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Form **990-PF**

Department of the Treasury

Internal Révenue Service

Return of Private Foundation

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

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

OMB No. 1545-0052

2011

PO	r calen	dar year 2011 or tax year beginning		, 2011, and	enaing		, 20
N	me of fou	undation	·		A Employer	identification numbe	7
Th	e DS Fo	pundation				41-2115627	
N	ımber and	d street (or P.O. box number if mail is not delivered to street address)		Room/suite	B Telephone	number (see instructio	ns)
72	74 Fishe	er Island Dr				305-538-4488	3
Cı	ty or town	n, state, and ZIP code			C If exemp	tion application is pend	ling, check here ▶ □
Mi	ami Bea	nch, FL 33109				,	
G	Check	all that apply: Initial return Initial return	of a former	oublic chant	y D 1. Foreig	n organizations, check	here ▶ 🗍
		☐ Final return ☐ Amended r				n organizations meetin	·
		Address change Name char	nge			here and attach comp	
Н	Check	type of organization: Section 501(c)(3) exempt p	rivate founda	ition	E If onvate	foundation status was	terminated under
	Sectio	n 4947(a)(1) nonexempt charitable trust Other tax	able private	foundation		i07(b)(1)(A), check here	
ı		arket value of all assets at J Accounting method	: 🗸 Cash	☐ Accrual	F If the fou	ndation is in a 60-mont	th termination
		year (from Part II, col. (c),				ction 507(b)(1)(B), chec	
	line 16	53,356,965 (Part I, column (d) must be	on cash basis	.)			
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue	and (L) N	et investment	(a) Advisted not	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses p books		iucome	(c) Adjusted net income	for chantable purposes
	,	the amounts in column (a) (see Instructions))	200,0				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
•	2	Check ► ☐ if the foundation is not required to attach Sch B					
ટ ડો	3	Interest on savings and temporary cash investments		645	645		
1	4	Dividends and interest from securities	27	6,887	276,887	ļ	
9	5a	Gross rents					
-	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10					
enue	_b	Gross sales price for all assets on line 6a					
ွှစ်	7	Capital gain net income (from Part IV, line 2)					
ij L	8	Net short-term capital gain					
3	9	Income modifications					1
	10a	Gross sales less returns and allowances					
_}{	b	Less: Cost of goods sold					
(5)	1 1	Gross profit or (loss) (attach schedule)	21	4,155			
	12	Total Addines 压through 11		1,687	277,532	<u> </u>	
_	10	-Compensation of officers, directors, trustees, etc.	33	1,007	211,332		
Expenses	140	Other employee salaries and wages					
SLIS	163	Pension plans, employee penefits					
ğ	16a	Legal fees (attach scheoute)			····································		
_	1 ! D	Accounting fees (attach schedule) Statement 2		1,500			
<u>8</u>	Lc_	Accounting fees (attach schedule) Statument 2. Other professional fees (attach schedule)					
rat	17	Interest					
St	18	Taxes (attach schedule) (see instructions) Statement 2		8,000			
Ę	19	Depreciation (attach schedule) and depletion	-		,-		
듄	20	Occupancy					
¥	21	Travel, conferences, and meetings					
Operating and Administrative	22	Printing and publications					
<u>0</u>	23	Other expenses (attach schedule) Statement 2		20			
Ē	24	Total operating and administrative expenses.					
5	1	Add lines 13 through 23	<u> </u>	9,520			
ğ	25	Contributions, gifts, grants paid		1,149			1,291,149
	26	Total expenses and disbursements. Add lines 24 and 25	1,30	0,669			1,291,149
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	-70	8,982	 		
	b	Net investment income (if negative, enter -0-) .			277,532	ļ	
	l c	Adjusted net income (if negative, enter -0-)	Ì			1	1

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		EIIQ 0	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	421,557	73,815	73,815
	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			
1		disqualified persons (attach schedule) (see instructions)			
1	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
	b	Investments—corporate stock (attach schedule) Statement3	44,919,067	44,554,827	53,280,150
	С	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 Accounts Receivable	0	2 000	2 000
	16	Total assets (to be completed by all filers—see the		3,000	3,000
	10	instructions. Also, see page 1, item ()	45 240 624	44 624 640	F2 250 005
	47	······································	45,340,624	44,631,642	53,356,965
	17	Accounts payable and accrued expenses			!
Se	18	Grants payable			
Ě	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			,
_	22	Other liabilities (describe ►)			
_	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)			
Balances		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted			
ala	25	Temporarily restricted			
	26	Permanently restricted			
nd		Foundations that do not follow SFAS 117, check here ▶ ☑			
Ē		and complete lines 27 through 31.	ļ		
Net Assets or Fun	27	Capital stock, trust principal, or current funds	45,340,624	44.631.642	
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund	10,010,021	41,001,012	
Se	29	Retained earnings, accumulated income, endowment, or other funds			
AS	30	Total net assets or fund balances (see instructions)	45,340,624	44,631,642	
4	31 Total liabilities and net assets/fund balances		13,310,021	77,031,072	
Ž	٥.	instructions)	45,340,624	44 621 642	
Da	rt III	Analysis of Changes in Net Assets or Fund Balances	43,340,024	44,631,642	
		in net assets or fund balances at beginning of year—Part II, colui	mn (a) line 20 (must	agree with 1	
•		of year eported on prior year's return)		· 1	45.040.00
_		· · · · · · · · · · · · · · · · · · ·		├ ——	45,340,624
2		er amount from Part I, line 27a			-708,982
3		er increases not included in line 2 (itemize)			
4		lines 1, 2, and 3		4	44,631,642
5	Dec	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—I	<u> </u>	5	
6	Tota	u net assets or tund balances at end of year (line 4 minus line 5)—I	Part II, column (b), line	930 6	44,631,642

