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# 990-PF

OMB No 1545-0052

Departn	nent of	the	Treasury
Internal	Reven	IIP S	eruce .

SCANNED SEP 1

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

Fo	or cal	lendar year 2011 or tax year beginning		03	3/01 , <b>2011, and en</b> d	ding		02/29, 2012
		of foundation					A Employer identif	ication number
	R.H	.M. FOUNDATION, INC.			_		13-609086	65
	Numb	er and street (or P.O. box number if mail is not delive	red to stre	et address)	Room/s	uite	B Telephone numb	per (see instructions)
	DON	ALD HAMBURG, ESQ GOLENBOCK E	ISEMA	N ASSOR B	ill & PESKOE LLP		(	) –
	437	MADISON AVENUE 40TH FLOOR					1	
_	City o	r town, state, and ZIP code						
	•	· ,					C If exemption applic	ation is
	NEW	YORK, NY 10022					pending, check her	е
_		ck all that apply   Initial return		Initial return	of a former public cha	arıtv	D 1 Foreign organiza	
Ī		Final return		Amended re	•		2 Foreign organiza	
		Address change	<u> </u>	Name chang			85% test check	here and attach
Н	Che	ck type of organization X Section 501(	c)(3) ex				,	
Ϊ		ection 4947(a)(1) nonexempt charitable trust			ivate foundation			on status was terminated b)(1)(A) check here
$^{\perp}$				nethod X C			i	
٠			ther (sp					s in a 60-month termination  (1)(B) check here
	16)	· · · · · · · · · · · · · · · · · · ·		(d) must be on	cash basis )			, , , , , , , , , , , , , , , , , , ,
T:		Analysis of Revenue and Expenses (The		<u>`-</u> :	· · · · · · · · · · · · · · · · · · ·	1	<del></del>	(d) Disbursements
		total of amounts in columns (b), (c), and (d)		evenue and enses per	(b) Net investment	(	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions) )	٠٨٠	books	income		income	purposes (cash basis only)
_	1		_	32,348.		$\vdash$		(Casti basis offiy)
	2	Contributions, giffs, grants, etc., received (attach schedule) .  If the foundation is not required to attach Sch. R.		<u> </u>		<del> </del>		†·
	3	attach och b	<del></del> -			f		
		Interest on savings and temporary cash investments		11,068.	11,068.			ATCH 1
	4	Dividends and interest from securities				<b>†</b>		111011 1
		Gross rents				+	·	······································
		Net rental income or (loss)		<u>-7</u>		$\vdash$	<del></del> -	<del> </del>
Revenue		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 51.			<del></del>			
ver	_	assets on line 6a		<del></del>	<del> </del>	<del> </del>	<del></del>	<del> </del>
Re	_	Capital gain net income (from Part IV, line 2) .			<del></del>		<del></del>	<del> </del>
	8	Net short-term capital gain		<del></del>		1		<del> </del>
	9 10 a	Income modifications - · · · · · · · · · · · · · · · · · ·	}			-	<del></del>	<del> </del>
		and allowances · · · ·	<del></del>			+		<del>                                     </del>
	l	Less Cost of goods sold . [				1		
		Other income (attach schedule)				1		
	12	Total Add lines 1 through 11	<del></del>	43,409.	11,068.			<del> </del>
_					<del></del>	<del>                                     </del>		<del> </del>
	13	Compensation of officers, or constitution, etc				<del> </del>		
es	15	Pension plans, employee benefits 7	<del> </del>					<u> </u>
Sue	16a	Legal fees (attach schedule)			<del></del>	<b>†</b>		
ğ		Accounting fees (attach schedule) ATCH 2	<u> </u>	6,407.				6,407
e	l							<del> </del>
Operating and Administrative Expenses	17	Other professional fees (etaon schedule)	<b> </b>			1		
stra	18		}			1		<del></del>
Ë	19	Taxes (attach schedule) (see instructions)				T		<del>                                     </del>
튜	20	Depreciation (attach schedule) and depletion.			<del></del>	<del>                                     </del>		
Ă	21	Occupancy	<u> </u>			<del>                                     </del>		
and	22	•				<del> </del>	<del></del>	
g	23	Printing and publications	<del></del>	987.	762.			225.
atir	24					†		<del>                                     </del>
ers	24	Total operating and administrative expenses.	J	7,394.	762.	.]		6,632.
o	25	Add lines 13 through 23	<u> </u>	22,609.		1		22,609.
	25	Contributions, gifts, grants paid	<del> </del>	30,003.	762.	<del>                                     </del>	<del></del>	29,241.
-	26	Total expenses and disbursements Add lines 24 and 25		20,000.		+-		
	27	Subtract line 26 from line 12	]	13,406.	j			
	ì	Excess of revenue over expenses and disbursements	<u> </u>		10,306.			<del>                                     </del>
	1	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-).	<u> </u>		10,000.	+	···	<del> </del>
	ı C	AGRESTED HELITICOHIE III HEUGUVE, EHIEL -U-J	1		i	1		1

For Paperwork Reduction Act Notice, see instructions.

