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## Fórm\_990-PF

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

Form **990-PF** (2011)

<u>tr</u>	nterr	nal Re			indation may	be able to use a copy of this	return to sat	sfy state repo	rtıng requirei	ments	2011
-			ndar year 2011 or tax yea if foundation	r beginning			, and e	naing	A Employe	r identification	number
	_			~== =							
_			AINE AND VING			<del></del>		Daniel Company	<del></del>	2384942	
_			7 LAFAYETTE			r address)		Room/suite	B Telephon	e number - <b>6 4 5 – 8 6</b>	70
			town, state, and ZIP code	. D.	10024				C If exemption	n application is pe	ending, check here
7			T WASHINGTO	Initial retur	19034		ormer public	abacıbı.	D 1 Forms		shook bara
•	3 (	JIICUR	k all that apply.	Final return	1 1		Jiller public	Silatity	D I Follery	n organizations	, check here
				Address ch	В	Taxing.Authorities	3		Foreign 2 check h	organizations med ere and attach cor	eting the 85% test, mputation
Ē	1 0	Check	k type of organization:	X Sectio	n 501(c)(3) e	Xempi private foundation	الب		E if private	foundation stat	us was terminated
_			ection 4947(a)(1) nonexen	•		Other taxable private found					(A), check here 🕨
I			arket value of all assets at	end of year		=	Acci	rual			60-month termination
	-	rom i •\$	Part II, col (c), line 16)	770		ther (specify) imn (d) must be on cash i	hasis )		under sei	ction 507(b)(1)	(B), check here ►∟
Г	<u> </u>	art I	Analysis of Revenue ai	nd Expenses	<del></del>	(a) Revenue and		vestment	(c) Adı	usted net	(d) Disbursements
L			The total of amounts in colunecessarily equal the amount	ımns (b), (c), ar nts ın column (a	id (d) may not a))	expenses per books		ome		come	for charitable purposes (cash basis only)
_		1	Contributions, gifts, gran						N,	/A	
		2	Check X if the foundation	on is not required t	o atlach Sch B						
		3	cash investments	•		40 070	A	0 070			CONTRACTOR 1
		4	Dividends and interest from Gross rents	om securitie:	3	49,078.	4	9,078.			STATEMENT 1
		Ι.	Net rental income or (loss)							`	
	0	۱.	Net gain or (loss) from sale of	assets not on	line 10	32,708.					
	Revenue	ь	Gross sales price for all assets on line 6a	464	,822.					D)C	CEIVED
	}ev€	7	Capital gain net income (from				3	2,708.			VLIVLD O
	_	8	Net short-term capital ga	ın						9 80	N N N N N N N N N N N N N N N N N N N
		9	Income modifications Gross sales less returns and allowances	I						9 10	1 5/2 SQLF 10
			and allowances  Description Less Cost of goods sold	-				<u> </u>			<del>*************************************</del>
			Gross profit or (loss)							UU	<u>OLN, UI</u>
		11	Other income							·	
		-	Total Add lines 1 throug			81,786.	8	1,786.			15 600
		13	Compensation of officers, dire	•	s, etc	19,500.		3,900.			15,600.
&5 ≅3		14	Other employee salaries and Pension plans, employee								
•	ses	l	Legal fees	Delicino							
> 0 3 3	Expense		Accounting fees	SI	MT 2	2,520.		1,512.			1,008
	Ä	C	Other professional fees	ST	MT 3	12,597.	1	2,597.			0.
) )	tive	l	Interest	~~	n.em 4	0.004		210		RECE	VED
3	stra	l	Taxes		MT 4	2,004.		319.	12		0.
Í	Ë	19 20	Depreciation and depletic Occupancy	)N					2-57	O-R-VOW	2012  약
i	Ag	21	Travel, conferences, and	meetinas					141		<u> </u>
	E E		Printing and publications	_						KRIYEN	117
	Operating and Administrative	23	Other expenses	ST	MT 5	1,445.	.=.	0.			1,445
	rati	24				20.066		0 000			10 050
	g	25	expenses. Add lines 13 t			38,066.	1	8,328.	<u> </u>		18,053.
			Contributions, gifts, gran  Total expenses and dish			55,250.			-		55,250
		20	Add lines 24 and 25	41361161119		93,316.	1	8,328.			73,303.
-		27	Subtract line 26 from line	12:							
		а	Excess of revenue over expen	ses and disbu	rsements	-11,530.					
			Net investment income (				6	3,458.		,	
	- 1	L C	Adjusted net income or a	enative ent~	Ω-1	ę l			N/	'Д І	

LHA For Paperwork Reduction Act Notice, see instructions

ſΒ	art	Balance Sheets Alached schedules and amounts in the description	Beginning of year		of year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	12,601.	67,152.	67,152.
	3	Accounts receivable ►			
	l	Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
	Ì	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 ▶			
ß	8	Inventories for sale or use		<del></del>	
ssets	9	Prepaid expenses and deferred charges			
ä		Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 6	1,598,858.	1,493,618.	1,493,618.
		Investments - corporate bonds			
	1	Investments land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans		<del></del>	<del></del>
		Investments - other			
		Land, buildings, and equipment; basis			
	'	Less accumulated depreciation			
	15	Other assets (describe ► )			
		, , , , , , , , , , , , , , , , , , , ,			
	16	Total assets (to be completed by all filers)	1,611,459.	1,560,770.	1,560,770.
_	_	Accounts payable and accrued expenses			
	18	Grants payable	·	· · · · · · · · · · · · · · · · · · ·	1
10	19	Deferred revenue			-
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		<del></del>	-
喜	21	Mortgages and other notes payable	<del></del>	<del>-</del>	1
2		Other liabilities (describe )	<del></del>		-
		)		<del></del>	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	20	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31			
S	24	Unrestricted			
saoui		Temporarily restricted			1
Sala Sala	ı				1
B	20	Permanently restricted  Foundations that do not follow SFAS 117, check here	-	<del></del>	1
Ę		·			
5	27	and complete lines 27 through 31.	1,611,459.	1,560,770.	
Net Assets or Fund Bala	27	Capital stock, trust principal, or current funds	0.	1,300,770.	-
,SS	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
t d	29	Retained earnings, accumulated income, endowment, or other funds	1,611,459.	1,560,770.	
ž	30	Total net assets or fund balances	1,011,439.	1,300,770.	
		Total PakiPita and advantation disclaration	1,611,459.	1 560 770	*
_	31	Total liabilities and net assets/fund balances		1,560,770.	transferre product de l'activité de la principal de l'activité de la company de la com
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
	Total	not accepte or fund halanesse at horizona of year. Port II. solume (a) has	20	<del></del>	1
		net assets or fund balances at beginning of year - Part II, column (a), line it agree with and of year frauer reported on over year's return)	JU		1,611,459.
	•	at agree with end-of-year figure reported on prior year's return)		1	-11,530.
		amount from Part I, line 27a		2	
_		r increases not included in line 2 (itemize)		3	1 500 020
		lines 1, 2, and 3	מבות מנוס סקס	DEBTOD 6	1,599,929.
		eases not included in line 2 (itemize)   UNREALIZED LOS:			39,159.
6_	<u>i otal</u>	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iumn (b), line 30	6	1,560,770.
					Form <b>990-PF</b> (2011)