Part	(a) List and describe the l	LOSSES FOR Tax on Investm und(s) of property sold (e.g., real estate , or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation		Pate acquired o., day, yr.)	(d) Date sold (mo., day, yr.)
<u> 1a</u>								
b			<u></u>					ļ
С								
<u>d</u>								
е					L			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale			ain or (loss) (f) minus (g)
a				·····				
<u> </u>							 	
C		·						·
d					 			
е	Complete only for appets show	ing gain in column (h) and owned	by the	foundation	on 12/21/60			
_	Complete only for assets show		Dy tile				(f) Gains (Co	ol (h) gain minus ot less than -0-) or
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69			sofcol(i) (j), (fany			(from cot. (h))
а					······································		 	· · · · · · · · · · · · · · · · · · ·
b								· · · · · · · · · · · · · · · · · · ·
c		· · · · · · · · · · · · · · · · · · ·	· · · · · ·	-,,,				· · · · · · · · · · · · · · · · · · ·
d								
е								
2	Capital gain net income or (not canital incel (-		nter in Par -0- in Par		2		. 31 0 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
3	Net short-term capital gain	or (loss) as defined in sections				-		
•		line 8, column (c) (see instruc						
						3		
Part		r Section 4940(e) for Redu					me	
Was t If "Ye:	s," the foundation does not q	ection 4942 tax on the distribu ualify under section 4940(e). D	o not	complete	this part.			☐ Yes ☑ No
1		nt in each column for each yea	ar; see	the instru	ictions before m	aking	any entries	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	s	Net value of	(c) f nonchantable-use a	ssets		(d) stribution ratio divided by col. (c))
	2010	80	8,222		25,22	9,613		0.0320347
	2009	58	9,570		16,40	2,223		0.0359445
	2008		7,006		11,56			0.0585202
	2007	. 	4,100		13,93			0.0132148
	2006	3	0,132		8,77	6,718	· · · · · · · · · · · · · · · · · · ·	0.0034331
_								
2	Total of line 1, column (d)						2	0.1431473
3		r the 5-year base period—divi ition has been in existence if le				1		0.00000
	number of years the lounda	MOTTIAS DECITIFICACIONE II IC	,33 tria	in o years		.	3	0.0286295
4	Enter the net value of nonch	naritable-use assets for 2011 f	rom Pa	art X, line	5		4	58,827,743
5	Multiply line 4 by line 3 .						5	1,684,209
6	Enter 1% of net investment	income (1% of Part I, line 27b) .				6	2,775
7	Add lines 5 and 6						7	1,686,984
		s from Part XII, line 4						
8		er than line 7, check the box in					8 art using a	1,291,149 1% tax rate. See the

Part		nstru	Ctio	15)		
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			ر ـــ ــــا		
	here ▶ ☐ and enter 1% of Part I, line 27b					
C	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-)		5,551			
3	Add lines 1 and 2		5,551			
4	Subtitle A (Income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		5,551			
6	Credits/Payments: 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 11,940			İ		
a b	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 11,940 Exempt foreign organizations—tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) . 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	1	1,940			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10		6,389			
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ 6,389 Refunded ▶ 11					
	VII-A Statements Regarding Activities		Yes	Na		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	res	No ✓		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b		✓		
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			İ		
С	Did the foundation file Form 1120-POL for this year?	1c				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	-10		_		
_	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$					
θ	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		1		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		NA		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
•	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	V			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶					
	Michigan			Ì		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General]		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation					
9	U// /					
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			1		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9				
	names and addresses	10		1		
	,					

