension of time	
	JGUST 15 , 20 12 , to file the				tension is
	organization's return for		jameadon rotam tor the	organization named above the ex	terision is
	calendar year 20 <u>11</u> or				
	tax year beginning	20	and ending	20	
	Lax year beginning	, 20	, and chang	, 20	
2 If the ta	ix year entered in line 1 is for less than 12 mg	onths, chec	k reason Initial r	eturn Final return	
c	hange in accounting period				
3a If this	application is for Form 990-BL, 990-PF, 99	0-T, 4720	, or 6069, enter the	tentative tax, less any	
	indable credits. See instructions			· · · · · · · · · · · · · · · · · · ·	,788.00
b If this	application is for Form 990-PF, 990-T,	4720, or	6069, enter any re	efundable credits and	
	ed tax payments made Include any prior yea		•	<u> </u>	,788.00
	e due. Subtract line 3b from line 3a Include		·		
(Electro	onic Federal Tax Payment System) See instru	ctions		3c \$	0.00
	ou are going to make an electronic fund v	vithdrawal	with this Form 8868,	see Form 8453-EO and Form 88	79-EO for
payment inst	ructions				