Part IV Capital Gains a	nd Losses	for Tax on I	nvestmen	t Income					<u> </u>	
(a) List and described 2-story brick ware	be the kind(s) o ehouse, or com	f property sold (e g mon stock, 200 sh	j., real estate, s MLC Co.)		Ρ.	low acc - Purch - Dona	nase   '		acquired lay, yr.)	(d) Date sold (mo , day, yr )
1a										
b SEE ATTACHED	STATEM	ENTS							_	
С										
<u>d</u>										
e					<u> </u>					<u> </u>
(e) Gross sales price	, , ,	ation allowed lowable)	100	st or other basis expense of sale					ain or (loss s (f) minus	
a										
b										
С										
<u>d</u>										
e 464,822.			<u> </u>	432,11	4.					32,708.
Complete only for assets showing	gain in column	(h) and owned by	the foundation	on 12/31/69					Col. (h) gain	
(i) F.M V. as of 12/31/69		sted basis 12/31/69		cess of col (ı) col. (ı), ıf any					not less tha (from col. (	
a										
b										
С										
d										
е										32,708.
2 Capital gain net income or (net capi	ıtal loss)	If gain, also enter If (loss), enter -0	r ın Part I, lıne - ın Part I, lıne	7 7	}	2				32,708.
3 Net short-term capital gain or (loss	) as defined in :	•			[ [	Ĭ				•
If gain, also enter in Part I, line 8, co			(5).		λl					
If (loss), enter -0- in Part I, line 8	. ,				J	3			_ N/A	i
Part V Qualification Un	ider Section	on 4940(e) for	Reduced	l Tax on Net	Inve	estm	ent Inco	me		
(For optional use by domestic private f	oundations sub	ject to the section	4940(a) tax on	net investment in	come.	.)				
						•				
If section 4940(d)(2) applies, leave this	s part blank									
Was the foundation liable for the section	on 4942 tax on	the distributable am	nount of any ye	ear in the base per	od?					Yes X No
if "Yes," the foundation does not qualify	y under section	4940(e) Do not co	mplete this pa	ırt.						
1 Enter the appropriate amount in ea	ch column for	each year; see instr	uctions before	making any entrie	S.					
(a) Base period years		(b)			(c)				Dietrik	(d) oution ratio
Calendar year (or tax year beginning	ın) Adı	usted qualifying dis	tributions	Net value of no		ıtable-u	ise assets		col. (b) div	rided by col. (c))
2010		6	9,795.	-	1,	, 556	5,143.			.044851
2009			8,291.		1,	648	3,247.	1		.047500
2008		8	3,787.	,	1,	626	5,019.			.051529
2007		7	5,255.		1,	858	3,056.			.040502
2006		6	3,709.				2,884.			.036978
							•			
2 Total of line 1, column (d)								2		.221360
3 Average distribution ratio for the 5-	vear base oerio	d - divide the total o	on line 2 by 5.	or by the number	of vea	ırs				
the foundation has been in existence			, .,	o, o,	o. , c.			3		.044272
		, ou. o						H		
4 Enter the net value of noncharitable	-use assets for	2011 from Part X.	line 5					4		1,603,264.
		,						$\vdash$		
5 Multiply line 4 by line 3								5		70,980.
o manpy into a by into o								<b> </b>		70,300.
6 Enter 1% of net investment income	/1% of Part I I	ına 27h)						ا و		635.
Citter 176 Of Her Investment hicolife	VI/O ULFAILL.							6		033.
	,	275)								
7 Add lines 5 and 6	<b>(</b>							,		71 615
7 Add lines 5 and 6	(							7		71,615.
<ul><li>7 Add lines 5 and 6</li><li>8 Enter qualifying distributions from F</li></ul>								7 8		71,615. 73,303.
	Part XII, line 4		1b, and comp	lete that part using	g a 1%	‰ tax ra	te.			

