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Form 990-PF

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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2011, or tax year beginning 01-01-2011, and ending 12-31-2011

Check all that apply: Initial return, Amended return, Initial return of a former public charity, Address change, Final return, Name change

Name of foundation: TACONIC FOUNDATION INC. Employer identification number: 26-3530306. Telephone number: (518) 537-5200. City: HUDSON, NY 12534. Accounting method: Cash. Fair market value: \$178,359.

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12), Operating and Administrative Expenses (13-26), and Summary (27-29).

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

Part II Balance Sheets		Beginning of year			End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	24,337	37,932	37,932			
	2 Savings and temporary cash investments						
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____						
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____						
	5 Grants receivable						
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)						
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____						
	8 Inventories for sale or use						
	9 Prepaid expenses and deferred charges						
	10a Investments—U S and state government obligations (attach schedule)						
	b Investments—corporate stock (attach schedule)	111,645 <input checked="" type="checkbox"/>	140,427	140,427			
	c Investments—corporate bonds (attach schedule)						
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____						
	12 Investments—mortgage loans						
	13 Investments—other (attach schedule)						
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____						
15 Other assets (describe ▶ _____)							
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	135,982	178,359	178,359				
Liabilities	17 Accounts payable and accrued expenses						
	18 Grants payable						
	19 Deferred revenue						
	20 Loans from officers, directors, trustees, and other disqualified persons						
	21 Mortgages and other notes payable (attach schedule)						
	22 Other liabilities (describe ▶ _____)						
	23 Total liabilities (add lines 17 through 22)	0	0				
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24 Unrestricted	135,982	178,359				
	25 Temporarily restricted						
	26 Permanently restricted						
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.						
	27 Capital stock, trust principal, or current funds						
	28 Paid-in or capital surplus, or land, bldg, and equipment fund						
	29 Retained earnings, accumulated income, endowment, or other funds						
30 Total net assets or fund balances (see page 17 of the instructions)	135,982	178,359					
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	135,982	178,359					

Part III Analysis of Changes in Net Assets or Fund Balances

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	135,982
2	Enter amount from Part I, line 27a	2	48,919
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	184,901
5	Decreases not included in line 2 (itemize) ▶ _____ <input checked="" type="checkbox"/>	5	6,542
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	178,359

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a	See Additional Data Table			
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a	See Additional Data Table			
b				
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	7,107
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8		}	3

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2010	104,394	133,651	0.781094
2009	99,559	125,341	0.794305
2008	0	34,230	0.0
2007			
2006			
2	Total of line 1, column (d).		2 1.575399
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years		3 0.525133
4	Enter the net value of noncharitable-use assets for 2011 from Part X, line 5.		4 171,941
5	Multiply line 4 by line 3.		5 90,292
6	Enter 1% of net investment income (1% of Part I, line 27b).		6 100
7	Add lines 5 and 6.		7 90,392
8	Enter qualifying distributions from Part XII, line 4.		8 92,498

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

Table with 11 rows for excise tax calculations. Includes sub-rows 6a-6d for credits and payments. Total tax due is 100, with 0 overpayment.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns for question number, Yes, and No. Includes questions about political influence, expenditures, and liquidation.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions).	11		No
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14 The books are in care of SAMUEL W PHELAN Telephone no (518) 537-7287 Located at ONE HUDSON CITY CENTRE HUDSON NY ZIP+4 12534			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			<input type="checkbox"/>
16 At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	<input type="checkbox"/>	<input type="checkbox"/>
See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country N/A			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year did the foundation (either directly or indirectly)				
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c			No
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20___, 20___, 20___, 20___				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions).	2b			
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20___, 20___, 20___, 20___				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.</i>)	3b			
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a			No
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b			No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

<p>5a During the year did the foundation pay or incur any amount to</p> <p>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions). . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/></p> <p>c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," attach the statement required by Regulations section 53.4945–5(d).</p> <p>6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes" to 6b, file Form 8870.</p> <p>7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	5b		
	6b		No
	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOSEPH W PHELAN ONE HUDSON CITY CENTRE HUDSON, NY 12534	DIRECTOR 1 00	0	0	0
SAMUEL P PHELAN ONE HUDSON CITY CENTRE HUDSON, NY 12534	DIRECTOR 1 00	0	0	0
ELLEN C PHELAN ONE HUDSON CITY CENTRE HUDSON, NY 12534	DIRECTOR 1 00	0	0	0
DAVID LESTER ONE HUDSON CITY CENTRE HUDSON, NY 12534	DIRECTOR 1 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. **0**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
3 All other program-related investments. See page 24 of the instructions	

