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EXTENSION ATTACHED

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

OMB No 1545-0052

Intern:	al Rev		be able to use a copy of this	return to satisfy state rep		<u> ZUII</u>
Fort	alen	dar year 2011 or tax year beginning JUN	1, 2011	, and ending	MAY 31, 2012	
		foundation			A Employer identification n	umber
	_	SMAN FAMILY FOUNDATION				
		MCGLADREY, LLP.		Room/sulte	13-3634386	
		nd street (or PO box number If mail is not delivered to street	B Telephone number			
		5 AVENUE OF THE AMERICA	<u>.S</u>		212-372-100	
		own, state, and ZIP code			C If exemption application is pen	ding, check here
		YORK, NY 10036				
G C	neck	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations,	CNECK Nere
		Final return	Amended return		Foreign organizations meet 2. check here and attach com	ing the 85% test,
<u> </u>	hook	type of organization: X Section 501(c)(3) ex	Name change		-	•
Ϊ,	_		Other taxable private founda	tion	E If private foundation statu	
L Fa		rket value of all assets at end of year J Accounti		Accrual	under section 507(b)(1)(A	
			ther (specify)	Acciudi	F If the foundation is in a 60 under section 507(b)(1)(8	
•		439,610. (Part I, colu		pasis.)	under 3000001 307 (D)(T)(E	an shook hold
	rt i	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
<u></u>	 .	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	95,226.		N/A	
	2	Check ▶ if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	22.	22		TATEMENT 1
	4	Dividends and interest from securities	5,545.	5,545		TATEMENT 2
	5a	Gross rents		······································		
	þ	Net rental income or (loss)		. ,,,,	<u> </u>	manifestra .
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	3,235.			
	þ	Gross sales price for all assets on line 6a 49,434.	<u></u>	3 335		
Sev.	7	Capital gain net income (from Part IV, line 2)		3,235	•	······
-	8	Net short-term capital gain				
	9	Income modifications				
	10a	and allowances .	<u> </u>	·*····································		
,		Gross profit or (loss)				•••••••••••••••••••••••••••••••••••••••
	11	Other income				
>	12	Total. Add lines 1 through 11	104,028.	8,802		
<u> </u>	13	Compensation of officers, directors, trustees, etc	0.	0		0.
Д	14	Other employee salaries and wages				
_	15	Pension plans, employee benefits				
363 568	16a	Legal fees				
Œ.	b	Accounting fees STMT 3	4,800.	2,400	•	2,400.
Operating and Adminished Expenses	C	Other professional fees				
™ 0	17	Interest				
盘	18	Taxes STMT 4	798.	83	· DECENT	0.
	19	Depreciation and depletion		· - ·	RECEIVE	
투	20	Occupancy				
ΑÞ	21	Travel, conferences, and meetings			6 FEB 1 2 20	13 0
an	22	Printing and publications Other expenses STMT 5	112.	52		Ø
ting	23		112.	52	OGDEN,	60.
era	24	Total operating and administrative expenses. Add lines 13 through 23	5,710.	2,535	1	2 460
ô	25	Contributions, gifts, grants paid	36,750.	2,333		2,460. 36,750.
	26	Total expenses and disbursements.	30,730			30,730.
	-"	Add lines 24 and 25	42,460.	2,535		39,210.
	27	Subtract line 26 from line 12		=,000		33,210.
	Į.	Excess of revenue over expenses and disbursements	61,568.			
	l	Net investment income (if negative, enter -0-)		6,267	•	·····, , , , , , , , , , , , , , , , ,
	C	Adjusted net income (if negative, enter -0-)			N/A	
1235		I HA For Panerwork Reduction Act Notice see	instructions			Form QQ0_DE (2011)

C/O MCGLADREY. Form 990-PF (2011) 13-3634386 Page 2 Balance Sheets Attached schedules and amounts in the description Beginning of year End of year column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 32,790 50,131. 50,131. Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less; allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 300,443. STMT 6 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 333,233. 394,801 446,300 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ► X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 6 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 333,233. 394,801 29 Retained earnings, accumulated income, endowment, or other funds 333,233. 394,801 30 Total net assets or fund balances 333,233. 394,801 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 333,233 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 394,801. Decreases not included in line 2 (itemize)

394,801.