Part VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(b), 4940(c), or 4948 - see instructions)	For			2384			Page 4
Late of ruling or determination letter:  (attach copy of letter if necessary-see isstructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 11% of Part I, Ime 27b  All other domestic foundations enter 4% of Ime 27b. Exempt foreign organizations enter 4% of Part I, Ime 12, ob. (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and bixable foundations only. Others enter-0-)  3 Add thes 1 and 2  3 Sc 535.  3 Subbile A (Income) jax (domestic section 4947(a)(1) trusts and bixable foundations only. Others enter-0-)  5 Tax based on investment income Subtract Ime 4 from line 3.1 izers or less, enter-0-  5 Tax based on investment income Subtract Ime 4 from line 3.1 izers or less, enter-0-  5 Tax based on investment income Subtract Ime 4 from line 3.1 izers or less, enter-0-  5 Tax based on investment income Subtract Ime 4 from line 3.1 izers or less, enter-0-  5 Tax based on investment income Subtract Ime 4 from line 3.1 izers or less, enter-0-  5 Tax based on investment income Subtract Ime 4 from line 3.1 izers or less, enter-0-  6 Tax daw with application for extension of time to the [Form 8868)  6 Exempt foreign organizations: tax withheld at source  6 Exempt foreign organizations: tax withheld at source  7 Total condits and payments. Add times 5s through 66  8 Tax day with application for extension of time to the [Form 8868)  6 Exter any peantify for undersymment of terms 5tax of 8 center the amount overpaid  9 Tax day if the 10st of lones 5 and 8 is more than line 7, enter amount overpaid  1 Exter any peantify for undersymment in total of lines 5 and 8, enter the amount overpaid  1 Exter any peantify for undersymment in the 10 to be Oredited to 2012 estimated ax ≥  9 Statement of line 10 to be Oredited to 2012 estimated ax ≥  9 Statement or line 10 to be Oredited to 2012 estimated ax ≥  9 Statement or line 10 to be Oredited to 2012 estimated ax ≥  9 Statement or line 10 to be Oredited to 2012 estimated ax ≥  1 Statement or lines than 5 to 10 du	P	art VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see i	nstrı	ıctio	ns)
b Domestic Coundations that meat the section 4947(a) requirements in Part V, check here ▶ 【3 and enter 1% of Part I, then 27b.  All other domestic foundations enter 2% of line 27b. Exempl foreign organizations active 4% of Part I, time 17, col. (b)  2 Co. 3 Add lines 1 and 2  3 Add lines 1 and 2  4 Subtitle A (incomity) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lines 1 and 2  4 Subtitle A (incomity) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income Subtract line 4 from line 3. It zero or less, enter -0-  5 Cordedis/Payments:  2 2011 estimated tax payments and 2010 overpayment credited to 2011  5 Exempt foreign organizations - tax withheld at source  6 Cordedis/Payments:  2 2011 estimated tax payments and 2010 overpayment credited to 2011  5 Exempt foreign organizations - tax withheld at source  6 Cordedis/Payments:  1 Form 2220 is attached  9 Exempt foreign organizations of time to life (Form 8868)  6 Executive withholding erroreously withheld  7 Total credits and payments. Add lates the total of lines 5 and 8 is more than line 7, enter amount towed  9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount towed  9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount towed  10 Total credits and payments. Add lates the total of lines 5 and 8 is more than line 7, enter amount towed  9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount towed  10 Total credits and payments. Add lates the total of lines 5 and 8 is more than line 7, enter amount towed  9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount towed  10 Total credits and payments. Add lates the total of lines 5 and 8 is more than line 7 is enter amount towed.  11 Enter the amount of line 10 to be Credited to 2012 estimated tax  12 Enter the amount of line 10 to be Credited to 2012 estimated tax  13 Enter the amount of line 10 to be Credited to 2012 estimat	1	a Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1					
b Domesic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1% of Part I, line 17; oc. (b)  of Part I, line 17; oc. (b)  of Part I, line 17; oc. (c)  of Part I, line 18; oc. (c)  of Part I, line 18; oc. (c)  of Part I, line 18; oc. (c)  of Part I, line 19; oc. (c)  of Part II, line 19; oc. (c)  of Part I, line 19; oc. (c		Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	, <b>l</b>				
of Part I, line 27b  • All Other domestic foundations entire 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-0-)  3 Add lines 1 and 2  3 Co. 3.  3 Add lines 1 and 2  3 Co. 3.  4 Co. 1 Subtile A (Lineme) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-0-)  5 Tax based on investment line one. Subtract line 4 from line 3. It zero or less, enter-0-  5 Cordista? Payments:  2 Other section of the section 5 Subtract line 4 from line 3. It zero or less, enter-0-  6 Exempt foreign organizations: 1 stax withheld at source  6 Tax peal with application for extension of time to file (Form 8858)  6 Exempt foreign organizations: 1 stax withheld at source  6 Tax dee! If the total of lines 5 and 6 is more than line 7, enter amount own  7 Tax dee! If the total of lines 5 and 6 is more than line 7, enter amount own  8 Enter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  9 Tax dee! If the total of lines 5 and 6 is more than line 7, enter amount own  10 Overpayment If line 7 or more than the total or lines 5 and 6 is more than line 7, enter amount overpaid  10 Overpayment If line 7 or more than the total or lines 5 and 6 is more than line 7, enter amount overpaid  10 Overpayment If line 7 or more than the total or lines 5 and 6 is more than line 7, enter amount overpaid  10 Overpayment If line 7 or more than the total or lines 1 on the credited to 2012 estimated tax. P 965 · Retunded bit 10 · 0 · 0 · 0 · 0 · 0 · 0 · 0 · 0 · 0			. 1			6	35.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lanes 1 and 2  4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtact line 4 from line 3. If zero or less, enter -0-  5 Credis-Pyments:  a 2011 estimated tax payments and 2010 overpayment credited to 2011  5 Exempt foreign organizations: Law thinheld at source  6 By Exempt foreign organizations: Law thinheld at source  6 Both expression of the control of the c							
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lanes 1 and 2  4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtact line 4 from line 3. If zero or less, enter -0-  5 Credis-Pyments:  a 2011 estimated tax payments and 2010 overpayment credited to 2011  5 Exempt foreign organizations: Law thinheld at source  6 By Exempt foreign organizations: Law thinheld at source  6 Both expression of the control of the c		·	.				
3 dots less 1 and 2  4 Subtilité A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0·)  5 Tax based on investment income Subtract line 4 from line 3. If zaro or less, enter -0·  5 Tax based on investment income Subtract line 4 from line 3. If zaro or less, enter -0·  5 Tax based on investment income Subtract line 4 from line 3. If zaro or less, enter -0·  5 Tax based on investment income Subtract line 4 from line 3. If zaro or less, enter -0·  5 Tax based on investment day payments and 2010 overpayment or detided to 2011  6			. 2				0.
Subtilie A (income) lax (domestic acction 4947(p)(1) trusts and taxable foundations only. Others enter-0-)	_		-			6	
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- 6 Credis/Payments. 2011 estimated ax payments and 2010 overpayment credited to 2011 6 Exempt foreign organizations: tax withheld at source 6 Tax paid with application for setters on of lime to life (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add hises 58 through 60 8 Tax fax with applicant for setters on of lime to life (Form 8868) 6 Backup withholding erroneously withheld 8 Total credits and payments. Add hises 58 through 60 8 Tax fax with life in the set of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owerpaid 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owerpaid 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owerpaid 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owerpaid 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owerpaid 9 Tax due If the total of lines 1 and 1 a	4	į.					
6 Credits/Payments: a 2011 estimated tax payments and 2010 overpayment credited to 2011 b Exempt foreign organizations: tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Eachy withholding enroneously withheld 7 Total credits and payments. Add lines 6a through 6d 6d 7 Total credits and payments. Add lines 6a through 6d 6d 7 Total credits and payments. Add lines 6a through 6d 6d 7 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owerpaid 10 Overpayment If line 7 is more than 6 total of lines 5 and 8, enter the amount overpaid 10 Verpayment If line 7 is more than 6 total of lines 5 and 8, enter the amount overpaid 10 Verpayment If line 7 is more than 6 total of lines 5 and 8, enter the amount overpaid 11 Octavity and 12 is the first and 1	5	· · · · · · · · · · · · · · · · · · ·				6	