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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)	11		1	
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)	12		1	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1		
	Wahsita addrass				
14		5-538-	4488		
	Located at ▶ 7274 Fisher Island Dr, Miami Beach, FL ZIP+4 ▶	3310			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here				
_	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15	-			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No	
	over a bank, securities, or other financial account in a foreign country?	16		1	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			Ť	
	the foreign country ▶			Ì	
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? Yes No				
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1	
	disqualified person? . Statement 4			ļ	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No				
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes . No				
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			i	
	the benefit or use of a disqualified person)?				
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			i	
	foundation agreed to make a grant to or to employ the official for a period after			İ	
	termination of government service, if terminating within 90 days.)			ļ	
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)?	1b		-	
	Organizations relying on a current notice regarding disaster assistance check here			Ţ	
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		✓	N/
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)):				
а	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?			ĺ	
	If "Yes," list the years ▶ 20, 20, 20	İ		1	
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			1	
	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.				
	▶ 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?				
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			1	
	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		1	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1	
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			

_	c
Page	O

Part	VII-B	Statements Regarding Activities	s for W	hich Form	4720	May Be R	equire	ed (conti	nued)			
5a	During	the year did the foundation pay or incur a	iny amo	ount to:								٦
	(1) Can	ry on propaganda, or otherwise attempt t	o influe	nce legislatio	on (sect	ion 4945(e)))? .	Yes	✓ No	.		l
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,										1	
	directly or indirectly, any voter registration drive?										- 1	
	(3) Pro	vide a grant to an individual for travel, stu	idy, or d	other similar i	purpose	es?		Yes	✓ No	.		- [
	(4) Pro	vide a grant to an organization other thai	n a cha	ritable, etc.,	organiz	ation descr	nbed in	I		1		Ì
	sec	tion 509(a)(1), (2), or (3), or section 4940(c	d)(2)? (s	ee instructior	าร) .			Yes	✓ No			
		vide for any purpose other than religious				ary, or educ	cational			1 1	1	
	pur	poses, or for the prevention of cruelty to	children	or animals?				Yes	✓ No		1	-
b		inswer is "Yes" to 5a(1)-(5), did any of the							ribed in			
	Regulat	ions section 53.4945 or in a current notice	regardı	ng disaster as	ssistanc	e (see instr	uctions)?		5b	N/	A
	_	zations relying on a current notice regardi	-									
C		nswer is "Yes" to question 5a(4), does to				•					- 1	1
		e it maintained expenditure responsibility		_			• •	☐ Yes	☐ No			1
_		" attach the statement required by Regula										- 1
6a		foundation, during the year, receive any	tunds,	=	directly,	, to pay pre	emiums	_	C			l
	•	ersonal benefit contract?						_ ∐ Yes	_ ✓ No	-		لـ
þ		foundation, during the year, pay premiur	ns, aire	ctly or indire	ວແy, on	a personal	penetr	contract		6b		7
70		to 6b, file Form 8870. Ime during the tax year, was the foundation	a nartiri	to a probible	d tav ah	alter transce	rtion?	☐ Yes				
	-	" did the foundation receive any proceed		•						7b	N/	, <u> </u>
	VIII	Information About Officers, Direct										_\
		and Contractors		·			,					
1	List all	officers, directors, trustees, foundatio	n mana	gers and th	eir con	npensation	ı (see i	nstructio	ns).			_
		(a) Name and address		e, and average rs per week	(c) Cor	mpensation paid, enter		Contribution		(e) Exper	nse account	 t,
		tay manie and address	devoted to position		(11 1101	-0-)		employee benefit plans and deferred compensation		other a	llowances	_
Bhara	t Desai		Directo	Director		0		0				0
7274 F	isher Isl	and Dr., Miami Beach, FL 33109										_
	Sethi		Directo)r		0			0		,	0
		and Dr., Miami Beach, FL 33109	ļ				ļ				······································	_
Pia De			Directo	or		0			0			0
		and Dr., Miami Beach, FL 33109	ļ		⊢—		ļ			<u> </u>		_
	l Desai	and Dr. Miami Basel, El 22100	Directo	or		0	<u> </u>		0		(0
2		and Dr., Miami Beach, FL 33109 ensation of five highest-paid employe	es (oth	er than the	se inch	uded on li	no 1 –	ego inetr	uction	e) If no	no onto	_
~	"NONE		63 (0111	ei uian ino.	SO IIICK	aded on n	110 1	366 11136	ucuon:	<i>3).</i> 11 110	nie, ente	71
						T		(d) Contrib	utions to			-
	(a) Name a	and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v	week -	(c) Comper	nsation		benefit		nse account	t,
				devoted to p	osition			compen		Other a	iiowai icos	
None												_
								:				
				1								
						<u> </u>		ļ				_
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	·											
						 				<u> </u>		_
										ĺ		
Total	number	of other employees paid over \$50,000 .		<u> </u>		L		1	. ▶			—