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Page 3

		osses for Tax on Inv ind(s) of property sold (e.g.,		Income	(b) Ho	w acquired	(c) Dat	te acquired	(d) Date sold
2-story brick wa	2-story brick warehouse, or common stock, 200 sns. MLC Co.)			Purchase Donation	(mo	, day, yr.)	(mo., day, yr.)		
1a CAPITAL GAIN D						P		IOUS	VARIOUS
b PUBLICLY TRADE	D SE	CURITIES				P	VAR	IOUS	VARIOUS
<u>C</u>		 				_			
e e			-		ļ	_			
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		t or other basis xpense of sale		_		Gain or (loss lus (f) minus	
a 474.									474.
b 48,960.				46,19	9.				2,761.
C			-						
<u>d</u>							_		
Complete only for assets showin	n nain ın	column (h) and owned by th	- ne foundation	on 12/31/60			/I) Caras	/Cal /h) main	
Complete only for assets showin		(j) Adjusted basis		cess of col (I)	-		ol. (k), bu	(Col (h) gain it not less tha	ın -0-) or
(I) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any			Losse	es (from col ((h))
a						·			474.
b									2,761.
C									
d									
8						,			
2 Capital gain net income or (net ca	pital loss	If gain, also enter of the lift (loss), enter -0-	in Part I, line i in Part I, line	7 7	} [2			3,235.
3 Net short-term capital gain or (los			1 (6):						
If gain, also enter in Part I, line 8,	column ((c)			 			N/A	
Part V Qualification U	ndor S	Section 4940(e) for	Doducod	Tay on Not) Have	stmont In			<u> </u>
Nas the foundation liable for the sect f "Yes," the foundation does not qual	rfy under	section 4940(e). Do not cor	nplete this pa	rt					Yes X No
1 Enter the appropriate amount in e	ach colu		ctions before	making any entri					<u>(4)</u>
Base period years	na 10/	(b) Adjusted qualifying distr	ributions	Net value of no	(c) oncharit	able-use asse	ts	Distril	(d) bution ratio
Calendar year (or tax year beginning 2010	ig iii)		5,960.			367,10		(coi. (b) an	vided by col (c)) • 073440
2009	-		9,450.		_	313,36	5.		.062068
2008		49	9,990.			294,28	9.		.169867
2007			9,660.			452,53			.065541
2006		90	0,450.			415,01	8.		.217942
							. 2		.588858
3 Average distribution ratio for the t the foundation has been in exister	•		n line 2 by 5, 	•	r of year	S 	3		.117772
4 Enter the net value of noncharitab	le-use as	ssets for 2011 from Part X, II	ne 5				4		412,714.
5 Multiply line 4 by line 3							5		48,606.
6 Enter 1% of net investment incom	ne (1% of	f Part I, line 27b)					. 6		63.
7 Add lines 5 and 6							7		48,669.
8 Enter qualifying distributions from If line 8 is equal to or greater than						tax rate.	8		39,210.
See the Part VI instructions.									

SUSSMAN FAMILY FOUNDATION

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Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	r 4948	3 - see	instru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 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 here 🕒 🔲 and enter 1%	1			1	25.
	of Part I, line 27b				., .,	
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 🔰					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	. 3			1	25.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			1	25.
6	Credits/Payments.					
a	2011 estimated tax payments and 2010 overpayment credited to 2011	_				
t	Exempt foreign organizations - tax withheld at source 6b	_				
C	Tax paid with application for extension of time to file (Form 8868)	_				
d	Backup withholding erroneously withheld	_				
7	Total credits and payments. Add lines 6a through 6d	7				<u>0.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ <u>g</u>			1	<u> 25.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10)			
11		<u> 11</u>				
	art VII-A Statements Regarding Activities			·····		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interv	ene in			Yes	No
	any political campaign?			1a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition			1b		X
	If the answer is "Yes" to 1s or 1b, attach a detailed description of the activities and copies of any materials publi	shed o	r			
	distributed by the foundation in connection with the activities.					.,
	Did the foundation file Form 1120-POL for this year?	•	•	10		X
0	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	`				
_		<u>.</u>				
ŧ	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0 •					
9	managers > \$ O . Has the foundation engaged in any activities that have not previously been reported to the IRS?					v
2	If "Yes," attach a detailed description of the activities.			2		X
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation					
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	II, UI				Х
As	Biddle foundation bear analytically street and the	• •		3		X
	i Did the foundation have unrelated business gross income of \$1,000 or more during the year? I If "Yes," has it filed a tax return on Form 990-T for this year?	• • • •	N/A	4a		-
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		, 41	4b 5		X
Ū	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					
Ť	By language in the governing instrument, or			1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the s	tate law				
	remain in the governing instrument?			6	Х	
7		•	• •	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			····		
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NJ					
t	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			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	calendar				
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X

b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach

b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2011.)