a 2011 ostimated tax payments and 2010 overpayment credited to 2011 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to tite (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add times 6a through 66 8 Enter any penalty for underpayment of estimated tax. Check here I of Form 2220 is attached 9 Tax due If the total of lines 5 and 8, note than time 7, enter amount owed 10 Overpayment If line? I's more than the total of lines 5 and 8, notes the amount owed 10 Overpayment If line? I's more than the total of lines 5 and 8, notes the amount owerpaid 11 Enter the amount of line 10 in be. Ore directle to 2012 estimated tax.  9 965. Refunded 11 0.  Part VII-A Statements Regarding Activities 11 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or microneit any political campaign? 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or microneit on any political campaign? 16 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 16 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 18 If the answer is "Yes" to **go **lo** just the declarated description of the activities. 2 Did the foundation hie Form 1120-POL for this year? 2 Enter the reimbursement (if any) of tax on political expenditure sections and accordance of the activities. 3 Did the foundation made any charges, not previously been reported to the IRS? 11 "Yes," attach a detailed description of the activities. 4 Did the foundation made any charges, not previously been reported to the IRS? 11 "Yes," attach a detailed description of the activities. 4 Did the foundation made any charges, not previously reported to the IRS, in its governing instrument, articles of incorpor	6	, ·	<u> </u>				
b Exempl foreign organizations - tax withheld at source		·	. 1				
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding renneously withheld 1 Total credits and payments. Add lines 6a through 68 8 Enter any penalty for underpayment of estimated tax. Check here							
d Backup withholding ernoeously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here							
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 965 Refunded ▶ 10 965.    Part 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 in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign.  1b X Yes No 1a No Press to 1a Organization and the activities of interview in the activities of distributed by the foundation and intervene in the activities.  2 Dut the foundation file Form 1120-POL for this year?  2 In Yes, "attach a detailed description of the activities.  3 Has the foundation engaged in any activities that have not previously been reported to the IRS?  2 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 bylaws, or other similar instruments? If Yes, "attach a conformed copy of the changes.  4 During the foundation have unrelated busines							
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Part VIII-A   Statements Regarding Activities						9	
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If the answer is "Yes" to 1 <sub>B</sub> or 1 <sub>D</sub> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.  C Did the foundation file Form 1120-POL for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .  e 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 X 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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  6 We have the statement required by General Instruction T.  6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  9 by language in the governing instrument, or  9 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, or  9 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, or  9 by language in the governing instrument of Prive, according to the first private of Prive, according to the first private of Priv							
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4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.  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?  If "Yes," complete Part II, col (c), and Part XV  Ba Enter the states to which the foundation reports or with which it is registered (see instructions)  PA  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  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)'? If "Yes," complete Part XIV  9 X  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	Γ.				
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5	4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		_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?  7 Did the foundation have at least \$5,000 in assets at any time during the year?  If "Yes," complete Part II, col (c), and Part XV  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  PA  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  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 X  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  10 X			N,	/A	4b		
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Form 990-PF (20					FOUNDATION		23-2384	942	Page 6
Parti VII-B	Statements Re	garding	Activities for	Which	Form 4720 May Be	Required (conti	nued)		
5a During the y	year did the foundation	pay or incur	any amount to						
(1) Carry o	n propaganda, or other	wise attemp	t to influence legisla	tion (sectio	n 4945(e))?	Y	es 🗓 No	ĺ	
(2) Influen	ce the outcome of any s	specific publ	ic election (see secti	on 4955), (	or to carry on, directly or indi	rectly,		ĺ	
any vot	ter registration drive?					Y	es X No	ĺ	
(3) Provide	e a grant to an individua	l for travel, s	tudy, or other simila	r purposes	37	Y	es 🗶 No	ĺ	
(4) Provide	e a grant to an organizat	tion other th	an a charitable, etc ,	organizatio	in described in section			1	1 1
	(1), (2), or (3), or sectio			-			es 🗶 No		1
(5) Provide	e for any purpose other	than religiou	is, charitable, scienti	fic, literary	, or educational purposes, or	for	1		<b>i</b> i
	vention of cruelty to chi	_	-		, , , , , , , , , , , , , , , , , , , ,		es X No		
	•			oualify un	der the exceptions described		<del></del>		<b>!</b>
	1945 or in a current not						N/A	5b	1
	ns relying on a current i			•	,		▶□		
_		_	•		rom the tax because it maint	ained			
	responsibility for the g						es No		
•	tach the statement re		Regulations secti	nn 53 494		.,,			
	idation, during the year.								
	enefit contract?	, 1000140 0119	ionas, ancony or m	directly, to	pay promising on		es X No		
•		nav nramiii	me directly or indire	actly on a r	personal benefit contract?	·	CS [21] NU	6ь	X
	6b, file Form 8870	, pay premiu	inis, directly of indire	olly, on a p	bersonal beliefit contract.			00	
	during the tax year, was	the founds	tion a party to a prob	ubited toy	shaltar transaction?		es X No		
						٠ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ	N/A	7b	<del> </del>
					utable to the transaction? ees, Foundation M	onogoro Light		70	<u> </u>
Part VIII	Paid Employee	s, and C	ontractors	s, musi	ees, roundation w	anagers, nigni	У		
1 List all offic	ers, directors, trust	ees, found	lation managers	and their	compensation.				
					(b) Title, and average	(c) Compensation	(d) Contributions to		(e) Expense ccount, other
	(a) Name	and address	1		hòurs per week devoted to position	(If not paid, enter -0-)	employee benefit plan and deferred	s a	ccount, other allowances
ELAINE E	RELL				OFFICER	citer o j	compensation	╅	
	RLY HEIGHT	S. V2	1. 1400 W	AVERI		l			
	, PA 19035		<u> </u>		1.00	0.	о		0.
	TE KNYSH		· · · · · · · · · · · · · · · · · · ·		DIRECTOR	<del>                                     </del>	<u> </u>	╧	
	AYETTE AVE	NUE	<del>-</del>		1				
		A 190	34		5.00	19,500.	l 0		0.
101(1 //110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11 170.	<del></del>		3.00	15,500.	<u>°</u>	╧	<del></del>
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						-	<u> </u>	$+\!-$	
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		<u>.</u>	<del></del> -		{				
2 Compensat	ion of five highest-r	aid emplo	vees (other than	those inc	l cluded on line 1). If none	enter "NONE "	<u> </u>	ш_	<del></del>
	in or might be	ora ompro	your (outer than	those int	(b) Title, and average	, cinci itoliz.	(d) Contributions to	1	(e) Expense
(a) Nam	e and address of each e	employee pa	id more than \$50,00	0	hours per week	(c) Compensation	(d) Contributions to employee benefit plan and deferred	s að	ccount, other
NO	NE				devoted to position	<del></del>	compensation		allowances
NO	INE								
		-							
					1				
-						<del>                                     </del>		4	
						<b>-</b>		<del> </del>	
		<u></u>	<del></del>			<u> </u>		Щ_	
Total number of	other employees paid o	ver \$50,000					<u> </u>		0

