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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

FOL	carendar y	rear 2011 or tax year beginning			, and ending		
Nai	ne of foun	dation				A Employer identification	on number
_ T	HE M	ILLER FAMILY ENI	OWMEN	T INC.		22-376183	5
Nur	nber and stre	eet (or P O box number if mail is not deli	vered to street	address)	Room/suite	B Telephone number	
_3	WILS	SHIRE TERRACE		<u> </u>		212-297-0	400
		state, and ZIP code				C If exemption application is	pending, check here
L	IVINC	GSTON, NJ 07039)		······································		
G	heck all th	nat apply Initial return		Initial return of a fo	ormer public charity	D 1. Foreign organization	ns, check here
		Final return		Amended return		Farmer assessmentage	and the 959/ test
		X Address cha		Name change		Foreign organizations n 2. check here and attach	computation
H_C	_			empt private foundation		E If private foundation st	atus was terminated
<u> </u>		4947(a)(1) nonexempt charitable		Other taxable private founda	ntion	under section 507(b)(1)(A), check here
		value of all assets at end of year		•	Accrual	F If the foundation is in a	
		II, col (c), line 16)		her (specify)		under section 507(b)(1)(B), check here
	\$		Part I, colu	mn (d) must be on cash l	basis)		
Pa	(The	alysis of Revenue and Expenses e total of amounts in columns (b), (c), and essanly equal the amounts in column (a)	(d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1 Cont	tributions, gifts, grants, etc., receiv	ed			N/A	
		k X if the foundation is not required to					
	3 Intere	est on savings and temporary investments		87.	87.	,	STATEMENT 1
		dends and interest from securities		92,940.	92,940	,	STATEMENT 2
	5a Gros	ss rents					
	b Netro	ental income or (loss)		·			
•	6a Net g	gain or (loss) from sale of assets not on lin	ie 10	198,613.		`	
ă	Gross	s sales price for all 1,675					
Revenue	7 Capital gain net income (from Part IV, line 2)				198,613	,	
Œ	8 Nets	short-term capital gain		·			
		me modifications					
	10a Gross	s sales less returns allowances					
		Cost of goods sold					
	c Gros	ss profit or (loss)					
	11 Othe	er income					
	12_Tota	I Add lines 1 through 11		291,640.	291,640		
	13 Com	pensation of officers directors, trustees,	etc	0.	0	,	0.
	14 8the	r employee salaries and wages					<u> </u>
S	15 P ens	sion plans, employee benefits					
ıses			· 2		4 000		4-00
bei	b Adco		1T 3	8,000.	4,000		4,000.
ũ	t Othe	O Odes Som Tyles UT					
tive	17 Inter					 	
फ्णि।strative Expen	18 Taxe					 	
Ě		reciation and depletion				 	
E G	Occi	upancy					
φ	Zi Irav	rel, conferences, and meetings			 -		
ä	Print	ting and publications	1T 4	23,742.	23,185	 	557.
ii.	Othe	ting and publications er expenses STI il operating and administrative	11 4	23,142.	23,103		337.
Operating and Ad		operating and administrative		21 7/2	27,185		1 557
Ö	expe	enses Add lines 13 through 23		31,742. 124,911.	21,103	'	4,557. 124,911.
		tributions, gifts, grants paid If expenses and disbursements		127,311.		1	164,311.
		lines 24 and 25		156,653.	27,185		129,468.
_		ract line 26 from line 12		130,033.	2,7103	·	125/400.
		S of revenue over expenses and disburs	amonte	134,987.			
	1	investment income (if negative, ente		101,007.	264,455		
		investment income (if negative, enter -0			201,100	N/A	

31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

Foundations that do not follow SFAS 117, check here

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

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

_			
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	2,660,945.
2	Enter amount from Part I, line 27a	2	134,987.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	2,795,932.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,795,932.

 \triangleright \boxed{X}

Form 990-PF (2011)

26 Permanently restricted

and complete lines 27 through 31

30 Total net assets or fund balances

27 Capital stock, trust principal, or current funds

0

0.

2,660,945.

2,660,945.

2,660,945.

0.

2,795,932. 2,795,932.