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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X

3b

2b

... N/A

N/A

before 2011?

If "Yes," list the years ▶

during the year?

statement - see instructions.)

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

Part VIII Information About Officers, Directors, Trustees, Foundation Manage Paid Employees, and Contractors (continued)	ers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	-	
) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information si	uch as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 PLEASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY D CHARITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SU BY CONTRIBUTIONS, OTHER ORGANIZATIONS		0.
2 EXEMPT UNDER INTERNAL REVENUE CODE SECTION 501(C)(3)	•	
3		0.
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 N/A		Amount
		0.
2	-	
All other program-related investments. See instructions 3 NONE		· · ·
		0.
Total. Add lines 1 through 3		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	· I	
	Average monthly fair market value of securities	1a	374,975.
	Average of monthly cash balances	1b	44,024.
C	Fair market value of all other assets	10	0.
d	Total (add lines 1a, b, and c)	1d	418,999.
8	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	0.
3	Subtract line 2 from line 1d	3	418,999.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,285.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	412,714.
6	Minimum investment return. Enter 5% of line 5	6	20,636.
P	pistributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	20,636.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	125.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	20,511.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	20,511.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	20,511.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	39,210.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	39,210.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	39,210.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years	qualifies for t	

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C/O MCGLADREY, LLP.

Part XIII Undistrib	uted Income (see i	nstructions)			
•		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2 line 7	011 from Part XI,				20,511.
2 Undistributed income, if any, a		***************************************	······································		
a Enter amount for 2010 on	v			0.	
b Total for prior years:	' · · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·
			0.		
3 Excess distributions carry	over, if any, to 2011	***************************************		, · · · · · · · · · · · · · · · · · · ·	······································
a From 2006	69,988.	1			
b From 2007	7,148.				
c From 2008	35,276.				
d From 2009	3,806.				
e From 2010					
f Total of lines 3a through 6)	116,218.			
4 Qualifying distributions for	r 2011 from				
Part XII, line 4. ▶ \$	39,210.				
a Applied to 2010, but not n	nore than line 2a			0.	
b Applied to undistributed in	ncome of prior		"		
years (Election required -	see instructions)		0.		
c Treated as distributions of	ut of corpus		.,		
(Election required - see in:	structions)	0.			
d Applied to 2011 distributa	ble amount				20,511.
e Remaining amount distrib	uted out of corpus	18,699.			
5 Excess distributions carryover (if an amount appears in colum must be shown in column (a))	applied to 2011 in (d), the same amount	0.			0.
6 Enter the net total of each	h column as				
8 Corpus Add lines 3f, 4c, and 4	4e. Subtract line 5	134,917.			
b Prior years' undistributed	·····				•••••••••••••••••••••••••••••••••••••••
line 4b from line 2b			0.		
c Enter the amount of pnor undistributed income for v deficiency has been issue the section 4942(a) tax ha assessed	which a notice of d, or on which is been previously		0.		
d Subtract line 6c from line	6b. Taxable		_		
amount - see instructions			0.		••••
e Undistributed income for	t t				
4a from line 2a. Taxable a	mount - see instr.			0.	
f Undistributed income for					
lines 4d and 5 from line 1			-		•
be distributed in 2012	• —		······································		<u> </u>
7 Amounts treated as distrib	· · · · · · · · · · · · · · · · · · ·				
corpus to satisfy requiren	1				
section 170(b)(1)(F) or 49		0.	·····		······································
8 Excess distributions carry		60,000			
not applied on line 5 or lin		69,988.			•••••
9 Excess distributions carr	•	64 020			
Subtract lines 7 and 8 from	m line 6a	64,929.			
10 Analysis of line 9	7 140	1			
a Excess from 2007	7,148.				
b Excess from 2008	35,276.	1			
c Excess from 2009	3,000.				
d Excess from 2010	18,699.				
e Excess from 2011	10,027	1			