Form 990-PF (2011) ELAINE AND VINCENT BELL FOUNDATION	23-	2384942	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE	, u		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	pensation
NONE			
			_
			_
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		Į.	
To the probability of athere are a way and a CCO 0000 for a system and leave upon		<b>&gt;</b>	0
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities			
	mation such as the		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the	Expenses	3
1 N/A	<u> </u>	<del></del>	_
2			
3			
4			
Dat V DIO		Ĺ	
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	40	Amount	
37/3	u z.	Amount	_
1 N/A		1	
2			_
	<del></del>		
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3	<b></b>		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	$\neg \top$	· .
a	Average monthly fair market value of securities	1a	1,578,503.
b	Average of monthly cash balances	1b	1,578,503. 49,176.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,627,679.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,627,679.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	24,415.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,603,264.
6	Minimum investment return. Enter 5% of line 5	6	80,163.
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	80,163.
2a	Tax on investment income for 2011 from Part VI, line 5		
ь	Income tax for 2011. (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c	635.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	79,528.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	79,528.
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	79,528.
P	art XII Qualifying Distributions (see instructions)	<u>'                                    </u>	
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	73,303.
Ь	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	73,303.
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	635.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	72,668.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies fo	·····
	4040(a) radiuation of tay in those years		

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,	· · · · · · · · · · · · · · · · · · ·			
line 7				79,528.
2 Undistributed income, if any, as of the end of 2011		· · · · · · · · · · · · · · · · · · ·		
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years				
,		0.		
3 Excess distributions carryover, if any, to 2011:	· ·······		********	
a From 2006				
<b>b</b> From 2007				
c From 2008 3,392.				
<b>d</b> From 2009				
eFrom 2010				
f Total of lines 3a through e	3,392.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ►\$ 73,303.				
a Applied to 2010, but not more than line 2a			0.	
<b>b</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				73,303.
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))	3,392.			3,392.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		•	<del></del>	
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				
be distributed in 2012				2,833.
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	, i			the stiff of the state of the s
not applied on line 5 or line 7	0.		<del></del>	<u> </u>
9 Excess distributions carryover to 2012.	<u> </u>		Security and a sum of the security and a security and sec	e and the production of a strong special speci
Subtract lines 7 and 8 from line 6a	0.			
0 Analysis of line 9:				
a Excess from 2007	İ			
b Excess from 2008 c Excess from 2009				
d Excess from 2010				
e Excess from 2011				
C LACESS HUIH ZUTT				Form 990 DE (2011)

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	oundations (see in		I-A, question 9)	N/A	
1 a If the foundation has received a ruling o		_			
foundation, and the ruling is effective fo		~	▶ └─	1 (0.40(.)(0) 1 1 (	0.404.3453
b Check box to indicate whether the found		ig toundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2011	(b) 2010	Prior 3 years (c) 2009	(d) 2008	(e) Total
investment return from Part X for	- (4)2011	(5/2010	(0)2005	(0) 2000	(6) 10121
each year listed					
b 85% of line 2a		·	<u> </u>	<del></del>	1
c Qualifying distributions from Part XII,	-				
line 4 for each year listed					
d Amounts included in line 2c not					i
used directly for active conduct of			1		
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 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					]
(4) Gross investment income					
Part XV   Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see instr	uctions.)			
Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who year (but only if they have contributed m	have contributed more sore than \$5,000) (See so	than 2% of the total cont ection 507(d)(2).)	ributions received by the	e foundation before the clo	se of any tax
EE STATEMENT 7					
b List any managers of the foundation who other entity) of which the foundation has	o own 10% or more of the a 10% or greater interes	e stock of a corporation t.	(or an equally large port	ion of the ownership of a p	artnership or
ONE					
Information Regarding Contribution Check here ► X if the foundation of the foundation makes gifts, grants, etc. (	nly makes contributions t	o preselected charitable	organizations and does	not accept unsolicited requ	ests for funds. If
a The name, address, and telephone numb					
L The formation in the second					
<b>b</b> The form in which applications should be	e submitted and informat	ion and materials they st	nould include.		
c Any submission deadlines.					
		l areas, charitable fields,			