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	3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
Total number of others receiving over \$50,000 for professional services			(c) Compensation
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. 1 None 2	Non		
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. 1 None 2			
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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 beneficianes served, conferences convened, research papers produced, etc. 1 None 2	ota	number of others receiving over \$50,000 for professional services	
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. 1 None 2			
The state of the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions All other program-related investments See instructions All other program-related investments See instructions All other program-related investments See instructions All other program-related investments See instructions	Pal	Summary of Direct Charitable Activities	
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 All other program-related investments See instructions 3			Expenses
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 All other program-related investments See instructions All other program-related investments See instructions 3	1	None	
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 All other program-related investments See instructions 3			
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 All other program-related investments See instructions 3			
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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 Amount All other program-related investments See instructions 3			
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 Amount All other program-related investments See instructions 3	2		
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 All other program-related investments See instructions 3	3		
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount None All other program-related investments See instructions 3	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount None All other program-related investments See instructions 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount None All other program-related investments See instructions 3			
1 None 2			
All other program-related investments See instructions 3			Amount
All other program-related investments See instructions 3	1	None	
All other program-related investments See instructions 3			
All other program-related investments See instructions 3	2		
3	_		
3			
	Al	other program-related investments. See instructions	
	3		

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foun	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	59,220,231
b	Average of monthly cash balances	1b	503,366
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	59,723,597
Ө	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	59,723,597
4	Cash deemed held for charitable activities. Enter 1 $^{1}/_{2}$ % of line 3 (for greater amount, see		
	ınstructions)	4	895,854
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	58,827,743
6	Minimum investment return. Enter 5% of line 5	6	2,941,387
Part			
	foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	2,941,387
2 a	Tax on investment income for 2011 from Part VI, line 5 2a 5,551		
b	Income tax for 2011. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	5,551
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,935,836
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,935,836
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	2,935,836
Dort		·	
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,291,149
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,291,149
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		-1
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,291,149
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	9 *** 10410	roundation

reir	XIII . Undistributed Income (see instruction	ns) (a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7				2,935,836
2	Undistributed income, if any, as of the end of 2011:				
а	Enter amount for 2010 only		<u> </u>	1,242,495	
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2011:		}		
a	From 2006			1	
b	From 2007				
c d	From 2008				1
e	From 2009				
f	Total of lines 3a through e		1		I
4	Qualifying distributions for 2011 from Part XII,				
-	line 4: ▶ \$ 1,291,149				,
а	Applied to 2010, but not more than line 2a .			1,242,495	1
b					1
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)				Į.
d	Applied to 2011 distributable amount				48,654
е	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).)		1		t b
6	Enter the net total of each column as indicated below:	7 7 7			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				· · · · · · · · · · · · · · · · · · ·
b					
	line 4b from line 2b		ļ		·
С	, ,				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d		····			
	amount - see instructions	·			
θ					
	4a from line 2a. Taxable amount—see linstructions				
f	Undistributed income for 2011. Subtract lines				
•	4d and 5 from line 1. This amount must be		1		
	distributed in 2012				2,887,182
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				1
	170(b)(1)(F) or 4942(g)(3) (see instructions) .				
8	Excess distributions carryover from 2006 not			<u>-</u>	
	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2012.	· —			
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а					
b					
C					
d	Excess from 2010 Excess from 2011			ļ	1

Part XV Supplementary Information (cont	inued)			
3 Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	1
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
AS PER ATTACHED STATEMENT 5				1,291,149
		<u> </u>		
Total	<u> </u>		<u> ▶ 3</u>	a 1,291,149
b Approved for future payment				
Total				h

Ente	r gros	ss amounts unless otherwise indicated.	Unrelated bu	Isiness income	Excluded by secti	on 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt function income
1	Prog	ram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	a						
	b _						
	c _						
	d _						
	e _						
	T =			<u> </u>	ļ		
_	_	Fees and contracts from government agencies			ļ		
_		nbership dues and assessments			ļ		
3		est on savings and temporary cash investments			14	645	
4		dends and interest from securities			14	276,887	
5		rental income or (loss) from real estate: Debt-financed property			-		
		Not debt-financed property					
ß		rental income or (loss) from personal property			 		
7		er investment income			-		
8		or (loss) from sales of assets other than inventory			 		
9		income or (loss) from special events	· · · · · · · · · · · · · · · · · · ·	·			
10		ss profit or (loss) from sales of inventory				 ,	
		er revenue: a			† ·		
	_						· · · · · · · · · · · · · · · · · · ·
				•			
						· · · · · · · · · · · · · · · · · · ·	
	e ¯						
	~	total. Add columns (b), (d), and (e)				277 522	
12	Subt	iolai. Add columns (b), (d), and (e)			i	277,532	
13	Tota	i. Add line 12, columns (b), (d), and (e)			<u> </u>		277,532
13 (See	Tota work	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.)				277,532
13 (See Pa	Tota work rt XV	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa	Tota work rt XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
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13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
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13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
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13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
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13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	
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13 (See Pa	Tota work rt XV e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes	13	