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1	3	_	3	6	3	4	3	Ω	6
_	•		J	v	J	-2	J	v	v

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Part XIV Private Operating	Foundations (see in	structions and Part VII-	A, question 9)	N/A				
1 a If the foundation has received a ruling	or determination letter that	t it is a private operating						
foundation, and the ruling is effective for 2011, enter the date of the ruling								
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
2 a Enter the lesser of the adjusted net	Тах уваг		Prior 3 years					
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total			
investment return from Part X for								
each year listed								
b 85% of line 2a								
c Qualifying distributions from Part XII.			-					
line 4 for each year listed								
d Amounts included in line 2c not								
used directly for active conduct of								
exempt activities								
Qualifying distributions made directly								
for active conduct of exempt activities	.							
Subtract line 2d from line 2c	'							
3 Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter.								
(1) Value of all assets			_	-				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)								
b "Endowment" afternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed								
c "Support" alternative test - enter.								
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)								
(2) Support from general public and 5 or more exempt organizations as provided in					.			
section 4942(j)(3)(B)(iii) (3) Largest amount of support from		-		,				
an exempt organization								
(4) Gross investment income								
Part XV Supplementary In			if the foundation	had \$5,000 or mo	ore in assets			
at any time during	the year-see inst	ructions.)						
Information Regarding Foundation a List any managers of the foundation of year (but only if they have contributed NONE).	who have contributed more		ributions received by the	foundation before the clos	se of any tax			
NONE	100/		, , , , , , , , , , , , , , , , , , , ,					
b List any managers of the foundation of the foundation of the foundation is	who own 10% or more of th has a 10% or greater intere	ie stock of a corporation (st.	or an equally large porti	on of the ownership of a pa	artnership or			
NONE								
2 Information Regarding Contribution Check here	n only makes contributions	to preselected charitable	organizations and does i	not accept unsolicited requ omplete items 2a, b, c, and	ests for funds. If d.			
a The name, address, and telephone nu N/A	imber of the person to who	m applications should be	addressed.					
b The form in which applications should APPLICATIONS SHOULD								
c Any submission deadlines: N/A								
d Any restrictions or limitations on awa N/A	rds, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors				
11/ 21								
123601 12-02-11					Form QQ0_DF /2011\			

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to **Amount** any foundation manager status of Name and address (home or business) recipient or substantial contributor a Paid during the year SEE ATTACHED STATEMENT A NONE GENERAL PURPOSE 36,750. 36,750. **b** Approved for future payment NONE Total <u> 3b</u> 0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income		led by section 512, 513, or 514	(B)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	- Tanction Income
<u> </u>	——				
b	<u> </u>			_	
C		 .			
d			_		
8		·	++++		
g Fees and contracts from government agencies		. .			
2 Membership dues and assessments			+ +		
		·	\dashv		
3 Interest on savings and temporary cash			14	22.	
investments			$\frac{14}{14}$	5,545.	
•		····		3,343.	
5 Net rental income or (loss) from real estate:	 				
a Debt-financed property					
b Not debt-financed property					<u> </u>
6 Net rental income or (loss) from personal					
property				-	
7 Other investment income			+ +		
8 Gain or (loss) from sales of assets other			10	2 225	
than inventory			18	3,235.	
9 Net income or (loss) from special events	<u> </u>				
10 Gross profit or (loss) from sales of inventory	<u> </u>		\rightarrow		
11 Other revenue					
a			\dashv		
b		- .			
C					
d		 -			 .
e	ļ				
12 Subtotal. Add columns (b), (d), and (e)		<u>C</u>) .	8,802.	0,
13 Total. Add line 12, columns (b), (d), and (e)			-	13	8,802
(See worksheet in line 13 instructions to verify calculations.)				<u></u>	
Part XVI-B Relationship of Activities t	o the Acco	mplishment of	Exemp	t Purposes	
Line No. Explain below how each activity for which inco		. , , ,			