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the		<del>,</del>		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
EASTSIDE ARTS ALLIANCE - EASTSIDE	NONE	DURI TO	CUADIMADIE	
CULTURAL CENTER	HONE	PUBLIC	CHARITABLE	
P.O. BOX 17008				
OAKLAND, CA 94601				1,000.
DIEDENMA GOLGGOVEN DOOD DAW		L		
FAIRBANKS COMMUNITY FOOD BANK 725 26TH AVENUE # 101	NONE	PUBLIC	CHARITABLE	
FAIRBANKS, AK 99701				1,000.
Englishment, inv ppyv2				1,000.
FARESTART	NONE	PUBLIC	CHARITABLE	
700 VIRGINIA STREET				
SEATTLE, WA 98101				1,000.
FIRST GRADUATE	NONE	PUBLIC	CHARITABLE	ļ
PRESIDIO OF SAN FRANCISCO, P.O. BOX				
29415 SAN FRANCISCO, CA 94129				3,000.
FRIENDS GENERAL CONFERENCE	NONE	DUDI TO	OUAD THAD! E	
1216 ARCH STREET, 2B	NONE	PUBLIC	CHARITABLE	
PHILADELPHIA, PA 19107				2,000.
				,
GERMANTOWN ACADEMY	NONE	PUBLIC	CHARITABLE	
P.O. BOX 287 FORT WASHINGTON PA 19034				2 500
TORT WASHINGTON, PA 15054	-	<del> </del>		2,500.
GREATER FAIRBANKS COMMUNITY HOSPITAL	NONE	PUBLIC	CHARITABLE	
FOUNDATION				
P.O. BOX 71396				
FAIRBANKS, AK 99707				1,500.
HAMILTON COLLEGE - THE KATHERINE	NONE	PUBLIC	CHARITABLE	
ECKMAN SCHOLARSHIP FUND	110112			
198 COLLEGE HILL ROAD				
CLINTON, NY 13323				1,000.
THERETOR COMMINITARY RESIDES CONTROL	NONE	DUBL TO	CUADIMADIE	
INTERIOR COMMUNITY HEALTH CENTER 1606 23RD AVENUE	NONE	PUBLIC	CHARITABLE	
FAIRBANKS, AK 99701				1,000.
·				,
		1		
LAST CHANCE RANCH	NONE	PUBLIC	CHARITABLE	
9 BECK ROAD		1		
QUAKERTOWN, PA 18951		<u> </u>		500. 46,500.
Total from continuation sheets				40,500.

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y			<del></del>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
MILTON ACADEMY - THE MOUNTAIN SCHOOL	NONE	PUBLIC	CHARITABLE	
151 MOUNTAIN SCHOOL ROAD VERSHIRE, VT 05079				1,0
		<b>†</b>		*,*
NATIONAL LAWYERS GUILD - SAN FRANCISCO CHAPTER	NONE	PUBLIC	CHARITABLE	
558 CAPP STREET SAN FRANCISCO, CA 94110				1 0
our remerbee, en 34110	<u> </u>			1,0
PENNSYLVANIA ACADEMY OF FINE ARTS	NONE	PUBLIC	CHARITABLE	
128 N BROAD STREET				
PHILADELPHIA, PA 19102				5,0
PENNSYLVANIA HOSPITAL - J EDWIN WOOD	NONE	PUBLIC	CHARITABLE	
800 SPRUCE STREET				
PHILADELPHIA, PA 19107				2,5
DEODIE DOB DUGES COUNT	NO.VII.	DUDITO		
PEOPLE FOR PUGET SOUND 911 WESTERN AVENUE, SUITE 580	NONE	PUBLIC	CHARITABLE	
SEATTLE, WA 98104	*****		-	1,0
PHILADELPHIA ART MUSEUM 26TH STREET AND BENJAMIN FRANKLIN	NONE	PUBLIC	CHARITABLE	
PARKWAY PHILADELPHIA, PA 19130				3,5
POCONO WILDLIFE REHABILITATION CENTER 361 CHERRY DRIVE	NONE	PUBLIC	CHARITABLE	
STROUDSBURG, PA 18360				5
QUEEN ANNE HELPLINE 311 WEST MCGRAW	NONE	PUBLIC	CHARITABLE	
SEATTLE, WA 98119				1,0
SAFE PASSAGES	NONE	PUBLIC	CHARITABLE	
250 FRANK H. OGAWA PLAZA, SUITE 6306 DAKLAND, CA 94612				1,0
				· -
SEATTLE ANIMAL SHELTER	NONE	PUBLIC	CHARITABLE	
2601 15TH AVENUE WEST SEATTLE, WA 98104				1,50
Total from continuation sheets	<b>.</b>	1	<u> </u>	