Part	XVII		n Regarding Trans ganizations	fers To and Transact	ions and R	elationshi	ips With	Noncha	ritabl	e	<u></u>
1	ın sed			ngage in any of the follow ection 501(c)(3) organizati						Yes	No
а	-		porting foundation to	a noncharitable exempt o	rganization e	of:					
•		•	=		-				1a(1)		
		ther assets							1a(2)		7
b	• •	r transactions:							10(2)		<u> </u>
			a nonchantable even	npt organization					1b(1)		- <u>-</u> -
				ole exempt organization				• • •	1b(2)		1
				assets					1b(2)		<u> </u>
									1b(4)		
	- ·								1b(5)		-
		•		p or fundraising solicitation					1b(6)		-
_				s, other assets, or paid e					-		-
c d		-	· ·	" complete the following					1c		
u				es given by the reporting							
				ment, show in column (d)							
(a) Line		b) Amount involved		intable exempt organization		otion of transfe					
					1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,				
	$\neg +$								-		
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	-+				·· † ····						
2a	Is the	foundation dire	ectly or indirectly affil	liated with, or related to,	one or more	e tax-exem	nt organi	zations			
				her than section 501(c)(3)] Yes		Nο
b								_			
		(a) Name of organ	zation	(b) Type of organization	on	- · · · · · ·	(c) Descript	tion of relation	nship		
									,		
		er penalties of perjury, I	declare that I have examined	this return, including accompanying	g schedules and	statements, and	to the best	of my knowled	ige and I	oelief, it	ıs true,
Sign	Corre	, 1/	. // /// -	taxpayer) is based on all information	on of which prepa	rer nas any kno	wieage.	May the IF	RS discu	ss this	retum
Here		\	ya cla	Oct. 2 12 Dir	ector			with the p	reparer	shown	below
		ature of officer or tru		Date Title				(see instruc	-aona)r [162[7,40
Paid		Print/Type preparer	s name	Preparer's signature		Date	Chr	eck f	NIT		
Prep	arer					<u> </u>		-employed			
Use		Firm's name ▶					Firm's EIN	>			
	y	Firm's address ▶		· · · · · · · · · · · · · · · · · · ·			Phone no.				

The DS Foundation EIN: 41-2115627

Form 990-PF Year 2011

Part I, Line 11, column a, Other Income

Gain on Stock Donated (Excess of FMV of stock donated over book value)

\$ 314,155

The DS Foundation EIN: 41-2115627

Form 990-PF Year 2011

Part I, Line 16b, Accounting Fees

Tax Return Review & Consultation \$ 1,500

Part I, Line 18, Taxes

Federal Tax Payments \$ 8,000

Part I, Line 23, Other Expenses

State of MI Annual Fee \$ 20

The DS Foundation EIN: 41-2115627

Form 990-PF Year 2011

Part II Line 10b, Investments Corporate Stocks

Stock	Book Value	Fair m	arket value
1,139,195 Syntel Inc Shares	\$ 44,554,827	\$	53,280,150
Total	\$ 44,554,827	\$	53,280,150

The DS Foundation EIN: 41-2115627 Form 990-PF Year 2011

Part XV. Supplementary Information

3. Grant and Contribution Paid During the Year or approved for future payment

Recipient	Relationship to mgr / contributor	Relationship to mgr Foundation status of / / / / / / / / / / / / / / / / / /	Purpose of grant or contribution	Amount	ıt
a. Paid during the year					
Cash Contributions					
1) Harvard University 124 Mount Auburn Street Cambridge, MA 02138-5795	A/N	501 (c) (3) 509 (a) (1) 170 (b) (1) (A) (ii)	Educational Purpose	w	200,000
2) Capital IIT Alumini Association Inc 216 East 45th Street New York, New York 10017	N/A	501 (c) (3) 509 (a) (1) 170 (b) (1) (A) (ii)	Educational Purpose	ν	25,000
3) The Hindu Community Outreach 45-57 Bowne Street Flushing, New York 11355-2202	N/A	501 (c) (3)	Educational, Social & Religious Purpose	w	10,001
4) Miami Childrens Hospitals Foundation Inc 3000 SW 62nd Ave Miami, FL 33155-3605	V/N	501 (c) (3) 509 (a) (1) 170 (b) (1) (A) (ii)	Healthcare Services Purpose	ν	10,000
5) The Commonwealth Institute Inc. 16850-112 Collins Ave., Suite 339 Sunny Isles Beach, FL 33160	N/A	501 (c) (3) 509 (a) (1) 170 (b) (1) (A) (ii)	Helping Woman Entreprenuership	₩.	10,000
6) Detroit Country Day School 22305 West Thirteen Mile Road Beverly Hills, MI 48025-4435	N/A	501 (c) (3) 170 (b) (1) (A) (ii)	Educational Purpose	σ	8,252
7) IIT Bombay Heritage Fund 21710 Stevens Crk Blvd, Ste 115 Cupertino, CA 95014	A/N	170 (b) (1) (A) (vi)	Educational Purpose	ν	7,000
8) Harvard University 124 Mount Auburn Street Cambridge, MA 02138-5795	N/A	501 (c) (3) 509 (a) (1) 170 (b) (1) (A) (ii)	Educational Purpose	•	25,000
9) International Association of Yoga Therapists PO Box 12890 Prescott, AZ 86304	N/A	501 (c) (3) 170(b)(1)(A)(vi)	Research and education in Yoga	₩	5,000

EIN: 41-2115627 Form 990-PF Year 2011

Part XV. Supplementary Information

^{3.} Grant and Contribution Paid During the Year or approved for future payment

Recipient	Relationship to mgr / contributor	Relationship to mgr Foundation status of /contributor recipient	Purpose of grant or contribution	Amount	int
a. Paid during the year					
10) South Asian Youth Action (SAYA) 55-05 Seabury Street Elmhurst. NY 11373	N/A	501 (c) (3) 509 (a) (1) 170 (b) (1) (A) (ii)	Youth Development Programs	۰	2,000
11) Museum of Contemporary Arts 770 N.E. 125 Street North Miami, FL 33161	N/A	501 (c) (3) 509(a)(1) 170(b)(1)(A)(vi)	Preserving & Making Accessible Contemporary Arts	₩	2,000
12) Cammillus House Inc 336 NW 5th Street Miami, FL 33128-1616	N/A	501 (c) (3) GEN - 0928	Healthcare, Housing, Job Training, Soc. Serv to Homeless & Indigent	⋄	2,000
13) Free Yoga Foundation PO Box 25673 West Bloomfield, MI 48325	A/A	501 (c) (3) 170(b)(1)(A)(vi)	Research and education in Yoga	\$	251
14) Sparrow Foundation 1215 E. Michigan Avenue Lansing, MI 48912	N/A	501 (c) (3) 509 (a) (3)	Health and Education	ℴ	250
Non-Cash Contributions					
1) Harvard University 124 Mount Auburn Street Cambridge, MA 02138-5795 14,500 shs Syntel, Inc.	N/A	501 (c) (3) 509 (a) (1) 170 (b) (1) (A) (ii)	Educational Purpose	w	678.395
TOTAL				\$	1,291,149

Form 8868

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

• If you	are filing for an Automatic 3-Month Extension are filing for an Additional (Not Automatic) complete Part II unless you have already be	3-Month Exten	sion, complete only P	art II (on page 2 of	this form).	_
Electro a corpo 8868 to Return	pric filing (e-file). You can electronically file foration required to file Form 990-T), or an add request an extension of time to file any of for Transfers Associated With Certain Perstions). For more details on the electronic filing	Form 8868 if your litional (not auto the forms listed sonal Benefit C	ou need a 3-month autor omatic) 3-month extens d in Part I or Part II wit Contracts, which must	matic extension of ion of time. You ca h the exception of be sent to the IR	time to file (6 r an electronicall Form 8870, li RS in paper fo	months for y file Form nformation ormat (see
Part						ipionis.
	poration required to file Form 990-T and re				s box and co	mplete
	nly					
All other	er corporations (including 1120-C filers), partr	erships, REMIC	Os, and trusts must use	Form 7004 to requ	iest an extensi	on of time
to file ıı	ncome tax returns.					
	Name of the state		<u>Er</u>	ter filer's identifying		
Type o	Name of exempt organization or other filer, s	see instructions.		Employer identifi	•	EIN) or
•	The DS Foundation 41-2115627 Number, street, and room or suite no. If a P O. box, see instructions Social security number (SSN)					
File by th due date	θ	o. box, coo mon	30		u	
due date for tiling your return See City, town or post office, state, and ZIP code. For a foreign address, see instructions						
instructio						
Enter th	ne Return code for the return that this applicat	tion is for (file a	separate application for	r each return) .		0 4
Applic	eation	Return	Application			Return
Is For	·	Code	Is For			Code
Form		01	Form 990-T (corporati	on)		07
	990-BL	02	Form 1041-A	·		80
	990-EZ	01	Form 4720	_ 		09
	990-PF	04 05	Form 5227 Form 6069			10 11
	990-T (sec. 401(a) or 408(a) trust) 990-T (trust other than above)	06	Form 8870			12
1 01111	990-1 (trust other than above)		11011110070		<u></u>	12
Telep If the If this for the	ooks are in the care of Neerja Sethi whone No. organization does not have an office or place as for a Group Return, enter the organization' whole group, check this box ith the names and EINs of all members the ex I request an automatic 3-month (6 months for	of business in s four digit Gro]. If it is for par tension is for.	the United States, chec up Exemption Number (t of the group, check th required to file Form 990	GEN) us box O-T) extension of tir		is ach
	until	exempt organi	zation return for the org	anization named ab	oove. The exte	nsion Is
2	If the tax year entered in line 1 is for less than Change in accounting period	12 months, ch		turn	, 20 urn	
	If this application is for Form 990-BL, 990-PF nonrefundable credits. See instructions.				3a \$	5,550
b	If this application is for Form 990-PF, 990				01- 6	44.040
^	estimated tax payments made. Include any p Balance due. Subtract line 3b from line 3a. In				3b \$	11,940
	EFTPS (Electronic Federal Tax Payment Syst	em). See instru	ctions.		3c \$	0
Caution	1. If you are going to make an electronic fund withd	rawal with this Fo	orm 8868, see Form 8453-E	O and Form 8879-EC	of for payment in	structions.