2,795,932

Foi	rm 990-PF (2011) THE	MIL	LER FAMILY E	NDOWME:	NT INC.				22	2-376	1835	Page 3
P	art IV Capital Gains	and Lo	sses for Tax on In	vestment	Income							
			nd(s) of property sold (e g or common stock, 200 shs			`P	low acquire - Purchase - Donation	1 10) Date a (mo , da	cquired By, yr)	(d) Date (mo , da	
1a	LITIGATION PRO	CEEDS	S		-		P	V	ARIO	วบร	12/3	1/11
b	PUBLICLY TRADE	D SE	CURITIES				P	V	ARI	ous	12/3	1/11
C		-								-		
d						<u> </u>						
8												
	(e) Gross sales price	(f) t	Depreciation allowed (or allowable)	, , , ,	st or other basis expense of sale					in or (loss (f) minus (
a												439.
b	1,675,420.				1,477,24	6.					198	,174.
						_						
<u>d</u>			·-	-								
<u>e</u>		<u> </u>			- 10/04/00							
	Complete only for assets showing	· · · · · · · · · · · · · · · · · · ·				_				ol (h) gain ot less thai		
	(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any					(from col (
a					· · · · · · · · · · · · · · · · · · ·						100	439.
b	-					_					198	,174.
<u>C</u>						-						
<u>d</u>					 							
e						$\overline{}$						
2	Capital gain net income or (net ca	ipital loss)	If gain, also enter $\left\{ \begin{array}{l} \text{If (loss), enter -0-} \end{array} \right.$	n Part I, line In Part I, line	7 7		2				198	,613.
3	Net short-term capital gain or (los	ss) as defi	ned in sections 1222(5) an	d (6)								
	If gain, also enter in Part I, line 8,	column (d	c)							NT / 70		
	If (loss), enter -0- in Part I, line 8 Part V Qualification U	Indox 6	ection 4940(e) for	Daduaad	Toy on Not	ار	3	t Inco		N/A		
_								t inco				
(FO	or optional use by domestic private	e toundatie	ons subject to the section 4	1940(a) tax on	net investment in	icome)					
lf s	ection 4940(d)(2) applies, leave th	his part bl	ank									
18/-	is the foundation liable for the sec	tion 4042	tay on the distributable am	ount of any w	ar in the bace nor	riod?						X No
	Yes," the foundation does not qual			, ,	•	iiou ,					163	<u> </u>
	Enter the appropriate amount in					es						
	(a)		(b)		g ,	(c)	<u>.</u>				(d)	
	Base periód years Calendar year (or tax year beginnii	na in)	Adjusted qualifying dist	tributions	Net value of no		itable-use a	ssets	Ι (Distrit col (b) div	ution ratio ided by col	(c))
_	2010	<u> </u>	19	8,340.	,	2	,935,	743.	<u> </u>	`		57560
	2009		20	2,372.			,661,				.0	76043
	2008		25	5,804.		3	,219,	925.			.0	79444
	2007			4,615.		3	,811,	162.			.0	32551
	2006		18	4,594.		3	,296,	140.			.0.	56003
	Total of line 1, column (d)								2		. 30	51601
3	Average distribution ratio for the	5-year bas	se period - divide the total o	on line 2 by 5,	or by the number	of ye	ars					
	the foundation has been in existe	nce if less	than 5 years						3		.0	72320
4	Enter the net value of noncharitat	ole-use as	sets for 2011 from Part X, I	line 5					4		3,079	,809.
												-
5	Multiply line 4 by line 3								5		222	<u>,732.</u>
											2	CAE
6	Enter 1% of net investment incon	ne (1% of	Part I, line 27b)	-					6			<u>,645.</u>
7	Add lines 5 and 6								,		225	,377.
•	AND HIES O BIN D								7		223	, 0110
8	Enter qualifying distributions from	n Part XII,	line 4						8		129	,468.
	If line 8 is equal to or greater than See the Part VI instructions	n line 7, ch	neck the box in Part VI, line	1b, and comp	olete that part usin	ng a 1°	% tax rate					

			37618			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see ins	itru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					
•	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 here and enter 1%	1		<u>.</u>	5,2	89.
	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				0.
3	Add lines 1 and 2	3			5,2	89.
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-	5			5,2	89.
6	Credits/Payments					
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 4, 285.					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d 6d					
7	Total credits and payments Add lines 6a through 6d	7		4	4,2	85.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 7	9			1,0	04.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	-			
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ Refunded ▶	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1 b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation \blacktriangleright \$ 0 • (2) On foundation managers \blacktriangleright \$ 0 •					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ► \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		ŀ	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A .	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	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					
	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?		ļ	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	Х	
	If "Yes," complete Part II, col. (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		ŀ			
	DE					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation SEE STATEM	ENT	8	Bb	•	Х
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for caler			\neg		
	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 and addresses			10		Х

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	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	3,026,394. 100,316.
b	Average of monthly cash balances	1b	100,316.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	3,126,710.
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	3,126,710.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	46,901. 3,079,809.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,079,809.
6_	Minimum investment return. Enter 5% of line 5	6	153,990.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part)	ıd certain	
1	Minimum investment return from Part X, line 6	1	153,990.
2a	Tax on investment income for 2011 from Part VI, line 5 289.		
b	Income tax for 2011 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	5,289.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	5,289. 148,701.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	148,701.
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	148,701.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	_1a	129,468.
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		
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	129,468.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	129,468.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies f	or the section
	40.40(-) -4 -4		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	001943	10013 phot to 2010	2010	2011
line 7				148,701.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years				
,		0.		
3 Excess distributions carryover, if any, to 2011				
a From 2006 25, 191.				
b From 2007 133,651.				
c From 2008 96,257.				
d From 2009 70,629.				
e From 2010 54, 160.				
f Total of lines 3a through e	379,888.			
4 Qualifying distributions for 2011 from				
Part XII, line 4 ►\$ 129,468.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				129,468.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	19,233.			19,233.
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	360,655.			
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				
lines 4d and 5 from line 1. This amount must	i			
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	5,958.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	354,697.			
0 Analysis of line 9				
a Excess from 2007 133,651.				
b Excess from 2008 96,257.				
c Excess from 2009 70,629.				
d Excess from 2010 54,160.				
e Excess from 2011				
				Form QQ0-PF (2011)

N/A

▶ 3b

Total

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated	business income		oy section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code		code	741100111	- Idilotton income
a	-				
·	-				
d d	_				· · · · · · · · · · · · · · · · · · ·
^					
1					
g Fees and contracts from government agencies	-				
2 Membership dues and assessments					
3 Interest on savings and temporary cash		.			
investments			14	87.	
4 Dividends and interest from securities			14	92,940.	
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	198,613.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue				1	
a					
b					
c	_				
d	_				
e	_				
12 Subtotal Add columns (b), (d), and (e)			0.	291,640.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	291,640.
(See worksheet in line 13 instructions to verify calculations)				

V	the foundation's exempt purposes (other than by providing funds for such purposes)	
-		
\rightarrow		
1	The second secon	

12-02-11

Page	13

Part XVII	· Information Re Exempt Organ		sfers To a	and Transactions a	nd Relations	nips With Nonchar	itable)	90 10
the Code (ganization directly or indir (other than section 501(c)	rectly engage in any (3) organizations) (or in section 52	g with any other organization 7, relating to political organ		on 501(c) of		Yes	No
a Transfers (1) Cash (2) Other	from the reporting foundar assets	ation to a noncharita	able exempt orç	ganization of			1a(1) 1a(2)		X
b Other tran		hle evernet organiza	ation				1b(1)		х
•	nases of assets from a noi						1b(2)		X
	il of facilities, equipment,		- · g - · · · · · · · ·				1b(3)		X
	bursement arrangements						1b(4)		Х
(5) Loans	s or loan guarantees						1b(5)		X
	rmance of services or me						1b(6)		X
_	f facilities, equipment, ma			ployees dule Column (b) should alv	vave chow the fair m	parket value of the goods o	1c	otc.	
or service	•	oundation If the fou	indation receive	ed less than fair market valu				eis,	
	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and s	hanng an	rangeme	ents
			N/A						
								-	
				·	 				
									
									
									
ın section	ndation directly or indirect 501(c) of the Code (other complete the following sch	r than section 501(c		or more tax-exempt organi ion 527?	zations described		Yes	X	. No
	(a) Name of org	anization		(b) Type of organization	(c) Description of relationsh	пр		
	N/A_								
									
Sign Here	elief, it is true, carecy and cor	nplete Declaration of p		g accompanying schedules and n taxpayer) is based on all inform	nation of which preparer	has any knowledge retu	the IRS on with the win below	e prepai (see ins	rer
Sigr	nature of office or trustee		Dropper de -	Date	Title	Check If PTIN			
	Print/Type preparer's na	me	Preparer's s	*	Date	self- employed			
Paid	DAVID KAHN	ſ	Dail	Kelm CPA	Sulv		0029	749	ļ
Preparer	Firm's name ► J . H					Firm's EIN ► 41-19			
Use Only									
•	Firm's address ► 12								
	NE	W YORK, I	NY 1003	6		Phone no 212-2			
						Fo	rm 990	-PF	(2011)