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
SEATTLE PUBLIC LIBRARY FOUNDATION	NONE	PUBLIC	CHARITABLE	
1000 FOURTH AVENUE SEATTLE, WA 98104				2,500
SERTINE, WA JOINS				2,300
SPIN - SPECIAL PEOPLE IN NORTHEAST	NONE	PUBLIC	CHARITABLE	
INC. 10501 DRUMMOND ROAD				
PHILADELPHIA, PA 19154				1,500
THE LEGAL AIDE SOCIETY - EMPLOYMENT	NONE	PUBLIC	CHARITABLE	
LAW CENTER	NONE	FORLIC	CHARITABLE	
180 MONTGOMERY STREET, SUITE 600				
SAN FRANCISCO, CA 94104				1,000
THE MILTON ACADEMY - MOUNTAIN SCHOOL	NONE	PUBLIC	CHARITABLE	
151 MOUNTAIN SCHOOL ROAD VERSHIRE, VT 05079				1,000
THE PHILADELPHIA ORCHESTRA	NONE	PUBLIC	CHARITABLE	
BROAD & LOCUST STREETS				
PHILADELPHIA, PA 19102				5,500
WILDLANDS CONSERVANCY	NONE	PUBLIC	CHARITABLE	
3701 ORCHID PLACE EMMAUS, PA 18049				1,000
WXPN 88.5	NONE	PUBLIC	CHARITABLE	
P.O. BOX 8419	NOME	POBLIC	CHARITABLE	
PHILADELPHIA, PA 19101				1,500
		<del> </del>		
Total from continuation sheets				

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

Unrelate	d business income		ded by section 512, 513, or 514	(e)
(a) Business	(b) Amount	sion	(d) Amount	Related or exempt function income
code		code		
		+		
- <del>                                    </del>	·	<del> </del>		
<del>-                                    </del>				<u> </u>
	<del></del>		···-	
- <del>                                    </del>		+		
- <del>                                    </del>	······	1		
	· · · · · · · · · · · · · · · · · · ·			-
		14	49,078.	
		18	32,708.	
_				
			·	
	0	•	81,786.	
			13	81,786
	(a)	Business code Amount	Business code  Amount  14  18	(a) Business Code Amount Exclusion (d) Amount    14 49,078.

## Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).					
123621 12-02-11	Form <b>990-F</b>	PF (2011)				

Form	n 9 <b>9</b> 0-P	F(2011) ELAIN	E AND VINCENT BELL FOUNDATI	ON 23-238	4942	Pa	ge 13	
	rt X\		egarding Transfers To and Transactions a				go 1 <u>0</u>	
_		Exempt Organ		,				
1	Dad th	e organization directly or indi	rectly engage in any of the following with any other organizatio	n described in section 501(c) of		Yes	No	
	the Co	de (other than section 501(c	)(3) organizations) or in section 527, relating to political organi	izations?	]			
а	Transi	ers from the reporting found	ation to a noncharitable exempt organization of:		1			
	(1) C	ash			1a(1)		X	
	(2) Other assets							
b	Other	transactions.						
	(1) S	ales of assets to a noncharita	ble exempt organization		1b(1)		<u> </u>	
	(2) P	urchases of assets from a no	ncharitable exempt organization		1b(2)		<u> </u>	
		ental of facilities, equipment,			1b(3)	_	X	
	٠,	eimbursement arrangements			1b(4)		X	
		oans or loan guarantees			1b(5)		X	
	` '		mbership or fundraising solicitations		1b(6)		X	
		•	iling lists, other assets, or paid employees		1c		<u> </u>	
d			"Yes," complete the following schedule. Column (b) should alv			ets,		
			oundation If the foundation received less than fair market valu other assets, or services received	e in any transaction or snaring arrangement,	Show in			
(a)ı	ine no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and	l charing an	an ao mo		
(4)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) / and and and order	N/A	(b) Description of transfers, transactions, and		angeme		
		<del></del>	N/A	<del></del>				
				<del></del>				
	-							
	$\neg \neg$	<del></del>				-		
		<del></del>		<del></del>				
			<u>.</u>					

2a	s the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described
	n section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

HORSHAM, PA 19044-2369

	Yes	X	No
--	-----	---	----

**b** If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A

Sign Here	and be	penalties of perjury, I declare that I have examined the slief, it is true, correct, and complete. Declaration of particle and the slief of the slief of trustee.				er has any knowledge	May the IHS discuss this return with the preparer shown below (see instr.)?  X Yes N
Paid		Print/Type preparer's name SUSAN P. STUTZMAN	Preparer's signatur	nd4	Date 10/31/12	Check if self- employed	PTIN P00145946
Prepa Use C		Firm's name ► KREISCHER MI Firm's address ► 100 WITMER	LLER ROAD. SUI	<i>U</i>		Firm's EIN ► 2	3-1980475

(215)441-4600 Susan P. Stutzman P00145946

Phone no.

Form **990-PF** (2011)

123622 12-02-11

123591 05-01-11

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

3

NUATION	FOR	990-1	PF,	PART	Τ.
84942	_ PA	AGE	2	OF	

	describe the kind(s) of property solution	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo , day, yr.)	
1a AMERICAN BEACO			P		11/30/11
b VANGUARD S/T I			P -		11/30/11
c VANGUARD GROWT			P		11/30/11
d PIMCO TOTAL RE			P		11/30/11
e LONGLEAF PARTN			P		11/30/11
f CAPITAL GAINS			<del></del>	VIIICEGOD	11/30/11
9					
h	•				
1	·	***	· · · · · · · · · · · · · · · · · · ·		
1				<del> </del>	
k					
<u> </u>					
m					
n					
0			· ·		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) lus (f) minus (g)	
a 6,000.	·	7,504.			-1,504.
b 5,000.		5,058.			-58.
c 5,250.		5,463.			-213.
d 16,151.		16,170.			-19.
e 15,000.		16,428.			-1,428.
f 2,337.		,			2,337.
g	-	·			
h					
1					
1					
k					
1			,		
m				-	
n					
0					
Complete only for assets showing	ig gain in column (h) and owned by t	he foundation on 12/31/69	(I) Los	ses (from col. (h))	
(2511)	(j) Adjusted basis	(k) Excess of col. (i)	Gains (excess of	of col (h) gain over	
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any	Dut n	ot less than "-0-")	
a				- · · <del>- · · · · · · · · · · · · · · · ·</del>	-1,504.
b					-58.
b c					-213.
d					-19.
е					-1,428.
f					2,337.
g					
h					
1					<u></u>
J					·
k					
1					
m					
<u>n</u>			<del></del>		
0					
2 Capital gain net income or (net ca	pital loss) {   If gain, also enter   If (loss), enter *-0	ın Part I, line 7 -• ın Part I, line 7 - }	2		32,708.
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) an	` \			_
If gain, also enter in Part I, line 8,	column (c).	}		37 / S	
If (loss), enter "-0-" in Part I, line 8	·	J	3	N/A	

FORM 990-PF DIVIDEN	DS AND I	INTER	EST FF	ROM SEC	CURITIES	STATEMENT 1
SOURCE	(	GROSS	AMOUN		APITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
MERRILL LYNCH 04060 - ACCRUE INTEREST PAID ON SECURITIES MERRILL LYNCH 04060 - DIVIDE		_	-34	18.	0.	-348.
ON SECURITIES			11,93	31.	16.	11,915.
MERRILL LYNCH 04060 - INTERE ON SECURITIES MERRILL LYNCH 04060 - OID ON			7,08	36.	0.	7,086.
OBLIGATIONS	-		51	L5.	0.	515.
MERRILL LYNCH 04060 - US TREASURY INTEREST MERRILL LYNCH 04362 - DIVIDE MERRILL LYNCH 04362 - INTERE	ST		3,60 8,90		0. 0. 0.	3,608. 8,901. 12.
PRUDENT MANAGEMENT - DIVIDEN ON SECURITIES	DS		19,71	LO.	2,321.	17,389.
TOTAL TO FM 990-PF, PART I,	 LN 4		51,41		2,337.	49,078.
FORM 990-PF	ACC	OUNTI	NG FE	S		STATEMENT 2
DESCRIPTION	(A) EXPENS PER BO	SES	NET ]	(B) INVEST- INCOME		
ACCOUNTING FEES	2 ,	,520.		1,512		1,008.
TO FORM 990-PF, PG 1, LN 16B	2,	,520.		1,512		1,008.
FORM 990-PF	OTHER PE	ROFES	SIONAI	FEES		STATEMENT 3
DESCRIPTION	(A) EXPENS PER BO	SES	NET ]	(B) INVEST- INCOME		
INVESTMENT FEES	12,	,597.		12,597	•	0.
TO FORM 990-PF, PG 1, LN 16C	12,	.597.		12,597	•	0.
=					_	

FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCON	
FOREIGN TAXES FEDERAL TAXES	319. 1,685.	319.		0.
TO FORM 990-PF, PG 1, LN 18 =	2,004.	319.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCON	
DUES INSURANCE	695. 750.	0.		695. 750.
TO FORM 990-PF, PG 1, LN 23	1,445.	0.		1,445.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE
MERRILL LYNCH #04362 PRUDENT MANAGEMENT MERRILL LYNCH #04060			118,065. 684,428. 691,125.	118,065. 684,428. 691,125.
TOTAL TO FORM 990-PF, PART II	, LINE 10B		1,493,618.	1,493,618.
FORM 990-PF	PART XV - L	INE 1A ON MANAGERS	<del>,,,</del>	STATEMENT 7

NAME OF MANAGER

ELAINE BELL MARGUERITE KNYSH

Form 8868 (Rev 1 2012)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month E	xtension.	complete only Part II and check this	s box		<b>X</b>
Note. Only complete Part II if you have already been granted an				8868	
If you are filing for an Automatic 3-Month Extension, complete					
Part II Additional (Not Automatic) 3-Month I			nal (no c	opies needed	).
<u> </u>				ng number, see ir	
Type or Name of exempt organization or other filer, see instru	uctions			r identification nur	
print					
File by the ELAINE AND VINCENT BELL FOU	$\mathbf{x}$	23-23849	42		
due date for Number, street, and room or suite no. If a P.O. box.	Social se	curity number (SS	SN)		
return See 7007 LAFAYETTE AVENUE				•	•
City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
FORT WASHINGTON, PA 19034					
Enter the Return code for the return that this application is for (fi	le a separa	te application for each return)			04
Application	Return	Application			Return
Is For	Code	Is For	·		Code
Form 990	01	`	<u> </u>		4 3 1 2
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	01	Form 4720			09
Form 990-PF	04	Form 5227		<del></del>	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 grante			iously file	ed Form 8868.	
MARGUERITE BEL				10024	
• The books are in the care of ► 7007 LAFAYETTE	AVEN		N, PA	19034	
Telephone No. ► 215-260-8238	سالمطفصي	FAX No.			
<ul> <li>If the organization does not have an office or place of busines</li> <li>If this is for a Group Return, enter the organization's four digit</li> </ul>			f thus is for		obook this
box If it is for part of the group, check this box	_	simplion Number (GEN)			
		BER 15, 2012.	an memb	ers the extension	10 101.
5 For calendar year 2011, or other tax year beginning	140 1 1111.	, and ending	n		_
6 If the tax year entered in line 5 is for less than 12 months,	check reas		Final r	eturn	<del></del> '
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS NEEDED TO	GATHE	R INFORMATION NECE	SSARY	TO FILE	A
COMPLETE AND ACCURATE TAX RET					
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
nonrefundable credits. See instructions.			8a	\$	<u>656.</u>
b If this application is for Form 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and estimated			
tax payments made Include any prior year overpayment a	llowed as a	a credit and any amount paid	1		
previously with Form 8868			8b	\$	<u>1,600.</u>
c Balance due. Subtract line 8b from line 8a Include your pa	ayment wit	h this form, if required, by using			_
EFTPS (Electronic Federal Tax Payment System). See instr			8c	\$	0.
——————————————————————————————————————		st be completed for Part II o	_		
Under penalties of perjury, I declare that I have examined this form, included the true correct, and semilate and that I am outher rad to propose this feet	ding accomp	panying schedules and statements, and to	the best o	f my knowledge and	, belief,
it is true, correct, and complete, and that I am authorized to prepare this f	UIII. ND.	1		Jul	n
Signature > Juan P. Suna Martille >	<u> (17)</u>	7	Date		2
				Form 8868 (I	Rev. 1-2012)