Form 8868 (Rev	1-2012)					Page 2
• If you are t	iling for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Par	t II and check this	s box	
Note. Only	complete Part II if you have already been gran	nted an auto	omatic 3-month extension			
If you are f	iling for an Automatic 3-Month Extension,	complete c	only Part I (on page 1).			
Part II	Additional (Not Automatic) 3-Month E	xtension				
			Ente			ber, see instructions
Type or print	Name of exempt organization or other filer, see in	nstructions.		Employer identific	cation	number (EIN) or
File by the due date for	Number, street, and room or suite no. If a P.O be	ox, see instru	uctions.	Social security nu	ımber	(SSN)
filing your retum See instructions.	City, town or post office, state, and ZIP code. Fo	r a foreign ac	ddress, see instructions			
Enter the Re	turn code for the return that this application	is for (file a	separate application for e	each return) .		
Application	1	Return	Application			Return
is For		Code	Is For			Code
Form 990		01				
Form 990-E	3L	02	Form 1041-A			08
Form 990-8	Z	01	Form 4720			09
Form 990-F	PF	04	Form 5227			10
Form 990-1	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-1	(trust other than above)	06	Form 8870			12
STOP! Do no	ot complete Part II if you were not already gra	anted an au	ıtomatic 3-month extensi	on on a previousl	y file	d Form 8868.
• If this is fo for the whole list with the 4 I request for the list with the list wi	are in the care of No. ► nization does not have an office or place of b r a Group Return, enter the organization's for e group, check this box ► If names and EINs of all members the extension uest an additional 3-month extension of time ralendar year , or other tax year beginning tax year entered in line 5 is for less than 12 in nange in accounting period e in detail why you need the extension	ur digit Groi it is for par in is for.	up Exemption Number (G t of the group, check this	EN)	> [If this is] and attach a
nonr	s application is for Form 990-BL, 990-PF, 99 efundable credits. See instructions.				8a	\$
estin	is application is for Form 990-PF, 990-T, nated tax payments made. Include any pric unt paid previously with Form 8868.	4720, or 6 or year ove	6069, enter any refundat erpayment allowed as a	ole credits and credit and any	8b	\$
c Bala	nce due. Subtract line 8b from line 8a. Include y tronic Federal Tax Payment System). See instruc		t with this form, if required,	by using EFTPS	8c	\$
Under penali knowledge al Signature ►	Signature and Verifications of perjury, I declare that I have examined the had belief, it is true, correct, and complete, and that	his form, ınc	luding accompanying sched zed to prepare this form.	dules and statemer	te ►	orm 8868 (Rev 1-2012)