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Form 990-PF (2011)

Fo	rm 99(	P-PF (2011) R.H.M. FOUNDATION, IN	NC.	13	3-6090865 Page <b>2</b>
		Attached schedules and amounts in the  Balance Sheets description column should be for end-of-year		End	of year
L	art l	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	8,928.	3,687.	
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	İ	Less allowance for doubtful accounts ▶	Ì		
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			,
	6	Receivables due from officers, directors, trustees, and other	<del></del>		
		disqualified persons (attach schedule) (see instructions)	[		
	_	Other notes and loans receivable (attach schedule)			
s	7				
		Less allowance for doubtful accounts ▶	····		
sets	8	Inventories for sale or use			,
SS		Prepaid expenses and deferred charges	103,393.	89,692.	89,707.
۷		Investments - U S and state government obligations (attach schedule), **	269,097.	301,445.	
	!	Investments - corporate stock (attach schedule) ATCH 5	269,097.	301,445.	404,490.
	11 C	Investments - corporate bonds (attach schedule)			
	''	and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
	l	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 l)	381,418.	394,824.	494,197.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
s		Deferred revenue			
iabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
þ	21	Mortgages and other notes payable (attach schedule)			
Ë	22	Other liabilities (describe			
	22	Other habilities (describe		<del></del>	
	23	Total liabilities (add lines 17 through 22)	0	0	
_	23		<del></del>	<del></del>	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
s					
Fund Balances	24	Unrestricted			
alar	25	Temporarily restricted			
ä	26	Permanently restricted			
P		Foundations that do not follow SFAS 117,	·		
Ē	ļ	check here and complete lines 27 through 31. ► X			
9	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	201 410	204 204	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	381,418.	394,824.	
it /	30	Total net assets or fund balances (see instructions)	381,418.	394,824.	
ž	31	Total liabilities and net assets/fund balances (see			
_		instructions)	381,418.	394,824.	
i	art I	Analysis of Changes in Net Assets or Fund B	alances		
		I net assets or fund balances at beginning of year - Part II,		ust agree with	
	end-	of-year figure reported on prior year's return)		1	381,418.
2		er amount from Part I, line 27a			13,406.
3	Othe				
		lines 1, 2, and 3			394,824.
		reases not included in line 2 (itemize) >		<u> </u>	
6	Tota	I net assets or fund balances at end of year (line 4 minus lin	e 5) - Part II, column (b),		394,824.
_					

Form 990-PF (2011)

Page 3

<b>,</b>	nd describe the kind(s) of property sold (obrick warehouse, or common stock, 200	e g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
a			ļ <u> </u>		
<u>b</u>					
<u>c</u>			ļ		
d			<u> </u>		
<u>e</u>	<del></del>			<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
ab					
<u> </u>					
d			<del>                                     </del>		
Complete callufor canada		d by the foundation on 12/21/60			
	s showing gain in column (h) and owne (j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	han -0-) <b>or</b>
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	ol (h))
a			<del> </del>		
<u>b</u>			<del> </del>		
cd	1		<del>                                     </del>		
<del>u</del>					
Capital gain net income o		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
Net short-term capital gai	יי	• •			
· · · · · · · · · · · · · · · · · · ·	art I, line 8, column (c) (see inst	•	} }		
- ·	<u></u>	•	3		
Part V Qualification	Under Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
	r the section 4942 tax on the distrib s not qualify under section 4940(e)	- <del>-</del>	ase perio	d?	Yes X N
	nount in each column for each year		g any entr	ies	·
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ration (col. (b) divided by	
2010	30,569.	438,021.		(00. (2) 2	col(c))
2009	33,820.	402,059.			<del></del> _
2008	32,262.	504,541.	<del>                                     </del>		0.069789
2007			1		
2006	41,431.	659,395.	<del> </del>	· · · · · ·	0.069789 0.084117
	41,431. 32,345.	659,395. 611,091.			0.069789 0.084117 0.063943
	32,345.	611,091.			0.069789 0.084117 0.063943 0.062832 0.052930
Total of line 1, column (c	32,345.	611,091.	2		0.069789 0.084117 0.063943 0.062832
Average distribution ration	32,345.	611,091. e the total on line 2 by 5, or by the			0.069789 0.084117 0.063943 0.062832 0.052930 0.333611
Average distribution ration	32,345.	611,091. e the total on line 2 by 5, or by the	2 3		0.069789 0.084117 0.063943 0.062832 0.052930
Average distribution ration number of years the four	32,345.	e the total on line 2 by 5, or by the s than 5 years			0.069789 0.084117 0.063943 0.062832 0.052930 0.333611
Average distribution ration number of years the four Enter the net value of no	32, 345.	e the total on line 2 by 5, or by the s than 5 years	3		0.069789 0.084117 0.063943 0.062832 0.052930 0.333611 0.066722
Average distribution ration number of years the four Enter the net value of no Multiply line 4 by line 3	32, 345.	e the total on line 2 by 5, or by the s than 5 years	3 4		0.069789 0.084117 0.063943 0.062832 0.052930 0.333611 0.066722 464,335.
Average distribution ration number of years the four states that the net value of not states and states are states as a second of the states are states as a se	32,345.	e the total on line 2 by 5, or by the s than 5 years	3 4 5		0.069789 0.084117 0.063943 0.062832 0.052930 0.333611 0.066722 464,335. 30,981.
Average distribution ration number of years the found in the second of the second t	32, 345.  d)	e the total on line 2 by 5, or by the s than 5 years  om Part X, line 5	3 4 5 6 7		0.069789 0.084117 0.063943 0.062832 0.052930 0.333611 0.066722 464,335. 30,981. 103. 31,084. 29,241.

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions	)
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	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		2	206.
	here  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)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			206.
	Add lines 1 and 2			00.
	335 mo / (momo) tan (como) to / (c) / (momo) tan (como) tan (c) / (momo) tan (como) tan			206.
5 6	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			
	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 460.			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		4	60.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2	54.
	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 254. Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			Х
	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	1c	1	Х
	Did the foundation file Form 1120-POL for this year?	-10		
d	(1) On the foundation $\blacktriangleright$ \$(2) On foundation managers $\blacktriangleright$ \$			
е	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		X
	If "Yes," attach a detailed description of the activities	3		
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		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	NA	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1		
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		х	
-	conflict with the state law remain in the governing instrument?	7	X	
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	<del>-                                    </del>		
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)  NY,			
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	8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			17
	Part XIV	9		<u>X</u> _
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			v
	and addresses	10		<u> </u>
	F	om 99	0-PF (	2011)

Par	rt 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		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)	12	A (	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		<u>/ A</u> _
14				
	The books are in care of ► MARIANNE D MEYER  Located at ►437 MADISON AVENUE 40TH FLOOR NEW YORK, NY  ZIP+4 ► 10022	_ K	A	<del>,</del>
15	1	NJ	H. <b>►</b>	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No X
	over a bank, securities, or other financial account in a foreign country?	16_		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of			
Par	the foreign country ► rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?			
	the benefit of does of a disquarries personny.			
	(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)			
h	of fany 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	N	A
	Organizations relying on a current notice regarding disaster assistance check here			
С	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?	1 c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		1	
	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? Yes X No			
	If "Yes," list the years ▶,,,,,,,			
	(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 )	2 b		X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?		Ì	
b	olf "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or		Ī	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		ļ	
	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	3 h	NI	//
An	foundation had excess business holdings in 2011.)	3 b 4 a	-144	X
	Did the foundation invest during the year any amount in a mariner that would jeopardize its charitable purposes?	70		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4 b	1	Х
		orm 99	0-PF (	(2011)

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Par	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requi	red (continued)		
5 a	During the year did the foundation pay or incur any amou	nt to				
	(1) Carry on propaganda, or otherwise attempt to influen		4945(e))?	Yes X No		
	(2) Influence the outcome of any specific public elec					
	directly or indirectly, any voter registration drive?			1     1   1		
	(3) Provide a grant to an individual for travel, study, or oth			1 1 11		
	(4) Provide a grant to an organization other than a					' ]
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s					
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children o					
þ	If any answer is "Yes" to 5a(1)-(5), did any of the					NIΔ
	Regulations section 53 4945 or in a current notice regard	-		. 🔽	5b	18/17
	Organizations relying on a current notice regarding disast			– 🗀		
С	If the answer is "Yes" to question 5a(4), does the					
	because it maintained expenditure responsibility for the gr	ant?	NIH	Yes No		
	If "Yes," attach the statement required by Regulations section	ion 53 4945-5(d)				
6 a	Did the foundation, during the year, receive any fund	ls, directly or indire	ctly, to pay premium	s		
	on a personal benefit contract?			. Yes X No		
b	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a j	personal benefit contrac	t?	. 6b	X
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X No		
	If "Yes," did the foundation receive any proceeds or have				7ь	X
	Information About Officers, Directors	, Trustees, Foun	dation Managers,	<b>Highly Paid Emplo</b>	yees,	
_	and Contractors  List all officers, directors, trustees, foundation n	nanagara and their	componentian (coo	instructions)		
1		(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense	a account
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo	
			- <b>,</b>			
אידי ב	TACHMENT 6		0	d		0
	· · · · · · · · · · · · · · · · · · ·					
			<u> </u>	-		
•	Compensation of five highest-paid employees	(other than the	o included on line	1 - ean instruction	ne) If no	no enter
2	"NONE."	(Other than thos	e iliciadea on ilii	e i - see mstructio	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	riie, ciitei
		(b) Title, and average		(d) Contributions to	(e) Expense	a account
(a	) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	other allo	
		devoted to position		compensation		
	NONE					
		1				
Tota	I number of other employees paid over \$50,000 .					•
	The state of the s				Form 99	0-PF (2011)

R.H.M. FOUNDATION, INC. 13-6090865 Form 999-PF (2011) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) 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 Total number of others receiving over \$50,000 for professional services 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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc N/A 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 N/A

Form **990-PF** (2011)

0

3 NONE

Total. Add lines 1 through 3.

All other program-related investments. See instructions

Form 990-PF (2011) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., Average monthly fair market value of securities 365,169. 1 a Average of monthly cash balances 1 b 106,237. Fair market value of all other assets (see instructions) 1 c Total (add lines 1a, b, and c) 471,406. 1 d Reduction claimed for blockage or other factors reported on lines 1a and 2 Acquisition indebtedness applicable to line 1 assets 3 471,406. Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 7,071. 4 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 464,335. 5 6 23,217. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating Part XI foundations and certain foreign organizations check here 
and do not complete this part) 23,217. Tax on investment income for 2011 from Part VI, line 5 Income tax for 2011 (This does not include the tax from Part VI) \_\_\_\_\_ 2b 206. 23,011. Distributable amount before adjustments Subtract line 2c from line 1 . . . . . . . . . 3 4 Recoveries of amounts treated as qualifying distributions 23,011. 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) . . . . . . 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 7 23,011. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 29,241. Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1 b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 29,241. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form 990-PF (2011)

6

29,241.

Enter 1% of Part I, line 27b (see instructions)

qualifies for the section 4940(e) reduction of tax in those years

Adjusted qualifying distributions. Subtract line 5 from line 4

	990-PF (2011)  rt XIII Undistributed Income (see instru	uctions)		<del>-</del>	Page 9
Га	Ondistributed income (see insul		- 1		1
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011 23,011.
_	line 7	<del></del>		<del></del>	23,011.
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only				
				<del></del>	
3	Excess distributions carryover, if any, to 2011				
a	From 2006				
	0.220				
	710 2000				İ
	7.0 2000		İ		
		42,353.			
	Total of lines 3a through e	72,333.			
4	Qualifying distributions for 2011 from Part XII,				
	line 4 ▶ \$ 29,241.		1		
a	Applied to 2010, but not more than line 2a			<del></del>	
b	Applied to undistributed income of prior years (Election required - see instructions)			· <del>-</del> .	
С	Treated as distributions out of corpus (Election				
	required - see instructions)				23,011.
	Applied to 2011 distributable amount	6,230.			23,011.
_	Remaining amount distributed out of corpus	6,230.			
5	Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same				
6	amount must be shown in column (a) ) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	48,583.			
	Prior years' undistributed income Subtract				
	line 4b from line 2b			<del></del>	
С	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.	,			
ď	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions				
£	Undistributed income for 2011 Subtract lines				
1	4d and 5 from line 1 This amount must be distributed in 2012			_ <del></del>	
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)	2,093.			
9	Excess distributions carryover to 2012.			· <del></del>	
	Subtract lines 7 and 8 from line 6a	46,490.			
10	Analysis of line 9		_		
	Excess from 2007 9,207.				
	Excess from 2008 8,339.				
	Excess from 2009 13,864.				
	Excess from 2010 8,850.				
	Excess from 2011 6, 230 .			<del> </del>	
					Form 990-PF (2011)

Pa	rt XIV Private Oper	ating Foundations (	see instructions and	l Part VII-A, question	9)	NOT APPLICABL
_	If the foundation has				_	
_	foundation, and the ruling				•	
b	Check box to indicate wh	= -			4942()	)(3) or 4942(J)(5)
_		Tax year		Prior 3 years		4-3 7-4-1
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	I or the minimum investment	(-,		······································	· · · · · · · · · · · · · · · · · · ·	
	return from Part X for each year listed					
<b>.</b>						
b	85% of line 2a					
С	Qualifying distributions from Part XII line 4 for each year listed					
d	Amounts included in line 2c not				·	
	used directly for active conduct					
_	of exempt activities		,		<del></del>	
е	Qualifying distributions made directly for active conduct of					
	exempt activities. Subtract line					
3	2d from line 2c  Complete 3a, b, or c for the			·		
	afternative test relied upon					
а	"Assets" alternative test - enter-					
	(1) Value of all assets				-	
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
b	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X					}
	line 6 for each year listed					
С	"Support' alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on secunties loans (section 512(a)(5)),			,		
	or royalties)					
	(2) Support from general public and 5 or more			İ		
	exempt organizations as					
	provided in section 4942 ()(3)(B)(III)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income.					
Рa	rt XV Supplement	ary Information (C	omplete this part	only if the founda	tion had \$5,000	or more in assets
		during the year - se		<u>.</u>		
1	Information Regardin					
а	List any managers of before the close of any	the foundation who h	have contributed more	e than 2% of the total	contributions receiv	ed by the foundation
			ney have contributed i	note than \$5,000) (36	e section 507 (d)(2) )	
	MARIANNE M					
b		the foundation who	own 10% or more of	the stock of a corpo	ration (or an equally	large portion of the
	ownership of a partne	rship or other entity) o	which the foundation	inas a 10% of greater	IIIIEIESI	
			27 / 7			
	1(	- C4-ib-4ia C	N/A	nin eta Brazrama.		
2	Information Regardin					
	Check here ► X If					
	unsolicited requests f			inis, etc (see instructi	ons) to individuals o	r organizations under
	other conditions, com					<del></del>
а	The name, address, a	and telephone number	of the person to who	n applications should be	e addressed	
L-	The form in which app	ligations should be as	hmitted and informati	on and materials they	should include	
D	the form in which app	nications should be su	ionniticu and inionnati	on and materials tiley :	andula molade	
			N/A			
	Any submission dead	ines				··· - · · - · · ·
	•					
			N/A	anhiad assaultes !	blo fiolds lands of	motifician an alban
d	Any restrictions or I factors	imitations on awards	s, such as by geogra	apnicai areas, charital	bie fielas, kinas õt	institutions, or other

N/A

Page **11** 

Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	if recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 7				1
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				[
			L	22,609.
	<del> </del>		▶ 3a	22,009.
<b>b</b> Approved for future payment				}
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			▶ 3b	

Form 990•PF (2011)

art XVI-A Analysis of Income-Produ nter gross amounts unless otherwise indicated		ited business income	Excluded by	section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
Program service revenue	- Susmitted Code		- Lxausion code		(See instructions)
a			_		
b			-		
C					
d				······································	
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities			14	11,068.	
Net rental income or (loss) from real estate					
a Debt-financed property					
$\textbf{b}  \text{Not debt-financed property} \; \dots \; \dots \; .$					
Net rental income or (loss) from personal property $\ \ .$	1 1				
Other investment income	1		18	-7.	
Gain or (loss) from sales of assets other than inventory			10	- / -	
Net income or (loss) from special events	1				
Gross profit or (loss) from sales of inventory			<del>  </del>		
Other revenue a					
b			<del></del>		
c				· · · · · · · · · · · · · · · · · · ·	
<u> </u>		<u> </u>			
e	1 1				
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities	culations ) s to the Ac	complishment of E	xempt Purp	oses	11,06
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities	culations ) s to the Ac	complishment of E	Exempt Purpo	oses ) of Part XVI-A contribu	11,06
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ine No.  Explain below how each activities.	culations ) s to the Ac	complishment of E	Exempt Purpo	oses ) of Part XVI-A contribu	11,06
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ine No.  Explain below how each activities.	culations ) s to the Ac	complishment of E	Exempt Purpo	oses ) of Part XVI-A contribu	11,06
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Subtotal Add columns (b), (d), and (e)	culations ) s to the Ac	complishment of E	Exempt Purpo	oses ) of Part XVI-A contribu	11,06

Par	XVII	Information R Exempt Organ		nsfers To and Tra	nsactions	s and Relationships With N	onchar	itable	9
		ion 501(c) of the Co				th any other organization describ r in section 527, relating to politi		Yes	No
	_		a foundation to	a noncharitable exemp	ot organizatio	on of			
							1a(1)		X
							I .	T	Х
		ransactions							
	(1) Sal	es of assets to a no	ncharitable exen	npt organization			. 1b(1)	)	X
								)	X
								)	X
									X
								1	X
								<del>'</del>	$-\frac{x}{x}$
d	If the a	answer to any of the	e above is "Yes assets, or servic sharing arrang	s," complete the follo	wing scheding foundation (d) the vi	ule Column (b) should always s ition If the foundation received lalue of the goods, other assets, of the goods, other assets, of the control of the goods of the	how the ess than or service	fair m	narke eived
,		(-,-	(-)			/A		<u> </u>	
	-	<del></del>		<del></del>					
		<u></u>							
	$\leftarrow$	····							
	describ	ped in section 501(c) " complete the follo	of the Code (ot wing schedule	her than section 501(c	c)(3)) or in se			es X	No
		(a) Name of organization	n	(b) Type of organ	ization	(c) Description of rela	Rionship		
					<del></del>	<del>-  </del>			
		<del></del>				<del></del>			
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		· · · · · · · · · · · · · · · · · · ·					
Sigr	1	penalties of penjury, I decia it, and complete Declaration o	are that I have examin f preparer (other than ta	ned this return, including accompanyer) is based on all information	npanying schedule in of which prepan		wledge and I	_	
der		Mariana	mayer	19/12/10	<u> </u>	/ <b>/</b>	e preparer	shown	
	Sign	nature of officer or trustee	0	წate ∕	Title	(see instr	uctions)? X	Yes	No
Paic	\ {	Print/Type preparer's		Preparer's signature		Date , Check	ıf PTIN		
		MAIZG SV	AGNA	Mark		7/20/12 self-employ			)1
	parer		RDON LLP			Firm's EIN ▶ 13	-04850	70	
Jse	Only	Firm's address ▶ 36		AVE					
		NE	W YORK, N	Y		10017   Phone no 212	-832-0	400	

Form 990-PF (2011)

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

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

OMB No 1545-0047

2011

Name of the organization R.H.M. FOUNDATION, I	INC.	Employer identification number
		13-6090865
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private for	oundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	ation
	501(c)(3) taxable private foundation	
, ,	covered by the <b>General Rul</b> e or a <b>Special Rule.</b> ), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II	) or more (in money or
Special Rules		
under sections 509(	(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % supportance (a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during 5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Ford II	the year, a contribution of
during the year, tota	)(7), (8), or (10) organization filing Form 990 or 990-EZ that received fron al contributions of more than \$1,000 for use <i>exclusively</i> for religious, charioses, or the prevention of cruelty to children or animals. Complete Parts I,	table, scientific, literary,
during the year, con not total to more that year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from tributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the strain \$1,000. If this box is checked, enter here the total contributions that we say religious, charitable, etc., purpose. Do not complete any of the parts unlineation because it received nonexclusively religious, charitable, etc., contains.	hese contributions did ere received during the ess the <b>General Rule</b> ributions of \$5,000 or
	is not covered by the General Rule and/or the Special Rules does not file	
	st answer "No" on Part IV, line 2, of its Form 990, or check the box on line PF, to certify that it does not meet the filing requirements of Schedule B (F	
For Paperwork Reduction Act Notice	e, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedul	e B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization R.H.M. FOUNDATION, INC.

Employer identification number 13-6090865

Part I	Contributors (see instructions) Use duplicate copies of Par	t I if additional space is need	fed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	MARIANNE MEYER  1050 FIFTH AVENUE  NEW YORK, NY 10028	\$16,218.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	MARIANNE MEYER  1050 FIFTH AVENUE  NEW YORK, NY 10028	\$16,130.	Person X Payroll X Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)

Name of organization R.H.M. FOUNDATION, INC.

Employer identification number

13-6090865

## Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_	500 SHS CAMPBELL SOUP COMPANY		
		\$\\$	_11/30/2011
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	275 SHS WAL-MART STORES, INC.		
		\$\$.	11/30/2011
a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of πoncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Employer identification number Name of organization R.H.M. FOUNDATION, 13-6090865 Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) ▶\$ Use duplicate copies of Part III if additional space is needed. (a) No (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held from (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

	NET INVESTMENT INCOME	10,970.	11,068.
FROM SECURITIES	REVENUE AND EXPENSES PER BOOKS	10,970.	11,068.
PART I - DIVIDENDS AND INTEREST FROM SECURITIES		COME - GNMA	TOTAL
FORM 990PF, PART I	DESCRIPTION	DIVIDENDS INTEREST INCOME -	

,
FEES
ACCOUNTING
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PART
990PF,
FORM

CHARITABLE PURPOSES	6,407.	6,407.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	6,407.	6,407.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT

NET	NH	INCOME	762. 762	100.	125.	987. 762
NEVENOE AND	EXPENSES	PER BOOKS				TOTALS
		DESCRIPTION	INVESTMENT EXPENSES	NYS FILING FEES	NY LAW JOURNAL	

OBLIGATIONS
STATE
AND
U.S.
1
H
PART
990PF,
FORM

	GOV'T NATIONAL MORTGAGE ASSN JPMORGAN US GOVT MONEY MARKET
DESCRIPTION	GOV'T NATIONAL MORTGAGE JPMORGAN US GOVT MONEY

US OBLIGATIONS TOTAL

NT 4	ENDING	
ATTACHMEN	ENDING BOOK VALUE	

953.	
938.	88,754.

89,707.

89,692.

CORPORATE STOCK ı PART FORM 990PF,

DESCRIPTION

PROCTER & GAMBLE JM SMUCKER CO THE NEW COM COCA COLA

MERCK & CO STAPLES

EI DU PONT DE NEMOURS & CO WAL MART STORES INC ANADARKO PETROLEUM CORP

MEDIRONIC, INC. CAMPBELL SOUP COMPANY

BOOK VALUE ENDING

ENDING

FMV

1,205. 108,192.

459.

57,597.

770.

76,340. 13,194. 15,255. 47,264. 33,648. 22,872. 69,860.

59,620. 24,336. 15,075. 41,178. 23,432. 20,760.

301,445.

404,490.

ATTACHMENT 6

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	JRS PER	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
MARIANNE MEYER 1050 FIFTH AVE. NEW YORK, NY 10028	PRES/TR DI	AS REQ'D	0	0	0
DONALD HAMBURG 437 MADISON AVENUE 40TH FLOOR NEW YORK, NY 10022	SECRETARY DIRECTOR	AS REQ'D	0	0	0
RUTH ELLEN BRUCE 9320 S. HOLLYBROOK LAKE DR. PEMBROKE PINES, FL 33025	VP DIRECTOR	AS REQ'D	0	0	0
	GRAND TOTALS	1 11	0	0	0

ATTACHMENT 7

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RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ESHIVA ZICHRON LEMA	NONE EXEMPT	GENERAL	2,400
LINDEN, NJ 07036			
ETROPOLITAN MUSEUM OF ART	NONE	GENERAL	550
.000 FIFTH AVE	ЕХЕМРТ		
FW YORK, NY 10028			
IUSEUM OF MODERN ART	NONE	GENERAL	009
1 WEST 53 STREET	EXEMPT		
JEW YORK, NY 10019			
ESHIVA ZICHRON ELIEZER	NONE	GENERAL	10,000.
,543 E 9TH ST.	EXEMPT		
SROOKLYN, NY 11230			
PNET/THIRTEEN	NONE	GENERAL	4,000
125 EIGHTH AVENUE	EXEMPT		
JEW YORK, NY 10019			
PCA	NONE	GENERAL	200
77 6TH STREET, SUITE 700	EXEMPT		
ASHINGTON, DC 20001			

ATTACHMENT 7

ATTACHMENT 7 (CONT'D)

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GRANTS AND CONTRIBILITIONS PAID DURING THE YEAR		l
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99005		

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
ECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
EW YORK PUBLIC RADIO 50 VARICK ST.	NONE EXEMPT	GENERAL	200.
EM YORK, NY 10013			
IAS	NONE	GENERAL	250
33 SEVENTH AVE	EXEMPT		
5W YORK, NY 10001			
ENTRAL PARK CONSERVANCY	NONE	GENERAL	250.
4 E. 60TH ST	EXEMPT		
EW YORK, NY 10022			
ITYMEALS ON WHEELS	NONE	GENERAL	334
55 LEXINGTON AVENUE	EXEMPT		
EW YORK, NY 10017			
Y POLICE DEFENSE FOUNDATION	NONE	GENERAL	25
63 ROUTE 17K	EXEMPT		
EWBURGH, NY 12550			
HUPAS YAAKOV EOM	NONE	GENERAL	500
VAILABLE UPON REQUEST	EXEMPT		
EW YORK, NY 10017			

ATTACHMENT 7 (CONT'D)

KEA
AND CONTRIBUTIONS PAID DURING THE YEAR
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GRANTS
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PART X
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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
AHF VAILABLE UPON REQUEST IEW YORK, NY 10017	NONE EXEMPT	GENERAL	100
OMEN GREATER NYC RACE OOS LBJ FREEWAY UITE 250	NONE EXEMPT	GENERAL	250
REENWOOD SCHOOL VAILABLE UPON REQUEST IEW YORK, NY 10017	NONE EXEMPT	GENERAL	2,000
THE FRESH AIR FUND 333 3RD AVENUE, 14TH FLOOR 15W YORK, NY 10017	NONE EXEMPT	GENERAL	250
PPFA VAILABLE UPON REQUEST TEW YORK, NY 10017	NONE EXEMPT	GENERAL	200.
TARI SHATTUCK EDUCATION FOUNDATION P.O BOX 193, BRISTOL, VT 05443	NONE EXEMPT	GENERAL	200
		TOTAL CONTRIBUTIONS PAID	22,609.

### SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

# **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2011

Employer identification number

	C.H.M. FOUNDATION, INC.				13-60908	00	
Note	: Form 5227 filers need to complete only	Parts I and II					
Par	Short-Term Capital Gains and L	osses - Assets	Held One Ye	ar or Less			<u> </u>
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1 a							
						<del></del>	
—— b	Enter the short-term gain or (loss), if any	from Schedule D	-1 line 1h			1b	
D	Enter the short-term gain or (loss), if any	, IIOIII Schedule D	-1, iiile 10			10	
2	Short-term capital gain or (loss) from Fo	rms 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partner					3	
4	Short-term capital loss carryover Ente Carryover Worksheet		_		•	4	( )
5	Net short-term gain or (loss). Combine	e lines 1a throuç	gh 4 in colum	n (f) Enter here ar	nd on line 13,	5	
Pai	column (3) on the back	osses - Assets	Held More TI	nan One Year		, ,	L
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )		(d) Sales price	(e) Cost or other (see instructio		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
b	Enter the long-term gain or (loss), if any,	from Schedule D-	1, line 6b			6 b	-7.
7	Long-term capital gain or (loss) from For	rms 2439, 4684, (	6252, 6781, an	10 8824		7	
8	Net long-term gain or (loss) from partner	rships, S corporat	ions, and other	estates or trusts		8	
9	Capital gain distributions					9_	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover Enter	r the amount, if	any, from lin	e 14 of the 2010	Capital Loss		
12	Carryover Worksheet	lines 6a through	ı 11 in columi	n (f) Enter here an	d on line 14a,	11	)
	column (3) on the back			<u></u> .		12	-7.
For I	Paperwork Reduction Act Notice, see the Inst	tructions for Form 1	041.		Sc	hedul	e D (Form 1041) 2011

Sched	lule D, (Form 1041) 2011					Page 2
Par	t III Summary of Parts I and II	(1) Be	neficiaries'	(2) Est	tate's	(3) Total
	Caution: Read the instructions before completing this part	(se	e instr )	or tru	ıst's	(3) Total
13	Net short-term gain or (loss)					
14	Net long-term gain or (loss):					
	Total for year	<u> </u>				<del>-7.</del>
	Unrecaptured section 1250 gain (see line 18 of the wrksht)					
	28% rate gain			<del></del>		
	Total net gain or (loss). Combine lines 13 and 14a ▶ 15	l				-7.
Note	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or For, go to Part V, and <b>do not</b> complete Part IV. If line 15, column (3), is a net loss, complete.	rm 990-T, to Port IV o	Part I, line 4	a) If lines 1	4a and	1 15, column (2), are net
		e rantiv a	no the Capita	1 LOSS Cary		
	t IV Capital Loss Limitation				1	
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, I					, 7\
a Note <i>Cany</i> i	The loss on line 15, column (3) or b \$3,000	ne 22 (or F	orm 990-T, II	ne 34), is a	loss, co	omplete the Capital Loss
Par	t V Tax Computation Using Maximum Capital Gains Rates					
	1041 filers. Complete this part only if both lines 14a and 15 in column (2	2) are gai	ns, or an an	nount is en	tered	in Part I or Part II and
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more tha	n zero				
	ion: Skip this part and complete the Schedule D Tax Worksheet in the instruc	ctions if				
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
	n 990-T trusts. Complete this part only if both lines 14a and 15 are gain	ns or au	alified divide	ends are ir	nclude	d in income in Part I
of Fo	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and co	mplete t	he Schedule	D Tax We	orksh	eet in the instructions
	her line 14b, col (2) or line 14c, col (2) is more than zero					
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17	T			
18	Enter the smaller of line 14a or 15 in column (2)	• • • • • • • • • • • • • • • • • • • •			1	
	but not less than zero	İ				
19	Enter the estate's or trust's qualified dividends					
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) . 19					
20	Add lines 18 and 19 20					
21	If the estate or trust is filing Form 4952, enter the					
	amount from line 4g, otherwise, enter -0 > 21					
22	Subtract line 21 from line 20 If zero or less, enter -0-	22			:	
23	Subtract line 22 from line 17 If zero or less, enter -0-	23			1	
					1	
24	Enter the smaller of the amount on line 17 or \$2,300	24				
25	Is the amount on line 23 equal to or more than the amount on line 24?				] [	
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
	No. Enter the amount from line 23	25			]	
26	Subtract line 25 from line 24	26			]	
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27			]	
					1	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28				
29	Subtract line 28 from line 27	29				
30	Multiply line 29 by 15% ( 15)				30	
31	Figure the tax on the amount on line 23 Use the 2011 Tax Rate Sch			nd Trusts		
٠.	(see the Schedule Ginstructions in the instructions for Form 1041)				31	
	Tool the conduct of montaction in the members of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of the conduction of					
32	Add lines 30 and 31				32	
33	Figure the tax on the amount on line 17 Use the 2011 Tax Rate Sch	hedule fo	r Estates a	nd Trusts		
	(see the Schedule Ginstructions in the instructions for Form 1041)				33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here					
	G, line 1a (or Form 990-T, line 36)				34	<u> </u>
					Sche	dule D (Form 1041) 2011