NOT APPLICAB	LE		
			
			
_			 -
	· · · · · · · · · · · · · · · · · · ·		
	_		
_			
			
		· · · · · · · · · · · · · · · · · · ·	

123621 12-02-11

Part Aylı	Exempt Organi		and Transactions a	nd Relationships With Noncha	intable)
1 · Did the ord		rectly engage in any of the follows	ng with any other organization	n described in section 501(c) of		Yes No
-	•)(3) organizations) or in section 5	• •			100 110
		ation to a noncharitable exempt o				
(1) Cash	• •				18(1)	X
• •	assets				1a(2)	X
b Other trans		• • •				
	of assets to a noncharital	ble exempt organization			16(1)	X
		ncharitable exempt organization		• • • • • • • • • • • • • • • • • • • •	1b(2)	X
		or other assets			1b(3)	X
	oursement arrangements		•		1b(4)	Х
					1b(5)	Х
	•	embership or fundraising solicitati	ione		1b(6)	X
		uling lists, other assets, or paid er			10	X
_		•		ways show the fair market value of the goods,	other ass	ets,
				e in any transaction or sharing arrangement,		
column (d) the value of the goods,	other assets, or services received	l			
(a) Line no	(b) Amount involved	(c) Name of noncharitab	le exempt organization	(d) Description of transfers, transactions, and	sharing arr	rangements
		N/A				
				<u> </u>		
-						
	-					
				,		
		tly affiliated with, or related to, on		zations described		
		r than section 501(c)(3)) or in sec	ction 527?		Yes	X No
b if Yes, co	mplete the following sch		100-			
NT / D	(a) Name of org	janization	(b) Type of organization	(c) Description of relation	<u>snip</u>	
N/A			<u> </u>			
	<u> </u>					
	<u> </u>					
Under	penalties of perjury, I declare	that I have examined this return, includ	ling accompanying schedules and s	statements, and to the best of my knowledge	ou the IDC	dlagues tols
Sign and be	elief, it is true, correct, and cor	mplete. Declaration of preparer (other th	nan taxpayer) is based on all informa	re	tum with the	discuss this te preparer (see instr.)?
Here	151/	S~	12/8/13	Trustee	X Yes	
Sigr	nature of officer or trustee	•	Date	Title		
	Print/Type preparer's na	AMP Preparer's	signature A	Date Check if PTIN		
		111	/h	self- employed	2002	9721
Paid	P00029					
Preparer	Firm's name ► MCG	SLADREY LLP		Firm's EIN ► 41-1	9444	Τρ
Use Only	Firm's address ► 11	Q5 ATTENITIE OF M	HE AMERICAS			
		185 AVENUE OF TI EW YORK, NY 1001		Dhana 212	-372–	1000
	I. NE	in TORRY HI TOU.	JU-2002)-PF (2011)
				Г	VIIII 220	, a m (4011)

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

Employer identification number

Name of the organization

SUSSMAN FAMILY FOUNDATION

13-3634386 C/O MCGLADREY, LLP. Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

but it must answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization SUSSMAN FAMILY FOUNDATION C/O MCGLADREY, LLP.

Employer identification number

13-3634386

Part I Contributors (see instructions). Use duplicate copies of Part I if additional sp

	Contributors (see instructions). Use duplicate copies of Part I		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BERNARD M. SUSSMAN 515 FOWLER ROAD FAR HILLS, NJ 07931	\$\$ <u>23,990.</u>	Person Payroll Noncash X (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	BERNARD M. SUSSMAN 515 FOWLER ROAD FAR HILLS, NJ 07931	\$\$ <u>23,108.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BERNARD M. SUSSMAN 515 FOWLER ROAD FAR HILLS, NJ 07931	\$\$ <u>43,328.</u>	Person Payroll Noncash X (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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
123452 01-2		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

13-3634386

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

art II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	392 SHS OF TIME WARNER CABLE COMMON STOCK		
		\$23,990.	11/15/11
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	200 SHS OF ESTEE LAUDER COMMON STOCK		
		\$ 23,108.	11/15/11
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	200 SHS OF AMAZON.COM COMMON STOCK		
		\$43,328.	_11/15/11
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
•		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
53 01-2	3-12		990, 990-EZ, or 990-PF) (

Name of org	anization		Employer Identification number					
	AN FAMILY FOUNDATION		Employed Identification Humber					
	CGLADREY, LLP.		13-3634386					
Part III	Exclusively religious, charitable, etc., indivi year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	e following line entry. For organization, , contributions of \$1,000 or less for ti	7), (8), or (10) organizations that total more than \$1,000 for the					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-	(e) Transfer of gift							
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
_		(e) Transfer of gift						
_	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	Transferrate seems add to a se	(e) Transfer of gift	Deletionship of the order of the order					
-	Transferee's name, address, an	G ZIP + 4	Relationship of transferor to transferee					