Total. Add lines 1 through 3. **0**

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	125,796
b	Average of monthly cash balances.	1b	48,763
c	Fair market value of all other assets (see page 24 of the instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	174,559
e	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	174,559
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions).	4	2,618
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	171,941
6	Minimum investment return. Enter 5% of line 5.	6	8,597

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	8,597
2a	Tax on investment income for 2011 from Part VI, line 5.	2a	100
b	Income tax for 2011 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	100
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	8,497
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	8,497
6	Deduction from distributable amount (see page 25 of the instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	8,497

Part XII Qualifying Distributions (see page 25 of the 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	92,498
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	92,498
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions).	5	100
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	92,398

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				8,497
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2011				
a From 2006.				
b From 2007.				
c From 2008.				
d From 2009.				92,910
e From 2010.				97,875
f Total of lines 3a through e.	190,785			
4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ <u>92,498</u>				
a Applied to 2010, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
c Treated as distributions out of corpus (Election required—see page 26 of the instructions).	0			
d Applied to 2011 distributable amount.				8,497
e Remaining amount distributed out of corpus	84,001			
5 Excess distributions carryover applied to 2011 <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	274,786			
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 page 27 of the instructions		0		
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions			0	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions).	0			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see page 27 of the instructions).	0			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	274,786			
10 Analysis of line 9				
a Excess from 2007.				
b Excess from 2008.				
c Excess from 2009.				92,910
d Excess from 2010.				97,875
e Excess from 2011.				84,001

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling.

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 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 Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

See Additional Data Table

b The form in which applications should be submitted and information and materials they should include

See Additional Data Table

c Any submission deadlines

See Additional Data Table

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

See Additional Data Table

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total				3a 92,498
b <i>Approved for future payment</i>				
Total				3b 0

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

Schedule of Contributors

OMB No 1545-0047

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

2011

Department of the Treasury
Internal Revenue Service

Name of organization
TACONIC FOUNDATION INC

Employer identification number

26-3530306

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule—

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An Organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
TACONIC FOUNDATION INC

Employer identification number

26-3530306

Part I

Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	TACONIC FARMS INC ONE HUDSON CITY CENTRE HUDSON, NY 12534	\$ 135,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization TACONIC FOUNDATION INC	Employer identification number 26-3530306
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Part II **Noncash Property** (see Instructions) Use duplicate copies of 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
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____

Name of organization
TACONIC FOUNDATION INC

Employer identification number

26-3530306

Part III *Exclusively* religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry.)

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
—	(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	
_____ _____ _____		_____ _____ _____	
—	(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	
_____ _____ _____		_____ _____ _____	
—	(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	
_____ _____ _____		_____ _____ _____	

Additional Data

Software ID:

Software Version:

EIN: 26-3530306

Name: TACONIC FOUNDATION INC

Form 990PF - Special Condition Description:

Special Condition Description

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
CHARLES RIVER LABS	P	2008-12-29	2011-02-17
COVANCE	P	2003-09-12	2011-04-07
JOHNSON & JOHNSON	P	1988-02-04	2011-04-25
JOHNSON & JOHNSON	P	2008-12-29	2011-04-25
COVANCE	P	2003-09-12	2011-08-08
COVANCE	P	2008-12-29	2011-08-08
JOHNSON & JOHNSON	P	2011-12-29	2011-09-02

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
8,370		5,895	2,475
11,591		9,206	2,385
248		239	9
12,143		11,727	416
2,548		2,255	293
2,652		2,348	304
13,191		11,966	1,225

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			2,475
			2,385
			9
			416
			293
			304
			1,225

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

<p>a The name, address, and telephone number of the person to whom applications should be addressed</p> <p>SAMUEL W PHELAN ONE HUDSON CITY CENTRE HUDSON, NY 12534 (518) 537-5200</p>
<p>b The form in which applications should be submitted and information and materials they should include</p> <p>THE TACONIC FOUNDATION WILL REQUIRE FROM ALL RECIPIENTS OF \$5,000 OR MORE TO SUBMIT A STATEMENT IN WRITING STATING THE AMOUNT OF SUCH DISBURSEMENT WILL BE USED ONLY IN FURTHERENCE OF THAT ORGANIZATION'S CHARITABLE PURPOSE AND WILL NOT BE USED FOR ANY PURPOSE THAT WOULD JEOPARDIZE THE TAX EXEMPT STATUS OF THAT ORGANIZATION OR THE TACONIC FOUNDATION</p>
<p>c Any submission deadlines</p> <p>NONE</p>
<p>d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors</p> <p>FOUNDATION WILL ONLY MAKE GRANTS TO QUALIFYING CHARITABLE ORGANIZATIONS DESCRIBED IN IRC SECTION 501 (C)(3), BUT NO GEOGRAPHIC, CHARITABLE FIELDS, OR TYPES OF INSTITUTION RESTRICTIONS</p>

<p>a The name, address, and telephone number of the person to whom applications should be addressed</p> <p>JOSEPH PHELAN ONE HUDSON CITY CENTRE HUDSON, NY 12534 (518) 537-5200</p>
<p>b The form in which applications should be submitted and information and materials they should include</p> <p>THE TACONIC FOUNDATION WILL REQUIRE FROM ALL RECIPIENTS OF \$5,000 OR MORE TO SUBMIT A STATEMENT IN WRITING STATING THE AMOUNT OF SUCH DISBURSEMENT WILL BE USED ONLY IN FURTHERENCE OF THAT ORGANIZATION'S CHARITABLE PURPOSE AND WILL NOT BE USED FOR ANY PURPOSE THAT WOULD JEOPARDIZE THE TAX EXEMPT STATUS OF THAT ORGANIZATION OR THE TACONIC FOUNDATION</p>
<p>c Any submission deadlines</p> <p>NONE</p>
<p>d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors</p> <p>FOUNDATION WILL ONLY MAKE GRANTS TO QUALIFYING CHARITABLE ORGANIZATIONS DESCRIBED IN IRC SECTION 501 (C)(3), BUT NO GEOGRAPHIC, CHARITABLE FIELDS, OR TYPES OF INSTITUTION RESTRICTIONS</p>

<p>a The name, address, and telephone number of the person to whom applications should be addressed</p> <p>NA ONE HUDSON CITY CENTRE HUDSON, NY 12534 (518) 537-5200</p>
<p>b The form in which applications should be submitted and information and materials they should include</p> <p>N/A</p>
<p>c Any submission deadlines</p> <p>NONE</p>
<p>d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors</p> <p>N/A</p>

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AALAS FOUNDATION9190 CRESTWYN HILLS DRIVE MEMPHIS,TN 38125	NONE	PUBLIC CHARITY	GENERAL PURPOSE	7,500
ACLAM FOUNDATION20 MACKINNEN PLACE EAST LYNE,CT 06333	NONE	PUBLIC CHARITY	GENERAL PURPOSE	4,750
AMERICAN CANCER SOCIETY260 OSBORNE RD LOUDONVILLE,NY 12211	NONE	PUBLIC CHARITY	RELAY FOR LIFE	2,000
BERKSHIRE TACONIC COMMUNITY FOUNDATION800 N MAIL ST PO BOX 400 SHEFFIELD,MA 01257	NONE	PUBLIC CHARITY	GENERAL PURPOSE	1,250
BOYS & GIRLS CLUB OF SOUTHERN RENSSELAER COUNTY 544 BROADWAY RENSSELAER,NY 12144	NONE	PUBLIC CHARITY	CAMP ADVENTURE	300
CLEMONT VILLAGE GREEN EVENT COMMITTEE1367 RT 9 TIVOLI,NY 12583	NONE	PUBLIC CHARITY	COMMUNITY EVENTS	200
COARCPO BOX 2 MELLEVILLE,NY 12544	NONE	PUBLIC CHARITY	MEMBERSHIP 2010	800
COLUMBIA COUNTY HABITAT FOR HUMANITYPO BOX 102 CHATHARN,NY 12037	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
COLUMBIA GREENE COMMUNITY FOUNDATION4400 ROUTE 23 HUDSON,NY 12534	NONE	PUBLIC CHARITY	SCHOLARSHIP	3,300
COLUMBIA GREENE HOSPITAL FOUNDATION71 PROSPECT AVE HUDSON,NY 12534	NONE	PUBLIC CHARITY	HOSPITAL BALL 2010	20,725
CRANE SOCCER CLUB483 COUNTY RT 46 STUYVESANT,NY 12173	NONE	PUBLIC CHARITY	GENERAL PURPOSE	200
CROHN'S AND COLITIS FOUNDATION OF AMERICA385 PARK AVENUE SOUTH 17TH FLOOR NEW YORK,NY 10016	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
FAMILY RESOURCE CENTER OF COLUMBIA COUNTYPO BOX 319 CHATHARN,NY 12037	NONE	PUBLIC CHARITY	ANNUAL APPEAL	200
FOUNDATION FOR BIOMEDICAL RESEARCH818 CONNECTICUT AVE NW SUITE 900 WASHINGTON,DC 20006	NONE	PUBLIC CHARITY	ANNUAL APPEAL	1,000
FRIENDS OF CLERMONT87 CLEMONT AVE GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	ANNUAL	1,000
GERMANTOWN CENTRAL SCHOOL 123 MAIL ST GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	ME'ISSA FUCHS LIFE SCIENCE SCHOLARSHIP	2,915
GERMANTOWN LIBRARYPO BOX 466 GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	FINAL PLEDGE INSTALLMENT	750
GIRL SCOUT TROOP 163849 KILBAR RD HUDSON,NY 12534	NONE	PUBLIC CHARITY	LOCAL EVENT	100
HOPE HOUSE FUNDINGPO BOX 38165 ALBANY,NY 12206	NONE	PUBLIC CHARITY	ANNUAL APPEAL	100
HUDSON DOLLARS FOR SCHOLARS96 UNION TURNPIKE HUDSON,NY 12534	NONE	PUBLIC CHARITY	APPEAL	650
HUDSON LITTLE LEAGUEPO BOX 1171 HUDSON,NY 12534	NONE	PUBLIC CHARITY	ANNUAL APPEAL	400
HUDSON OPERA HOUSE327 WARREN STREET HUDSON,NY 12534	NONE	PUBLIC CHARITY	SPONSOR WINTER WALK	10,000
HUDSON RIVER SLOOP CLEARWATER INC724 WOLCOTT AVENUE BEACON,NY 12508	NONE	PUBLIC CHARITY	TACONIC EVENT	5,000
JUNIOR ACHIEVEMENT OF NORTHEASTERN NY8 STANLEY CIRCLE LATHAM,NY 12110	NONE	PUBLIC CHARITY	BOWL-A-THON	300
LIVINGSTON RECREATION ASSOCIATION20 SCHROEDER RD HUDSON,NY 12534	NONE	PUBLIC CHARITY	ANNUAL APPEAL	150
MAKE-A-WISH FOUNDATION3353 STATE ROUTE 9 HUDSON,NY 12534	NONE	PUBLIC CHARITY	HOLE SPONSOR	1,550
MARTIN HOUSE100 COLLEGE ROAD EAST PRINCETON,NJ 08540	NONE	PUBLIC CHARITY	GENERAL PURPOSE	1,200
OJAI RAPTOR CENTERPO BOX 182 OAK VIEW,CA 93022	NONE	PUBLIC CHARITY	ANNUAL APPEAL	500
RICHMOND HIGH SCHOOL360 HUB ETCHSON PARKWAY RICHMOND,IN 47974	NONE	PUBLIC CHARITY	CORY POWERS - TACONIC SCIENCE AWARD	750
RONALD MCDONALD HOUSE CHARITIES139 SOUTH LAKE AVE ALBANY,NY 12208	NONE	PUBLIC CHARITY	GENERAL PURPOSE	50