			OF OFFICERS, D		STATI	EMENT 11
NAME AND ADDRESS			TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
PAUL S. MILLER			CHAIRMAN			
C/O THE MILLER FAMILY WILSHIRE TERRACE LIVINGSTON, NJ 07039	ENDOWMENT	3	1.00	0.	0.	0.
CAROL P. MILLER			PRESIDENT			
C/O THE MILLER FAMILY WILSHIRE TERRACE LIVINGSTON, NJ 07039	ENDOWMENT	3	1.00	0.	0.	0.
JASON MILLER			VP/SEC			
C/O THE MILLER FAMILY WILSHIRE TERRACE LIVINGSTON, NJ 07039	ENDOWMENT	3	1.00	0.	0.	0.
MARGO H. WEILL			PRESIDENT			
C/O THE MILLER FAMILY WILSHIRE TERRACE LIVINGSTON, NJ 07039	ENDOWMENT	3	2.00	0.	0.	0.

AILLER FAMILY ENDOWMENT 2/31/2011			
HARITY LISTING			
CHARITY	AMOUNT		
ANCER RESEARCH	750		
FSPBC	250		_
BBYO	100		
ARALYZED VETERANS OF AMERICA	50		
JS HOLOCAUST MEMORIAL MUSEUM	500		
REE THE SLAVES	500		
EARNING IS FUNDAMENTAL	500		
THE NATURE CONSERVANCY	1,500		
DXFAM AMERICA	2,000		
CONSERVATION INTERNATIONAL HABITAT FOR HUMANITY	2,500		
AMERICAN RED CROSS	3,500		
SUSAN G KOMEN FOR THE CURE	2,000		
HEIFER INTERNATIONAL	500		
HARLEM JR TENNIS AND EDUCATION PROGRAM	500		
SHARSHERET	180		
NCJW ESSEX CITY SECTION	125		
EDERATION METROWEST	2,500		
WINSTAR SCHOOL	1,000		
EWISH FAMILY SERVICE OF METROWEST	5,000		
WHITNEY MUSEUM	15,000		
HEADCOUNT	1,000		
RACHAEL COALITION	1,800		
JNTIED WAY	500		
JJA OF METROWEST	500		
NETWORK FOR GOOD	200 150		
J OF MD SRAEL CHILDREN'S CENTER	180		
NCJW ESSEX CITY SECTION	18,000		
IAFCO	5,000		
AMERICAN CANCER SOCIETY	50		
CONGREGATION B'NAI JERUSALEM	572		
ARAVA INSTITUTE	10,000		
JAFCO	1,800		
AVON WALK FOR BREAST CANCER	50		
HILLEL	20,000		
AVON WALK FOR BREAST CANCER	100		
JFNA	54		
NCJW ESSEX CITY SECTION	50		
ACT DONATION	250		
AIEF VOICES AGAINST BRAIN CANCER	5,000		
HSCS FOUNDATION CHILD LIFE FUND	100		
TUFTS UNIVERSITY	500		
US HOLOCAUST MEMORIAL MUSEUM	500		
NATURE CONSERVANCY	1,500		
FREE THE SLAVES	500		
READING IS FUNDAMENTAL	500		
OXFAM AMERICA	500		
CONSERVATION INTERNATIONAL	2,000		
HABITAT FOR HUMANITY	2,500		
AMERICAN RED CROSS	3,500		
NY TIMES NEEDIEST CASES	4,000		
SUSAN G KOMEN FOR THE CURE	2,000		
CAMFED USA FOUNDATION	500	<u> </u>	-
SB HCS FOUNDATION	1 000		_
MORRY'S CAMP	1,000		
	124,911		
	224,511	İ	-
			
SUPPLEMENTARY INFORMATION 990-PF. PART XV	LINE 3(A)	1	
SUPPLEMENTARY INFORMATION 990-PF, PART XV, PURPOSE OF CONTRIBUTIONS PAID DURING THE YE			