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY CASI	H INVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
CITIBANK WELLS FARGO			•	20.
TOTAL TO FORM 990-PF, PART I,	LINE 3, C	OLUMN A		22.
FORM 990-PF DIVIDEND	S AND INTE	REST FROM SI	ECURITIES	STATEMENT 2
SOURCE	GROS	S AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
WELLS FARGO		5,545.	0.	5,545.
TOTAL TO FM 990-PF, PART I, L	N 4	5,545.	0.	5,545.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES! MENT INCO		
ACCOUNTING FEES	4,800	2,4	00.	2,400.
TO FORM 990-PF, PG 1, LN 16B	4,800	2,4	00.	2,400.
FORM 990-PF	TA	AXES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		
FOREIGN TAXES FEDERAL EXCISE TAX	8: 71:		83.	0.
TO FORM 990-PF, PG 1, LN 18	798	3.	83.	0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVI MENT INC	EST- COME	(C) ADJUSTED NET INCOM		
BANK CHARGES FILING FEES	52. 60.		52.		60	
TO FORM 990-PF, PG 1, LN 23	112.		52.		60	
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKET VALUE	
COMMON STOCKS - SEE ATTACHED	STMT B	COST		344,670.	396,169	
TOTAL TO FORM 990-PF, PART I				344,670.	396,169	

SUSSMAN FAMILY FOUNDATION

EIN: 13-3634386

FOR THE YEAR ENDED 5/31/2012

CHARITABLE CONTRIBUTION SUMMARY

CK#	DATE	PAYEE	DONATIONS
501		NATIONAL MUSEUM AMERICAN JEWISH HISTORY	1,000
502		ALVIN AILEY DANCE FOUNDATION	600
503	3/1/12	ACTORS FUND OF AMERICA	5,000
531	6/9/11	PPFA	1,000
532	6/24/11	BEDMINSTER PBA LOCAL 366	100
533	8/11/11	NJ CONSERVATION FOUNDATION	1,000
534	8/31/11	AMERICAN CANCER SOCIETY	1,000
536	12/1/11	MAYOR'S ALLIANCE FOR NYC ANIMALS	250
537	12/1/11	CENTURION MINISTRIES	1,000
538	12/1/11	SOMALY MAM FOUNDATION	100
539	12/1/11	SIMON WIESENTHAL CENTER	1,000
540	12/1/11	PPFA	1,000
541	12/1/11	FAR HILLS COUNTERY DAY SCHOOL (FHCDS)	100
542	12/1/11	GALAPAGOS CONSERVANCY	1,000
543	12/1/11	DOCTORS WITHOUT BORDERS	1,000
544	12/1/11	MEMORIAL SLOAN KETTERING CANCER CENT (MSKCC)	10,000
545	12/1/11	CORNELL UNIVERSITY	5,000
546	12/1/11	CORNELL UNIVERSITY	5,000
547	12/14/11	CHILDREN'S RIGHTS	1,000
548	4/22/12	NYBG	100
549	5/21/12	FAR HILLS BEDMINSTER FIRST AID	500
		TOTAL	36,750

SUSSMAN FAMILY FOUNDATION				
EIN: 13-3634386				
PORTFOLIO SUMMARY				·
	DATE	SHS	COST BASIS	E84\/
DESCRIPTION				FMV
AMAZON INC	VAR	200	3,975	42,582
APPLE INC	4/9/07	150	14,244	86,659
BANCOLUMBIA SA	7/22/05	200	4,080	11,842
BANK OF AMERICA	3/5/04	85	6,267	625
CEMEX SA	7/20/05	442	9,154	2,448
CEMEX SA	6/8/06	6	128	31
CEMEX SA	6/17/08	15	420	83
CEMEX SA	6/9/09	17	0	94
CEMEX SA	4/3/12	19	0	106
COVIDIEN LTD (SPIN OFF FROM TYCO INT'L LTD)	4/22/02	25	525	1,295
EBAY INC	3/14/06	200	7,792	7,838
EL PASO CORP/MERGED INTO KINDER MORGAN	4/23/02	105	4,587	1,548
ESTEE LAUDER	VAR	400	3,208	21,660
EXXON MOBIL CORP	4/23/02	100	4,338	7,863
FREEPORT MCMORAN COPPER	3/24/06	268	6,057	8,587
INDEX SHARES INC	3/14/06	200	9,059	10,524
INDIA FUND INC	3/14/06	200	10,021	3,778
INDIA FUND INC	8/7/06	66	2,244	1,247
INDIA FUND INC	8/21/09	88	2,325	1,662
INTEL CORP	3/10/04	200	5,846	5,168
ISHARES TRUST FTSE/XINHUA CHINA 25 INDEX FUND	7/23/08	400	9,527	13,396
JOHNSON & JOHNSON	4/22/02	100	6,364	6,243
LAS VEGAS SANDS CORP	3/14/06	200	10,208	9,236
MICROSOFT CORP	10/10/95	400	13,813	11,676
MOTOROLA INC	7/20/05	71	5,359	3,414
NORTEL NETWORKS CORP	3/5/04	30	247	1
NYSE EURONEXT	4/9/07	100	9,752	2,431
OPENTABLE INC	2/4/11	250	21,715	9,930
POWERSHARES TRUST	4/22/02	100	3,574	6,206
RAYTHEON CO	4/22/02	100	3,885	5,032
RED HAT, INC	3/10/04	200	3,820	10,276
SAP AG	4/23/02	100	3,502	5,732
SCHULMBERGER LTD	3/10/04	200	6,657	12,650
SOUTHERN COPPER CORP	10/19/06	150	2,643	4,305
SOUTHERN COPPER CORP	7/10/08	300	5,287	8,611
SUNCOR ENERGY INC	3/4/04	942	13,006	25,425
TIME WARNER CABLE	VAR	392	2,210	29,557
USG CORP	2/1/91	200	17,816	3,084
USG CORP	7/28/06	200	8,000	3,084
WELLS FARGO & CO	12/15/88	19	4,704	609
WAL MART STORES INC	4/23/02	100	5,969	6,582
WASHINGTON MUTUAL	4/22/02	140	5,129	0,382
YAHOO INC	3/14/06	200	6,180	3,048
TOTAL	_	7.000	262 620	206 460
TOTAL		7,880	263,638	396,169
				AGREE TO
				BROKERAGE
				MT @5/31/12

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 a	are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			X	
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	omplete only Part II (on page 2 of t	his form).	•		
Do not co	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	ly filed Fo	orm 8868.		
	ic filing (e-file). You can electronically file Form 8868 if y						
	to file Form 990-T), or an additional (not automatic) 3-moi						
	file any of the forms listed in Part I or Part II with the exc						
	Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details o	n the ele	ctronic filing of this f	orm,	
	urs gov/efile and click on e-file for Charities & Nonprofits			-dd\			
Part I	Automatic 3-Month Extension of Time						
	ation required to file Form 990-T and requesting an autor	natic 6-mo	inth extension - check this box and t	complete	_		
Part I onl	y					_	
	ome tax returns.		usis must use roim roo4 to reques				
Type or	Name of exempt organization or other filer, see instru	ctions.		Employe	r identification numb	er (EIN) or	
print	SUSSMAN FAMILY FOUNDATION			(Te)	12 262420	_	
File by the	C/O MCGLADREY, LLP.			<u> </u>	13-363438		
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, s C/O 1185 AVENUE OF THE AME!		tions.	Social se	ecurity number (SSN))	
instructions	City, town or post office, state, and ZIP code. For a following YORK, NY 10036	oreign add	ress, see instructions.				
	TALK TOTAL, NT TOOS		· · · · · · · · · · · · · · · · · · ·				
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
Applicat	ion	Return	Application			Return	
Is 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)-PF	04	Form 5227			10	
Form 990	O-T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990	O-T (trust other than above)	06	Form 8870		 	12	
	MCGLADREY, LLP		AMEDICA CONTRACTOR		10026		
	ooks are in the care of 1185 AVENUE OF	THE A		K, NY	10036		
	hone No. ► 212-372-1000	Al 1 I-	FAX No. D	 -			
	organization does not have an office or place of business is for a Group Return, enter the organization's four digit					book this	
box 🏲	. If it is for part of the group, check this box	1					
	equest an automatic 3-month (6 months for a corporation				Ders trie exterision is	101	
	JANUARY 15, 2013, to file the exemp				. The extension		
is f	or the organization's return for:	•	3 3				
>	calendar year or				RECE	IVED	
>	X tax year beginning JUN 1, 2011	, an	d ending <u>MAY 31, 2012</u>				C
2 If t	he tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retu	m FEB 1	2 2013	RS-OS
- ï	Change in accounting period						S.
_	onango m cooodining ponot				OGDE	AL LIT	1
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any		TE VOUE	14, U I	
	nrefundable credits. See instructions.		· · ·	3a	\$	0.	
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and				
	timated tax payments made. Include any prior year over			_ 3b	\$	0.	
	lance due. Subtract line 3b from line 3a. Include your pa					-,	
	using EFTPS (Electronic Federal Tax Payment System).			3c	<u></u>	0.	
Caution	. If you are going to make an electronic fund withdrawal w	with this Fo	orm 8868, see Form 8453-EO and Fo	om 8879	EO for payment inst	ructions.	
LHA I	For Privacy Act and Paperwork Reduction Act Notice,	see Instr	uctions.		Form 8868 (Re	v. 1·2012)	