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
RSVPRIDE721 COLUMBIA ST HUDSON,NY 12534	NONE	PUBLIC CHARITY	ANNUAL APPEAL	200
SALVATION ARMYPO BOX 746 HUDSON,NY 12534	NONE	PUBLIC CHARITY	SOUP KITCHEN	300
SOUTHERN COLUMBIA LITTLE LEAGUEPO BOX 324 GERMANTOWN,NY 12626	NONE	PUBLIC CHARITY	TEAM SPONSOR AND FENCE SIGH	600
SOUTHERN COLUMBIA SOCCER LEAGUEPO BOX 292 GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	ANNUAL APPEAL	600
TECH VALLEY HIGH SCHOOL9 UNIVERSITY PLACE RENSSELAER,NY 12144	NONE	PUBLIC CHARITY	PROJECT APPEAL	750
THE COMMUNITY HOSPICE OF COLUMBIAGREENE47 LIBERTY ST CATSKILL,NY 12414	NONE	PUBLIC CHARITY	GALA APPEAL	500
THE CYSTIC FIBROSIS FOUNDATION20 COLUMBIA TURNPIKE HUDSON,NY 12534	NONE	PUBLIC CHARITY	GREAT STRIDES WALK 2010	300
THE OLANA PARTNERSHIPPO BOX 199 HUDSON,NY 12534	NONE	PUBLIC CHARITY	BUSINESS PARTNERSHHP	1,200
THE UNITED METHODIST CHURCH 180 HILLTOP RD GERMANTOWN,NY 12528	NONE	PUBLIC CHARITY	TOWN THANKSGIVING DINNER	200
TOWN OF GERMANTOWN23 UNDERHILL LANE GERMANTOWN,NY 12626	NONE	PUBLIC CHARITY	OKTOBERFEST	200
WOMANSPACE INC1212 STUYVESANT AVE TRENTON,NJ 08618	NONE	PUBLIC CHARITY	GENERAL PURPOSE	1,200
ALZHEIMER'S ASSOCIATION OF NORTHEASTERN NY4 PINE WEST PLAZA SUITE 405 ALBANY,NY 12205	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
AMERICAN DIABETES ASSOCIATIONWASHINGTON AVENUE EXTENSION ALBANY,NY 12205	NONE	PUBLIC CHARITY	GENERAL PURPOSE	200
AMERICAN RED CROSS-NORTHEASTERN NY33 EVERETT ROAD ALBANY,NY 12205	NONE	PUBLIC CHARITY	GENERAL PURPOSE	5,500
BIG-BROTHER BIG-SISTERS OF COLUMBIA & GREENE COUNTIES 1492 CENTRAL AVENUE ALBANY,NY 12205	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
CAPITAL DISTRICT GAY AND LESBIAN COMMUNITY COUNCIL 332 HUDSON AVE ALBANY,NY 12210	NONE	PUBLIC CHARITY	APPEAL	250
CATHOLIC CHARITIES OF COLUMBIA & GREENE COUNTIES 431 E ALLEN ST HUDSON,NY 12534	NONE	PUBLIC CHARITY	JOANNE GRAZIANO MATCH	200
CENTER FOR SPECTRUM SERVICES70 KUKUK LANE KINGSTON,NY 12401	NONE	PUBLIC CHARITY	GENERAL PURPOSE	300
CHILDREN'S MIRACLE NETWORK 205 WEST 700 SOUTH SALT LAKE CITY,UT 84101	NONE	PUBLIC CHARITY	JEFF ORTLOFF MATCH	25
COMMUNITY HOSPICE FOUNDATION295 VALLEY VIEW BLVD RENSSELAER,NY 12144	NONE	PUBLIC CHARITY	GENERAL PURPOSE	300
EPILEPSY FOUNDATION OF NORTHEASTER NY3 WASHINGTON SQUARE ALBANY,NY 12205	NONE	PUBLIC CHARITY	STROLL FOR EPILEPSY	500
FRIENDS OF HUDSON AREA LIBRARY ASSOCIATION400 STATE ST HUDSON,NY 12534	NONE	PUBLIC CHARITY	ELLA BRICE MATCHING DONATION	300
GARDEN ACRES SANTA CLAUS INC3701 ORANGE DR OXNARD,CA 93036	NONE	PUBLIC CHARITY	ANNUAL APPEAL	500
GERMANTOWN FOOD PANTRY20 CHURCH AVENUE PO BOX 115 GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	GENERAL PURPOSE	600
GERMANTOWN STUDENT EDUCATION FOUNDATIONPO BOX 533 GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	MATCHING CONTRIBUTIONS	730
GOLAY CENTER1007 E MAIN ST CAMBRIDGE CITY,IN 47327	NONE	PUBLIC CHARITY	ANNUAL APPEAL	500