Page 2

Employer identification number Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side R.H.M. FOUNDATION, INC. 13-6090865 Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date (f) Gain or (loss) Subtract (e) from (d) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (e) Cost or other basis (c) Date sold (d) Sales price acquired (mo, day, yr) (see instructions) (mo , day, yr ) 6a 58 -7. 51.033 SHARES GNMA FUNDS 51.

6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b.

# Form 8868

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.


	filing for an Automatic 3-Month Extension, o						
	filing for an Additional (Not Automatic) 3-Mo						
Do not comp	olete Part II unless you have already been gran	nted an au	tomatic 3-month extens	ion on a previously filed Form	1 8868		
a corporatio 8868 to req	ling (e-file). You can electronically file Form to n required to file Form 990-T), or an addition luest an extension of time to file any of the Transfers Associated With Certain Persona	nal (not aut forms liste	iomatic) 3-month extens id in Part I or Part II wi	sion of time. You can electro th, the exception of Form 88	onically file Form 870, Information		
instructions)	For more details on the electronic filing of the	is form, vis	sit www irs gov/efile and	click on e-file for Charities &	Nonprofits		
	tomatic 3-Month Extension of Time. On						
	n required to file Form 990-T and requesting						
•					[]		
All other cor	porations (including 1120-C filers), partnersh	ins REMIC	S. and trusts must use F	form 7004 to request an exten	sion of time		
to file incom	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,	Enter filer's identifying num			
<u></u>	Name of exempt organization or other filer, see in	structions.		Employer identification nu			
Type or		, ,	` ,				
print	R.H.M. FOUNDATION, INC. X 13-609086						
File by the	Number, street, and room or suite no. If a P.O. box, see instructions  Social security number.				SN)		
due date for filing your	DONALD HAMBURG, ESQ GOLENBOCK EISEMAN ASSOR (SCUL) PER Social security number (S						
return See	City, town or post office, state, and ZIP code For a foreign address, see instructions 437 MADISM AVENUE						
instructions	NEW YORK, NY 10022						
Enter the Re	eturn code for the return that this application	is for (file a	separate application fo	r each return)	0 4		
		•	, ,,	,			
Application		Return	Application		Return		
ls For		Code	Is For		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-P		04	Form 5227		10		
	(sec 401(a) or 408(a) trust)	05	Form 6069		11		
	(trust other than above)	06	Form 8870		12		
The book	s are in the care of  MARIANNE D MEY	ER		- Annual Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of t			
Telephon	e No ▶		FAX No. ▶				
• If the org	anization does not have an office or place of	business ir	the United States, chec	ck this box	▶ 🔲		
	or a Group Return, enter the organization's fo				If this is		
for the whol	e group, check this box ▶ 🔛 📗	fit is for pa	art of the group, check t	his box ▶ 🔙 a	nd attach		
a list with th	e names and EINs of all members the extens	ion is for					
1 I reque	est an automatic 3-month (6 months for a cor	poration re	equired to file Form 990	-T) extension of time			
until	10/15 , 20 12 , to file the	exempt or	ganization return for the	organization named above	The extension is		
for the	organization's return for						
▶	calendar year 20 or				_		
► X	tax year beginning 03/0	<u>)1</u> , 20 <u>1</u>	and ending	02/29 , 20 1	<u>2_</u> .		
	ax year entered in line 1 is for less than 12 m Change in accounting period	onths, che	ck reason Initial re	eturn Final return			
	application is for Form 990-BL, 990-PF, 99 fundable credits. See instructions	90-T, 4720	), or 6069, enter the	tentative tax, less any 3a \$	460.		
	application is for Form 990-PF, 990-T,	4720. oi	6069, enter anv re				
	ated tax payments made. Include any prior yea				460.		
	ce due. Subtract line 3b from line 3a Include						
	ronic Federal Tax Payment System) See instru			3c \$	, 0		
	you are going to make an electronic fund		with this Form 8868.				
payment ins							

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2012)