•						
•						
form 8868 (F	Rev 1-2012)			•		Page 2
	re filing for an Additional (Not Automatic) 3-Mo					
ote. Onl	ly complete Part II if you have already been grar	ited an aut	omatic 3-month extens	ion on a previous	sly filed Form 88	68.
If you ar	re filing for an Automatic 3-Month Extension, o					
Part II	Additional (Not Automatic) 3-Month E	xtension	of Time. Only file the	original (no co	pies needed).	
			Er	nter filer's identify	ing number, see i	instructions
ype or	Name of exempt organization or other filer, see in	structions		Employer ider	itification number	(EIN) or
rint	The DS Foundation				41-2115627	
o bu tho	Number, street, and room or suite no If a P.O. bo	ox, see instri	uctions	Social security	y number (SSN)	
File by the due date for 7274 Fisher Island Dr						
ng your	City, town or post office, state, and ZIP code. For	r a foreign a	ddress, see instructions.			
return See instructions Miarni Beach , FL 33109						
nter the	Return code for the return that this application i	s for (file a	separate application to	r each return)		0 4
Applicat	tion	Return	Application			Return
s For		Code	Is For			Code
orm 990	0	01	12 H 4 St. 1	36 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· Angel	32 7 44
orm 990		02	Form 1041-A			08
orm 990		01	Form 4720	······································		09
orm 990		04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	0-T (trust other than above)	06	Form 8870			12
		L	1			·
TOP! Do	not complete Part II if you were not already gra	anted an au	stomatic 3-month exter	ision on a previo	usly filed Form 8	868.
The boo	oks are in the care of ► Neerja Sethi					
•	one No. ► 305 347 7273		No. ►			
	ganization does not have an office or place of b					. ▶ 🗆
	for a Group Return, enter the organization's for					
r the wh	nole group, check this box \blacktriangleright 🗍 . If	it is for par	t of the group, check th	is box	. ▶ □ and att	ach a
t with th	ne names and EINs of all members the extension	n is for.	·			
4 1 re	equest an additional 3-month extension of time or calendar year <u>2011</u> , or other tax year beginnii	until	11/15/	, 20	12 .	
5 Fo	or calendar year 2011, or other tax year beginnii	ng	, 20	, and ending		, 20
6 If t	the tax year entered in line 5 is for less than 12 r	nonths, ch	eck reason: 🔲 Initial	return 🔲 Fir	nal return	
	Change in accounting period	, (0 -	^		
	ate in detail why you need the extension	eing	Kenewas 1	by the co	rundants	
7 Sta			1	1		
7 Sta	aho Need Some add	Donay	Intermetion.	0		
7 Sta	ate in detail why you need the extension As Need Some all	men.	Intermotion.			
8a If t	this application is for Form 990-BL, 990-PF, 990					5550

Signature and Verification must be completed for Part II only.

estimated tax payments made. Include any prior year overpayment allowed as a credit and any

c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS

Under penalties of perior, 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 ▶

amount paid previously with Form 8868.

(Electronic Federal Tax Payment System). See instructions.

Title ➤ Director

Date 6 7 20 12 Form 8868 (Rev 1-2012)

86 \$

8c \$

11940

0

(Rev January 2012)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

HILCHIO IN	evenue Service					
• If you	are filing for an Automatic 3-Month Extension, are filing for an Additional (Not Automatic) 3-M	onth Exten	sion, complete only Pa	art II (on page 2 of	this form)	▶ 🗓
	complete Part II unless you have already been	•				
a corpo 8868 to Return	onic filing (e-file). You can electronically file Form oration required to file Form 990-T), or an addition or request an extension of time to file any of the for Transfers Associated With Certain Personations). For more details on the electronic filing of the	nal (not auto forms listed al Benefit C	omatic) 3-month extensi d in Part I or Part II with Contracts, which must	on of time. You ca In the exception of be sent to the IR	in electron Form 887 IS in pape	ically file Form '0, Information er format (see
Part	Automatic 3-Month Extension of Tim					
Part I o	oration required to file Form 990-T and requently					▶ 🛚
All othe	er corporations (including 1120-C filers), partners	hips, REMIC	Ss, and trusts must use	Form 7004 to requ	iest an ext	ension of time
to file ii	ncome tax returns.					
			En	ter filer's identifying		
Type o	r Name of exempt organization or other filer, see	instructions		Employer identifi	cation num	ber (EIN) or
File by th	Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN)					J)
filing you return Se instruction	ee City, town or post office, didd, and all occurrence	or a foreign a	ddress, see instructions			
Enter th	ne Return code for the return that this application	is for (file a	separate application for	each return) .		
Applic Is For		Return Code	Application Is For			Return Code
Form	990	01	Form 990-T (corporati	on)		07
Form	990-BL	02	Form 1041-A			08
Form	990-EZ	01	Form 4720			09
	990-PF	04	Form 5227			10
	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 b	pooks are in the care of ▶					
	ohone No. ►		AX No. ► the United States, chec	k this box		▶□
	is for a Group Return, enter the organization's fo					f this is
for the	whole group, check this box ▶ □ If	f it is for par	t of the group, check th	s box	▶ 🗍 and	l attach
a list w	ith the names and EINs of all members the extensi	sion is for.				
1	I request an automatic 3-month (6 months for a c	•		•		
	until, 20, to file the exe	empt organi	zation return for the orga	anization named at	ove. The	extension is
	for the organization's return for:					
	▶ ☐ calendar year 20 or					
	► ☐ tax year beginning	, 20	, and ending		, 2	20 .
2	★ tax year beginning If the tax year entered in line 1 is for less than 12	months, ch	eck reason: Initial re	turn 🔲 Fınal reti	urn	
	Change in accounting period					
3a	If this application is for Form 990-BL, 990-PF, 99 nonrefundable credits. See instructions.	90-T, 4720,	or 6069, enter the tenta	tive tax, less any	3a \$	
b	If this application is for Form 990-PF, 990-T, estimated tax payments made. Include any prior				3b \$	
С	Balance due. Subtract line 3b from line 3a. Inclu EFTPS (Electronic Federal Tax Payment System)	de your pay	ment with this form, if re		3c \$	0