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0425857589 Dec. 04, 2012 LTR 2697C 0 R 22-6682754 201112 44 00015174

THE TUCHMAN FOUNDATION PO BOX 582 KINGSTON NJ 08528



**DECLARATION** 

37424

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my-knewledge—and belief, it is true,—correct and complete. I understand that this declaration will become a permanent part of that return.

Marchen Juelma 1/13/13
Signature of Officer or Trustee Date

Trustice

Title

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

2011

Name of the organization		Employer identification number
	HE TUCHMAN FOUNDATION	22-6682754
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ 501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	S01(c)(3) exempt private foundation	CFIVED
	4947(a)(1) nonexempt charitable trust treated as a private foundation	08
	501(c)(3) taxable private foundation	AN 8 1 2013   22   3DEN III
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	lle. See instructions
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in miplete Parts I and II.	oney or property) from any one
Special Rules		
509(a)(1) and 170	I (c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg D(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the (ii) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II	
total contribution	I(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or edifferently to children or animals. Complete Parts I, II, and III.	
contributions for If this box is chec purpose. Do not	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not to cked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because it ble, etc., contributions of \$5,000 or more during the year	tal to more than \$1,000.  If religious, chantable, etc.,  received nonexclusively
but it must answer 'No' o	that is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	
LHA For Paperwork Red	luction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B	(Form 990, 990-EZ, or 990-PF) (2011)

Schedule B	Form yuri	uuri/	or OUTLUL	22011)
Scriedule D	romi aao,	33U.CZ.	OF 990-PF	(2011)

Page 2

of organization	

Employer identification number

THE_	<u>TUCHMAN</u>	FOUND	NOITA	Ĺ

THE T	UCHMAN FOUNDATION		22-6682754
Part f	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
1	MARTIN TUCHMAN  4422 A ROUTE 27, PO BOX 582  KINGSTON, NJ 08528	\$ <u>1,500,28</u>	Person X Payroll  Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
2	WARREN SERENBETZ  695 WEST STREET  HARRISON, NY 10528	\$\$	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 contribution	(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 contribution	(d) s 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.)

Employer identification number

art II	Noncash Property (see instructions). Use duplicate copies of R	Part II 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. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—   ·		s	
a) lo. om ert l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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a) lo. om art i	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
a)		(c)	
o. om rt I	(b)  Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
-			
$-\mid$ .			
L-	2	\$	90, 990-EZ, or 990-PF) (

Schedule B	(Form 990, 990-EZ, or 990-PF) (2011)	_	Page		
Name of orga	nization		Employer identification number		
THE TU Part III	CHMAN FOUNDATION  Exclusively religious, charitable, etc., indiv year Complete columns (a) through (e) and th the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	e following line entry. For organization ., contributions of \$1,000 or less for t	22-6682754  7), (8), or (10) organizations that total more than \$1,000 for the s completing Part III, enter he year. (Enter this information once)  \$		
(a) No. from Part 1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee				
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(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, an	d ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee				