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

2011

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 , 2011, and ending , 20

Name of foundation
FALCON FOUNDATION, INC.

Number and street (or P O box number if mail is not delivered to street address) Room/suite
400 WEST MAIN STREET

City or town, state, and ZIP code
WYCKOFF, NJ 07481

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

H Check type of organization
 Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ **22,806,639.**

J Accounting method
 Cash Accrual
 Other (specify) _____
 (Part I, column (d) must be on cash basis)

A Employer identification number
27-1262865

B Telephone number (see instructions)
(201) 847-9014

C If exemption application is pending, check here

D 1 Foreign organizations, check here
 2 Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

| 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 instructions)) | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|---|------------------------------------|---------------------------|-------------------------|---|
| Revenue | 1 Contributions, gifts, grants, etc., received (attach schedule) | | | | |
| | 2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B | | | | |
| | 3 Interest on savings and temporary cash investments | 687. | 637. | | ATCH 1 |
| | 4 Dividends and interest from securities | 346,765. | 346,765. | | ATCH 2 |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) | | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | -764,265. | | | |
| | b Gross sales price for all assets on line 6a | | | | |
| | 7 Capital gain net income (from Part IV, line 2) | | 0 | | |
| | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | | | | |
| | 10a Gross sales less returns and allowances | | | | |
| b Less Cost of goods sold | | | | | |
| c Gross profit or (loss) (attach schedule) | | | | | |
| 11 Other income (attach schedule) | -734,854. | -734,854. | | ATCH 3 | |
| 12 Total. Add lines 1 through 11 | -1,151,667. | -387,452. | | | |
| Operating and Administrative Expenses | 13 Compensation of officers, directors, trustees, etc. | 0 | | | |
| | 14 Other employee salaries and wages | | | | |
| | 15 Pension plans, employee benefits | | | | |
| | 16a Legal fees (attach schedule) | | | | |
| | b Accounting fees (attach schedule) | | | | |
| | c Other professional fees (attach schedule) | | | | |
| | 17 Interest. ATTACHMENT 4 | 58,907. | 58,907. | | |
| | 18 Taxes (attach schedule) (see instructions) ** | 37,012. | 2,307. | | 205. |
| | 19 Depreciation (attach schedule) and depletion | | | | |
| | 20 Occupancy | | | | |
| | 21 Travel, conferences, and meetings | | | | |
| | 22 Printing and publications | | | | |
| | 23 Other expenses (attach schedule) ATCH 6 | 94,851. | 94,711. | | 125. |
| | 24 Total operating and administrative expenses. Add lines 13 through 23 | 190,770. | 155,925. | | 330. |
| | 25 Contributions, gifts, grants paid | 849,050. | | | 849,050. |
| 26 Total expenses and disbursements. Add lines 24 and 25 | 1,039,820. | 155,925. | | 849,380. | |
| 27 Subtract line 26 from line 12 | | | | | |
| a Excess of revenue over expenses and disbursements | -2,191,487. | | | | |
| b Net investment income (if negative, enter -0-) | | 0 | | | |
| c Adjusted net income (if negative, enter -0-) | | | | | |

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| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | | | |
|-----------------------------|---|---|---|-------------|---------|
| | | Beginning of year (a) Book Value | End of year (b) Book Value (c) Fair Market Value | | |
| Assets | 1 | Cash - non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 57,834. | 24,127. | 24,127. |
| | 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 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 | | | |
| | 10 a | Investments - U.S. and state government obligations (attach schedule) | | | |
| | b | Investments - corporate stock (attach schedule) | | | |
| | 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) ATCH 7 | 26,543,006. | 22,782,512. | 22,782,512. | |
| 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) | 26,600,840. | 22,806,639. | 22,806,639. | |
| 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 | 0 |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31. | | | | |
| | 24 | Unrestricted | | | |
| | 25 | Temporarily restricted | | | |
| | 26 | Permanently restricted | | | |
| | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/> | | | | |
| | 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 | 26,600,840. | 22,806,639. | |
| | 30 | Total net assets or fund balances (see instructions) | 26,600,840. | 22,806,639. | |
| 31 | Total liabilities and net assets/fund balances (see instructions) | 26,600,840. | 22,806,639. | | |

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 | 26,600,840. |
| 2 | Enter amount from Part I, line 27a | 2 | -2,191,487. |
| 3 | Other increases not included in line 2 (itemize) | 3 | |
| 4 | Add lines 1, 2, and 3 | 4 | 24,409,353. |
| 5 | Decreases not included in line 2 (itemize) ATTACHMENT 8 | 5 | 1,602,714. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 22,806,639. |

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 PART IV SCHEDULE | | | | | | |
| 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 | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | | | | |
| (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 | (l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) | | | |
| a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| 2 Capital gain net income or (net capital loss) | | | | 2 | -764,265. | |
| 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 instructions) If (loss), enter -0- in Part I, line 8 | | | | | | |
| | | | | 3 | 0 | |

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 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 | 278,675. | 13,125,453. | 0.021232 |
| 2009 | | | |
| 2008 | | | |
| 2007 | | | |
| 2006 | | | |

| | | |
|--|---|-------------|
| 2 Total of line 1, column (d) | 2 | 0.021232 |
| 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 | 0.010616 |
| 4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5 | 4 | 22,578,248. |
| 5 Multiply line 4 by line 3 | 5 | 239,691. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | 6 | |
| 7 Add lines 5 and 6 | 7 | 239,691. |
| 8 Enter qualifying distributions from Part XII, line 4 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 | 8 | 849,380. |

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

| | | | |
|-----|--|-----|---|
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 | 1 | 0 |
| | Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions) | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b | | |
| c | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | 2 | |
| 3 | Add lines 1 and 2 | 3 | 0 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | 4 | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | 0 |
| 6 | Credits/Payments | | |
| a | 2011 estimated tax payments and 2010 overpayment credited to 2011 | 6 a | |
| b | Exempt foreign organizations - tax withheld at source | 6 b | |
| c | Tax paid with application for extension of time to file (Form 8868) | 6 c | |
| d | Backup withholding erroneously withheld | 6 d | |
| 7 | Total credits and payments Add lines 6a through 6d | 7 | 0 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached | 8 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | 0 |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | |
| 11 | Enter the amount of line 10 to be Credited to 2012 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/> | 11 | |

Part VII-A Statements Regarding Activities

| | Yes | No |
|-----|-----|----|
| 1 a | | X |
| 1 b | | X |
| 1 c | N/A | |
| 2 | | X |
| 3 | | X |
| 4 a | | X |
| 4 b | X | |
| 5 | | X |
| 6 | X | |
| 7 | X | |
| 8 a | | |
| 8 b | X | |
| 9 | | X |
| 10 | | X |

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 instructions) | | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) | | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | | X | |
| Website address \blacktriangleright N/A | | | | |
| 14 | The books are in care of \blacktriangleright JANICE BRENNAN Telephone no \blacktriangleright 201-847-9014 | | | |
| Located at \blacktriangleright 400 WEST MAIN STREET WYCKOFF, NJ ZIP + 4 \blacktriangleright 07481 | | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here \blacktriangleright <input type="checkbox"/> | | | |
| and enter the amount of tax-exempt interest received or accrued during the year \blacktriangleright 15 | | | | |
| 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? | Yes | No | X |
| See the instructions for exceptions and filing requirements for Form TD F 90-221 If "Yes," enter the name of the foreign country \blacktriangleright | | | | |

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 checked="" type="checkbox"/> Yes <input 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 instructions)? <input type="checkbox"/> | 1b | X |
| 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? <input type="checkbox"/> | 1c | X |
| 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 \blacktriangleright _____ | | | |
| 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 instructions) | 2b | N/A |
| c | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here \blacktriangleright _____ | | |
| 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? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011) | 3b | N/A |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | X |
| 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 | X |

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

5 a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(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 instructions) Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

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 instructions)? Yes No **5 b** N/A

Organizations relying on a current notice regarding disaster assistance check here

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? Yes No **N/A**

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No **6 b** X

If "Yes" to 6b, file Form 8870

7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **7 b** N/A

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 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 |
|----------------------|---|---|---|---------------------------------------|
| ATTACHMENT 9 | | 0 | 0 | 0 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

2 Compensation of five highest-paid employees (other than those included on line 1 - see 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 | | 0 | 0 | 0 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Total number of other employees paid over \$50,000 Yes No 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 instructions). If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | 0 |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| | | 0 |

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 N/A | |
| ----- | |
| 2 | |
| ----- | |
| 3 | |
| ----- | |
| 4 | |
| ----- | |

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

| | |
|--------|--|
| 1 NONE | |
| ----- | |
| 2 | |
| ----- | |

All other program-related investments See instructions

| | |
|--------|--|
| 3 NONE | |
| ----- | |

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see 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 | |
| b | Average of monthly cash balances | 1b | 139,567. |
| c | Fair market value of all other assets (see instructions) | 1c | 22,782,512. |
| d | Total (add lines 1a, b, and c) | 1d | 22,922,079. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) | 1e | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 22,922,079. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 343,831. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 22,578,248. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 1,128,912. |

Part XI Distributable Amount (see 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 | 1,128,912. |
| 2a | Tax on investment income for 2011 from Part VI, line 5 | 2a | |
| b | Income tax for 2011 (This does not include the tax from Part VI) | 2b | |
| c | Add lines 2a and 2b | 2c | |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 1,128,912. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 1,128,912. |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 1,128,912. |

Part XII Qualifying Distributions (see instructions)

| | | | |
|---|--|----|----------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| a | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 | 1a | 849,380. |
| b | Program-related investments - total from Part IX-B | 1b | |
| 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 | 849,380. |
| 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 instructions) | 5 | 0 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 849,380. |

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 instructions)

| | (a) Corpus | (b) Years prior to 2010 | (c) 2010 | (d) 2011 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2011 from Part XI, line 7 | | | | 1,128,912. |
| 2 Undistributed income, if any, as of the end of 2011 | | | | |
| a Enter amount for 2010 only | | | 75,389. | |
| b Total for prior years 20 09 , 20 08 , 20 07 | | | | |
| 3 Excess distributions carryover, if any, to 2011 | | | | |
| a From 2006 | | | | |
| b From 2007 | | | | |
| c From 2008 | | | | |
| d From 2009 | | | | |
| e From 2010 | | | | |
| f Total of lines 3a through e | | | | |
| 4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 849,380 | | | | |
| a Applied to 2010, but not more than line 2a | | | 75,389. | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | | | |
| c Treated as distributions out of corpus (Election required - see instructions) | | | | |
| d Applied to 2011 distributable amount | | | | 773,991. |
| e Remaining amount distributed out of corpus | | | | |
| 5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b Prior years' undistributed income Subtract line 4b from line 2b | | | | |
| 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 | | | | |
| d Subtract line 6c from line 6b Taxable amount - see instructions | | | | |
| e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions | | | | |
| f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012 | | | | 354,921. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) | | | | |
| 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) | | | | |
| 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a | | 0 | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2007 | | | | |
| b Excess from 2008 | | | | |
| c Excess from 2009 | | | | |
| d Excess from 2010 | | | | |
| e Excess from 2011 | | | | |

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

NOT APPLICABLE

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 foundation is a private operating foundation described in section

4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2011, (b) 2010, (c) 2009, (d) 2008, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-c (Alternative tests).

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see 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))

N/A

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

N/A

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

Check here [X] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds

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

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

N/A

c Any submission deadlines:

N/A

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

N/A

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 |
|---|--|--------------------------------------|-------------------------------------|----------|
| <p>a Paid during the year</p> <p>ATTACHMENT 10</p> | | | | |
| Total | | | | 849,050. |
| <p>b Approved for future payment</p> <p>NONE</p> | | | | |
| Total | | | | |

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Table with columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include: 1 Program service revenue (a-f), 2 Membership dues and assessments, 3 Interest on savings and temporary cash investments, 4 Dividends and interest from securities, 5 Net rental income or (loss) from real estate (a-b), 6 Net rental income or (loss) from personal property, 7 Other investment income, 8 Gain or (loss) from sales of assets other than inventory, 9 Net income or (loss) from special events, 10 Gross profit or (loss) from sales of inventory, 11 Other revenue (a-e), 12 Subtotal, 13 Total.

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

Table with 2 columns: Line No. (with a downward arrow), and 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) (See instructions).

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of:
- (1) Cash **1a(1)** Yes No X
- (2) Other assets **1a(2)** Yes No X
- b** Other transactions
- (1) Sales of assets to a noncharitable exempt organization **1b(1)** Yes No X
- (2) Purchases of assets from a noncharitable exempt organization **1b(2)** Yes No X
- (3) Rental of facilities, equipment, or other assets **1b(3)** Yes No X
- (4) Reimbursement arrangements **1b(4)** Yes No X
- (5) Loans or loan guarantees **1b(5)** Yes No X
- (6) Performance of services or membership or fundraising solicitations **1b(6)** Yes No X
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees **1c** Yes No X
- d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

| (a) Line no | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sharing arrangements |
|-------------|---------------------|---|--|
| | N/A | | N/A |
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2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| | | |
| | | |
| | | |
| | | |

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: *[Signature]* Date: 12/17/12 Title: President

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name: Angela M. Moore
 Preparer's signature: *[Signature]*
 Date: 09/04/2012
 Check if self-employed PTIN: P00244342
 Firm's name: ERNST & YOUNG U.S. LLP Firm's EIN: 34-6565596
 Firm's address: 111 MONUMENT CIRCLE, SUITE 2600 INDIANAPOLIS, IN 46204 Phone no: 317-681-7000

**FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

| Kind of Property | | Description | | | | P or D | Date acquired | Date sold |
|--|---------------------------------|---|--------------------|--------------------------|------------------------------|--------------|------------------|-----------|
| Gross sale price less expenses of sale | Depreciation allowed/ allowable | Cost or other basis | FMV as of 12/31/69 | Adj basis as of 12/31/69 | Excess of FMV over adj basis | | Gain or (loss) | |
| | | FALCON FAMILY, LP NET CAPITAL GAIN/LOSS PROPERTY TYPE: OTHER | | | | P | VAR -764,265. | VAR |
| TOTAL GAIN (LOSS) | | | | | | | <u>-764,265.</u> | |

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> |
|--|---|--------------------------------------|
| FALCON FAMILY, LP - INTEREST INCOME | 465. | 465. |
| FALCON FAMILY, LP - US GOVT INTEREST INC | 50. | |
| MERRILL LYNCH - INTEREST INCOME | 172. | 172. |
| TOTAL | <u>687.</u> | <u>637.</u> |

ATTACHMENT 2

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> |
|---|---|--------------------------------------|
| FALCON FAMILY, LP - INTEREST INCOME | 61,755. | 61,755. |
| FALCON FAMILY, LP - DIVIDEND INCOME | 370. | 370. |
| FALCON FAMILY, LP - ORDINARY TRADE OR BUSINESS DIVIDENDS | 284,640. | 284,640. |
| TOTAL | <u>346,765.</u> | <u>346,765.</u> |

ATTACHMENT 3

FORM 990PF, PART I - OTHER INCOME

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> |
|--|---|--------------------------------------|
| FALCON FAMILY, LP - ORDINARY BUS. INCOME | 130. | 130. |
| FALCON FAMILY, LP - NET RENTAL REAL ESTATE INCOME | 504. | 504. |
| FALCON FAMILY, LP - OTHER PORTFOLIO INC | 75. | 75. |
| FALCON FAMILY, LP - SECTION 1256 INCOME | 216,218. | 216,218. |
| FALCON FAMILY, LP - IRC SEC 988 INCOME (LOSS) | -903,643. | -903,643. |
| FALCON FAMILY, LP - OTHER ORDINARY INCOME (LOSS) | -48,138. | -48,138. |
| TOTALS | <u>-734,854.</u> | <u>-734,854.</u> |

ATTACHMENT 4

FORM 990PF, PART I - INTEREST EXPENSE

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> |
|--|---|--------------------------------------|
| FALCON FAMILY, LP - INVESTMENT INTEREST EXPENSE | 58,907. | 58,907. |
| TOTALS | <u>58,907.</u> | <u>58,907.</u> |

ATTACHMENT 5

FORM 990PF, PART I - TAXES

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> | <u>CHARITABLE PURPOSES</u> |
|---------------------|---|--------------------------------------|--------------------------------|
| FALCON FAMILY, LP - | | | |
| FOREIGN TAXES | 2,307. | 2,307. | |
| EXCISE TAXES | 34,500. | | |
| NJ TAXES | 205. | | 205. |
| TOTALS | <u>37,012.</u> | <u>2,307.</u> | <u>205.</u> |

ATTACHMENT 6

FORM 990PF, PART I - OTHER EXPENSES

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> | <u>CHARITABLE PURPOSES</u> |
|---|---|--------------------------------------|--------------------------------|
| FALCON FAMILY, LP - CASH CONTRIBUTIONS | 2. | 2. | |
| FALCON FAMILY, LP - NONDEDUCTIBLE EXPENSES | 15. | | |
| FALCON FAMILY, LP - 2% PORTFOLIO DEDUCTIONS | 9,933. | 9,933. | |
| FALCON FAMILY, LP - OTHER DED. | 2,786. | 2,786. | |
| FALCON FAMILY, LP - OTHER TRADE OR BUSINESS EXPENSES | 81,990. | 81,990. | |
| SUPPLIES | 125. | | 125. |
| TOTALS | <u>94,851.</u> | <u>94,711.</u> | <u>125.</u> |

ATTACHMENT 7

FORM 990PF, PART II - OTHER INVESTMENTS

| <u>DESCRIPTION</u> | <u>ENDING BOOK VALUE</u> | <u>ENDING FMV</u> |
|--|------------------------------|-----------------------|
| - INVESTMENT IN PARTNERSHIP - FALCON FAMILY, LP | 22,782,512. | 22,782,512. |
| TOTALS | <u>22,782,512.</u> | <u>22,782,512.</u> |

ATTACHMENT 8

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

| <u>DESCRIPTION</u> | <u>AMOUNT</u> |
|--|-------------------|
| -FALCON FAMILY, LP - UNREALIZED LOSS ON INVESTMENTS | 1,602,714. |
| TOTAL | <u>1,602,714.</u> |

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 9

| <u>NAME AND ADDRESS</u> | <u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u> | <u>COMPENSATION</u> | <u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u> | <u>EXPENSE ACCT AND OTHER ALLOWANCES</u> |
|---|---|---------------------|--|--|
| JAMES LEITNER 400 WEST MAIN STREET WYCKOFF, NJ 07481 | TRUSTEE, CHAIRMAN & PRESIDENT 1.00 | 0 | 0 | 0 |
| WALTER LEITNER 400 WEST MAIN STREET WYCKOFF, NJ 07481 | TRUSTEE 1.00 | 0 | 0 | 0 |
| JANICE BRENNAN 400 WEST MAIN STREET WYCKOFF, NJ 07481 | TRUSTEE, SECRETARY & TREASURER 1.00 | 0 | 0 | 0 |
| <u>GRAND TOTALS</u> | | <u>0</u> | <u>0</u> | <u>0</u> |

FORM 990EF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 10

| RECIPIENT NAME AND ADDRESS | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
|--|--|----------------------------------|---------|
| FORDHAM LAW SCHOOL 140 WEST 62ND STREET NEW YORK, NY 10023 | NONE 170 (B) (1) (A) (II) | ACADEMIC CONTRIBUTION | 251,000 |
| COLUMBIA UNIVERSITY 116TH STREET AND BROADWAY NEW YORK, NY 10027 | NONE 170 (B) (1) (A) (II) | ACADEMIC CONTRIBUTION | 75,000 |
| MONTCLAIR KIMBERLY ACADEMY 201 VALLEY ROAD MONTCLAIR, NJ 07042 | NONE 170 (B) (1) (A) (II) | ACADEMIC CONTRIBUTION | 100,000 |
| PRINCETON UNIVERSITY 701 CARNEGIE CENTER PRINCETON, NJ 08540 | NONE 170 (B) (1) (A) (II) | ACADEMIC CONTRIBUTION | 45,000 |
| YALE UNIVERSITY PO BOX 208239 NEW HAVEN, CT 06520 | NONE 170 (B) (1) (A) (II) | ACADEMIC CONTRIBUTION | 37,500 |
| AMERICAN RED CROSS 2025 E STREET NW WASHINGTON, DC 20006 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 1,000 |

FORM 990BFP, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 10 (CONT'D)

| <u>RECIPIENT NAME AND ADDRESS</u> | <u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u> | <u>PURPOSE OF GRANT OR CONTRIBUTION</u> | <u>AMOUNT</u> |
|--|---|---|---------------|
| HUMAN NEEDS FOOD PANTRY, INC. 9 LABEL STREET MONTCLAIR, NJ 07042 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 5,000 |
| MONTCLAIR PUBLIC LIBRARY FOUNDATION, INC. 50 SOUTH FULLERTON AVENUE MONTCLAIR, NJ 07042 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 5,000 |
| PARTNERS FOR WOMAN AND JUSTICE, INC 60 SOUTH FULLERTON AVE MONTCLAIR, NJ 07042 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 10,000 |
| AMERICAN SOCIETY OF INTERNATIONAL LAW 2223 MASSACHUSETTS AVE, NW WASHINGTON, DC 20008-2847 | NONE 509 (A) (2) | GENERAL CONTRIBUTION | 1,000. |
| MONTCLAIR ART MUSEUM 3 SOUTH MOUNTAIN AVENUE MONTCLAIR, NJ 07042 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 23,000 |
| HUMAN RIGHTS FIRST 333 SEVENTH AVENUE NEW YORK, NY 10001 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 20,000. |

FORM 990-BE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 10 (CONT'D)

| RECIPIENT NAME AND ADDRESS | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
|--|--|----------------------------------|----------|
| AMERICAN CANCER SOCIETY 250 WILLIAMS STREET ATLANTA, GA 30303 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 1,000. |
| AFRICAN PEOPLE & WILDLIFE FUND, INC PO BOX 624 BERNARDSVILLE, NJ 07924 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 100,000. |
| JAZZ FOUNDATION OF AMERICA 322 WEST 48TH STREET NEW YORK, NY 10036 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 10,000 |
| ST. LEON ARMENIAN CHURCH 12-61 SADDLE RIVER ROAD FAIR LAWN, NJ 07410 | NONE 170 (B) (1) (A) (I) | GENERAL CONTRIBUTION | 300. |
| HOMECORP USA 110 COLLEGE STREET ATHENS, AL 35611 | NONE 509 (A) (2) | GENERAL CONTRIBUTION | 10,000 |
| YOUNG ISRAEL OF SCARSDALE 1313 WEAVER ST SCARSDALE, NY 10583 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 500. |

FORM 990-BE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 10 (CONT'D)

| <u>RECIPIENT NAME AND ADDRESS</u> | <u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u> | <u>PURPOSE OF GRANT OR CONTRIBUTION</u> | <u>AMOUNT</u> |
|---|---|---|---------------|
| THE LEUKEMIA & LYMPHOMA SOCIETY, INC. 1311 MAMARONECK AVENUE WHITE PLAINS, NY 10605 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 250. |
| PARTNERS FOR HEALTH, INC 1 BAY AVENUE MONTCLAIR, NJ 07042 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 1,000 |
| BIG APPLE CIRCUS LTD ONE MAROTECH CENTER BROOKLYN, NY 11201 | NONE 509 (A) (2) | GENERAL CONTRIBUTION | 10,000. |
| INDEPENDENT GROUP HOME LIVING FOUNDATION INC. 221 NORTH SUNRISE SERVICE ROAD MANORVILLE, NY 11949 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 5,000 |
| PEDIATRIC CANCER RESEARCH FOUNDATION 9272 JERONIMO ROAD IRVINE, CA 92618 | NONE 509 (A) (2) | GENERAL CONTRIBUTION | 5,000 |
| CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW INC 1350 CONNECTICUT AVE WASHINGTON, DC 20036 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 22,000 |