FORM 990-PF INTEREST ON SAVI	INGS A	ND TEM	PORARY C	ASH TI	NVESTMENTS	STATEMENT	1
- INTEREST ON DAVI						——————	
SOURCE						AMOUNT	
BOA 4097							87.
TOTAL TO FORM 990-PF, PART I,	, LINE	3, CO	LUMN A				87.
FORM 990-PF DIVIDENI	OS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
LAZARD 86005 LAZARD 98403	-		6,121. 86,819.		0.	6,1 86,8	
TOTAL TO FM 990-PF, PART I, I	LN 4		92,940.		0.	92,9	40.
FORM 990-PF	ACC	COUNTI	NG FEES		· · · · · ·	STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	{	3,000.	4	,000.		4,0	00.
TO FORM 990-PF, PG 1, LN 16B	{	8,000.	4	,000.		4,0	00.
FORM 990-PF	O'.	THER E	XPENSES			STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
INVESTMENT ADVISORY FEES FILING FEES BANK/CHECKING CHARGES	2:	3,185. 443. 114.		,185. 0. 0.			0. 43. 14.
TO FORM 990-PF, PG 1, LN 23	2	3,742.	23	,185.		5	57.

FORM 990-PF U.S. AND STATE/C	ITY GOV	/ERNMENT	OBLIGATIONS	STATEMENT	5
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET	Г
U.S OBLIGATIONS - HELD IN BROKERAGE	X		97,437.	107,15	57.
TOTAL U.S. GOVERNMENT OBLIGATIONS	97,437.	107,15	57.		
TOTAL STATE AND MUNICIPAL GOVERNMENT	T OBLIG	SATIONS			
TOTAL TO FORM 990-PF, PART II, LINE	10A	=	97,437.	107,15	57.
FORM 990-PF COR	PORATE	STOCK		STATEMENT	6
DESCRIPTION			BOOK VALUE	FAIR MARKET	r
PUBLICLY TRADED SECURITIES	-	2,563,308.	2,732,328		
TOTAL TO FORM 990-PF, PART II, LINE 10B			2,563,308.	2,732,328	
FORM 990-PF INTEREST A	AND PEN	VALTIES	-	STATEMENT	7
TAX DUE FROM FORM 990-PF, PART VI LATE PAYMENT INTEREST LATE PAYMENT PENALTY				1,00	04. 3. 5.
TOTAL AMOUNT DUE				1,0	12.
FORM 990-PF EXPLANATION CONCERNIA	NG PART	' VII-A.	LINE 8B	STATEMENT	 8

EXPLANATION

DELAWARE DOES NOT REQUIRE FILING

THE MILLER FAMILY ENDOWMENT INC.			22-3	761835
NICOLE F. GOULD C/Q THE MILLER FAMILY ENDOWMENT 3 WILSHIRE TERRACE	VP/TREAS	0.	0.	0.
LIVINGSTON, NJ 07039 TOTALS INCLUDED ON 990-PF, PAGE 6,		0.		0.

Form **8868** (Rev January 2012)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev 1-2012)