GREENWOODS COMMUNITY CHURCH355 CLAYTON ROAD SHEFFIELD,MA 01257	NONE	PUBLIC CHARITY	JON HILLEGEIST MATCH	250
HAGERSTOWN LITTLE LEAGUE285 MILL STREET HAGERSTOWN,IN 47346	NONE	PUBLIC CHARITY	ANNUAL APPEAL	250
HEALTHCARE CONSORTIUM325 COLUMBIA ST HUDSON,NY 12534	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100
HEIFER INTERNATIONALP O BOX 727 LITTLE ROCK,AR 72203	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HUDSON CITY SCHOOL DISTRICT 215 HARRY HOWARD AVE HUDSON, NY 12534	NONE	PUBLIC CHARITY	SCIENCE SCHOLARSHIP AWARD	1,500
KINDERHOOK RUNNERS INC PO BOX 100 KINDERHOOK, NY 12106	NONE	PUBLIC CHARITY	OK 5K	150
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVE NEW YORK, NY 10065	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100
NORTHEAST CENTER FOR SPIRITUAL GROWTH INC 139 FORDHAM RD VALATIE, NY 12184	NONE	PUBLIC CHARITY	GENERAL PURPOSE	1,000
NORTHEASTERN FOOD BANK 965 ALBANY-SHAKER RD LATHAM, NY 12110	NONE	PUBLIC CHARITY	COLUMBIA COUNTY BACKPACK PROGRAM	918
OFFICE OF EDUCATION VENURA COUNTY 5189 VERDUGO WAY CAMARILLO, CA 93012	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
PREMIER CARES FOUNDATION 1 COLUMBIA ST STE 390 POUGHKEEPSIE, NY 12601	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
PROJECT LINUS 414 WOLVERLEY LANE ALLEN, TX 75002	NONE	PUBLIC CHARITY	GENERAL PURPOSE	50
REFORMED CHURCH IN AMERICA C/O CHRIS COK 2850 KALAMAZOO SE GRAND RAPIDS, MI 49560	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100
REFORMED CHURCH OF GERMANTOWN ENDOWMENT FUND 20 CHURCH AVENUE PO BOX 115 GERMANTOWN, NY 12526	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	NONE	PUBLIC CHARITY	GENERAL PURPOSE	585
ST PETER'S HOSPITAL FOUNDATION 319 S MANNING BLVD STE ALBANY, NY 12208	NONE	PUBLIC CHARITY	VALERIE VAUGHAN MATCH	25
THE RICHARD B FISHER CENTER FOR THE PERFORMING ARTS PO BOX 5000 ANNANDALEON HUDSON, NY 12504	NONE	PUBLIC CHARITY	APPEAL	250
TROY DAMIEN CENTER 392 2ND STREET TROY, NY 12180	NONE	PUBLIC CHARITY	GENERAL PURPOSE	325
US COMMITTEE FOR REFUGEE & IMMIGRATION 2231 CRYSTAL DRIVE SUITE 350 ARLINGTON, VA 22202	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
WALK 4 HEARING 463 PELHAM RD APT 4-2A NEW ROCHELLE, NY 10805	NONE	PUBLIC CHARITY	GENERAL PURPOSE	200
Total				92,498

TY 2011 Accounting Fees Schedule

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,259	0		0

**TY 2011 Investments Corporate
Stock Schedule**

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	140,427	140,427

TY 2011 Other Decreases Schedule

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	6,542

TY 2011 Other Expenses Schedule

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVERTISING	100	0		0
MISCELLANEOUS	125	0		0

TY 2011 Taxes Schedule

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NYS FILING FEE	50	0		0
FEDERAL TAX	0	0		0
FOREIGN TAX	43	0		0