FORM 990, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 10 (CONTD)

| RECIPIENT NAME AND ADDRESS | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
|---|--|----------------------------------|-----------------|
| THE JEWISH COMMUNITY CENTER IN MANHATTAN INC. 334 AMSTERDAM AVENUE NEW YORK, NY 10023 | NONE 509 (A) (2) | GENERAL CONTRIBUTION | 10,000. |
| YM-YWHA OF NORTH JERSEY 1 PIKE DRIVE WAYNE, NJ 07470 | NONE 509 (A) (2) | GENERAL CONTRIBUTION | 500 |
| AMERICAN CIVIL LIBERTIES UNION FOUNDATION 125 BROAD STREET NEW YORK, NY 10004 | NONE 170 (B) (1) (A) (VI) | GENERAL CONTRIBUTION | 100,000. |
| TOTAL CONTRIBUTIONS PAID | | | <u>849,050.</u> |

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

ATTACHMENT 11

| <u>DESCRIPTION</u> | <u>BUSINESS</u> | <u>AMOUNT</u> | <u>EXCLUSION</u> | <u>AMOUNT</u> | <u>RELATED OR EXEMPT</u> |
|--|-----------------|---------------|------------------|---------------|--------------------------|
| | <u>CODE</u> | | <u>CODE</u> | | <u>FUNCTION INCOME</u> |
| FALCON FAMILY, LP - ORDINARY BUSINESS INCOME | | | 01 | 130. | |
| FALCON FAMILY, LP - RENTAL REAL ESTATE INC. | | | 16 | 504. | |
| FALCON FAMILY, LP - OTHER PORTFOLIO INCOME | | | 14 | 75. | |
| FALCON FAMILY, LP - SECTION 1256 INCOME | | | 18 | 216,218. | |
| FALCON FAMILY, LP - IRC SECTION 988 INCOME | | | 18 | -903,643. | |
| FALCON FAMILY, LP - OTHER ORDINARY INCOME | | | 14 | -48,138. | |

TOTALS

-734,854.

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

| | | |
|---|--|--|
| Type or print <small>File by the due date for filing your return. See instructions.</small> | Name of exempt organization or other filer, see instructions | Employer identification number (EIN) or |
| | FALCON FOUNDATION, INC. | <input checked="" type="checkbox"/> 27-1262865 |
| | Number, street, and room or suite no. If a P O box, see instructions | Social security number (SSN) |
| | 400 WEST MAIN STREET | <input type="checkbox"/> |
| City, town or post office, state, and ZIP code. For a foreign address, see instructions | | |
| WYCKOFF, NJ 07481 | | |

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

| Application Is For | Return Code | Application Is For | Return Code |
|---|-------------|--------------------------|-------------|
| Form 990 | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 990-EZ | 01 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

• The books are in the care of ▶ JANICE BRENNAN

Telephone No ▶ 201 847-9014 FAX No. ▶ 201 847-0591

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶ calendar year 20 11 or

▶ tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If the tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period

| | | | |
|---|-----------|----|---|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | \$ | 0 |
| 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 allowed as a credit. | 3b | \$ | 0 |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | 0 |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)

| | | | | |
|--|--|--------------------------|--|------------|
| Type or print File by the due date for filing your return See instructions | Name of exempt organization or other filer, see instructions | | Enter filer's identifying number, see instructions | |
| | FALCON FOUNDATION, INC. | | <input checked="" type="checkbox"/> X | 27-1262865 |
| | Number, street, and room or suite no. If a P O box, see instructions | | Employer identification number (EIN) or Social security number (SSN) | |
| 400 WEST MAIN STREET | | <input type="checkbox"/> | | |
| City, town or post office, state, and ZIP code. For a foreign address, see instructions | | | | |
| WYCKOFF, NJ 07481 | | | | |

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

| Application Is For | Return Code | Application Is For | Return Code |
|---|-------------|--------------------|-------------|
| Form 990 | 01 | | |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 990-EZ | 01 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of JANICE BRENNAN
 Telephone No 201 847-9014 FAX No 201 847-0591
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for
- 4 I request an additional 3-month extension of time until 11/15 2012
- 5 For calendar year 2011, or other tax year beginning _____, 20____, and ending _____, 20____
- 6 If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return Change in accounting period
- 7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO COLLECT ALL THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

| | | |
|---|-------|---|
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions | 8a \$ | 0 |
| 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 allowed as a credit and any amount paid previously with Form 8868 | 8b \$ | 0 |
| c Balance Due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions | 8c \$ | 0 |

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature Angela M. Mann Title TAX SENIOR MANAGER Date 8/13/12