If you are	e filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box			ightharpoonup	
	e filing for an Additional (Not Automatic) 3-Month Ex						
	mplete Part II unless you have already been granted						
	filing (e-file). You can electronically file Form 8868 if						
	file Form 990-T), or an additional (not automatic) 3-mo						
f time to f	ile any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers A	Associated V	Vith Certain	
Personal B	enefit Contracts, which must be sent to the IRS in par	er format	(see instructions) For more details (on the elec	tronic filing o	of this form,	
	rs gov/efile and click on e-file for Chanties & Nonprofits						
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).			
corporat	ion required to file Form 990-T and requesting an auto	matic 6-mc	onth extension - check this box and	complete			
art I only			•			▶ □	
	orporations (including 1120-C filers), partnerships, REM me tax returns	IICs, and ti	rusts must use Form 7004 to reques	st an exten	sion of time		
ype or orint					mployer identification number (EIN) o		
ile by the	THE MILLER FAMILY ENDOWMENT INC.				X 22-3761835		
ue date for ling your	Number, street, and room or suite no If a P O box, s			Social se	security number (SSN)		
eturn See	C/O PAUL MILLER 16339 MARI						
nstructions	City, town or post office, state, and ZIP code For a fi	oreign add	ress, see instructions				
	DELRAY BEACH, FL 33446						
inter the F	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
		T	I				
Applicatio	on .	Return	Application			Return	
s For		Code	Is For		-	Code	
orm 990	n.	01	Form 990-T (corporation)			07	
orm 990-l		02	Form 1041-A			08	
orm 990-l		01	Form 4720			09	
orm 990-I		04	Form 5227			10	
	T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
orm 990-	T (trust other than above)	06_	Form 8870			12	
	PAUL MILLER	P.73.32		22446	0270		
· ·	oks are in the care of 16339 MARISOL	WAY -	DELKAY BEACH, FL	11440	-23/0		
			*	<u> </u>			
Telepho	one No. ► 561-496-4406		FAX No ▶				
Telepho	one No. ► $561-496-4406$ rganization does not have an office or place of busines	s in the Un	FAX No ▶			▶ □	
Telepho	one No. ► $561-496-4406$ rganization does not have an office or place of busines of or a Group Return, enter the organization's four digit	s in the Ur Group Exe	FAX No ▶	If this is fo	r the whole g	proup, check this	
Telepho	one No. 561-496-4406 ganization does not have an office or place of busines for a Group Return, enter the organization's four digit If it is for part of the group, check this box	s in the Un Group Exe	FAX No ▶ inted States, check this box emption Number (GEN) ich a list with the names and EINs o	if this is fo	r the whole g	•	
Telepho	one No. 561-496-4406 ganization does not have an office or place of busines if for a Group Return, enter the organization's four digit If it is for part of the group, check this box uest an automatic 3-month (6 months for a corporation)	s in the Un Group Exe and atta	FAX No Intel States, check this box emption Number (GEN) ich a list with the names and EINs of the Form 990-T) extension of time	if this is for	r the whole g	nsion is for	
Telepho	ganization does not have an office or place of busines for a Group Return, enter the organization's four digit If it is for part of the group, check this box uest an automatic 3-month (6 months for a corporation AUGUST 15, 2012, to file the exemption of the group is to file the exemption of the state of the exemption of the state of the exemption of the state of the exemption of the exemption of the state of the st	s in the Un Group Exe and atta	FAX No Intel States, check this box emption Number (GEN) ich a list with the names and EINs of the Form 990-T) extension of time	if this is for	r the whole g	nsion is for	
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Telepho If the or If this is ox I req is for 2 If the 3a If thi nonr	ganization does not have an office or place of business for a Group Return, enter the organization's four digit of it is for part of the group, check this box uest an automatic 3-month (6 months for a corporation of AUGUST 15, 2012 , to file the exemply the organization's return for organization's return for organization's return for organization organization organization. The organization of the following of the following of the star year beginning organization organi	s in the Uri Group Exe and atta required to or ganization, and check reason or 6069, e	FAX No Interest FAX No Interes	If this is fo f all memb until ed above	r the whole g ers the exter The extension	nsion is for	
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Telepho If the or If this is oox I req is for 2 If the 3a If thi nonr b If thi estir	ganization does not have an office or place of business for a Group Return, enter the organization's four digit of it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation of the organization's return for the organization's return for tax year beginning characteristics. Change in accounting period application is for Form 990-BL, 990-PF, 990-T, 4720, or efundable credits. See instructions.	s in the Ur Group Exe and atta required to or organization , an check reaso or 6069, e	FAX No inted States, check this box emption Number (GEN) ich a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named ending on Initial return inter the tentative tax, less any refundable credits and flowed as a credit	If this is for f all memb cuntil ed above Final retur	r the whole g ers the exter The extension	nsion is for	
Telepho If the or If this is oox I req is for 2 If the 3a If thi nonr b If thi estir	ganization does not have an office or place of business for a Group Return, enter the organization's four digit of it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation of the organization's return for the organization's return for tax year beginning characteristic of the second of the country of the coun	s in the Ur Group Exe and atta required to or organization , an check reaso or 6069, e	FAX No inted States, check this box emption Number (GEN) ich a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named ending on Initial return inter the tentative tax, less any refundable credits and flowed as a credit	If this is for fall member until ed above	r the whole g ers the exter The extension	nsion is for	

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

ightharpoons If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form. visit www irs gov/efile and click on e-file for Charities & Nonprofits 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 Lonly All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print THE MILLER FAMILY ENDOWMENT INC. 22-3761835 File by the Number, street, and room or suite no. If a P O. box, see instructions. Social security number (SSN) filing your 3 WILSHIRE TERRACE return See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. LIVINGSTON, NJ 07039 0 | 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 80 Form 990-EZ 01 Form 4720 09 Form 990-PF Form 5227 04 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 MARGO WEILL • The books are in the care of ▶ 3 WILSHIRE TERRACE - LIVINGSTON, NJ 07039 Telephone No ► 212-297-0400 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box 🕨 . If it is for part of the group, check this box 🕨 ... and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2012 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X calendar year 2011 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason. Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 4,285. estimated tax payments made include any prior year overpayment allowed as a credit. 3ь 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 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)

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