	88 (Rev. 1·2012)					Page 2
	are filing for an Additional (Not Automatic) 3-Month Ex					> X
	ly complete Part II if you have already been granted an a			iled Form	8868.	
	are filing for an Automatic 3-Month Extension, comple			201 (20 0	opice -	
Part II	Additional (Not Automatic) 3-Month E	xtensio				
	1		Enter filer's			er, see instructions
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	r identific	ation number (EIN) or
print	SUSSMAN FAMILY FOUNDATION			(X)	12_	3634386
File by the due date for	C/O MCGLADREY, LLP.		**			
filing your return. See	Number, street, and room or suite no. If a P.O. box, s 1185 AVENUE OF THE AMERICAS	ee instruc	tions.	SOCIBL SE	cunty nu	imber (SSN)
Instructions	City, town or post office, state, and ZIP code. For a for NEW YORK, NY 10036	oreign add	Iress, see instructions.			
F-40-4b-	Datum and far the return that this analisation is far this		to application for each return)			04
	Return code for the return that this application is for (fik	т	te application for each return)			
Applicat	ion	Return	Application			Return
ls For		Code	Is For		_, -	Code
Form 990		01		*************		
Form 990		02	Form 1041-A			08
Form 990		01	Form 4720			09
Form 990		04	Form 5227			10
	O-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	O-T (trust other than above)	06	Form 8870			12
STOPLU	o not complete Part II If you were not already granted MCGLADREY, LLP		natic 3-month extension on a prev	MOUSIY THE	M Form	8868.
	ocks are in the care of > 1185 AVENUE OF		AMEDICAS - NEW VOD	K NV	100	36
	hone No. ► 212-372-1000	11115	FAX No. >	141	100	30
•		a ia tha l le				
	organization does not have an office or place of busines is for a Group Return, enter the organization's four digit					
box >	. If it is for part of the group, check this box		ach a list with the names and EINs o			
	equest an additional 3-month extension of time until		L 15, 2013	r aut monit	ers me e	A(ension is ion,
			, 2011 and endir	MAY	31.	2012 .
	the tax year entered in line 5 is for less than 12 months, or			Final		
, <u>"</u> ,	Change in accounting period	ATTOCK TOOL			O.O.	
7 St	ate in detail why you need the extension					
	HE TAXPAYER NEEDS ADDITIONAL	TIME	TO OBTAIN THE INF	ORMAT	ION	NECESSARY
	N ORDER TO PREPARE AND FILE					
8a 1f 1	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any		1	
no	nrefundable credits. See Instructions.			8a	\$	0.
b If t	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
ta	x payments made. Include any prior year overpayment a	lowed as	a credit and any amount paid	<u> </u>		
pi	reviously with Form 8868.			86	\$	0.
c Be	alance due. Subtract line 8b from line 8a. Include your pa	ayment wi	th this form, if required, by using		1	
EF	TPS (Electronic Federal Tax Payment System). See instr			8c	\$	0.
	Signature and Verificat	tion mu	st be completed for Part II	only.		
Under per	naities of perjury, I declare that I have examined this form, include	ing accom	panying schedules and statements, and t	o the best o	f my knov	wledge and belief,
	correct, and complete, and that I am authorized to prepare this f	omi. CP	4	_	_	hali
Signature	Title >	م ب	<i></i>	Date		110/13
	1				For	rm 8868 (Rev. 1-2012)