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

2011

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

For calendar year 2011, or tax year beginning Dec 1, 2011, and ending Nov 30, 2012

Name of foundation JAMES E. ROBISON FOUNDATION, INC.		A Employer identification number 13-6075171
Number and street (or P.O. box number if mail is not delivered to street address) 17 GREENBRIAR CIRCLE		B Telephone number (see the instructions) (914) 273-3121
City or town ARMONK	State ZIP code NY 10504	C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial Return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 2,282,806.	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (att sch)	0.			
2 <input checked="" type="checkbox"/> If the foundn is not req to att Sch B				
3 Interest on savings and temporary cash investments	0.	0.	0.	
4 Dividends and interest from securities	52,826.	52,826.	52,826.	
5a Gross rents				
b Net rental income or (loss)				
6a Net gain/(loss) from sale of assets not on line 10	9,811.			
b Gross sales price for all assets on line 6a	177,611.			
7 Capital gain net income (from Part IV, line 2)		9,811.		
8 Net short-term capital gain			0.	
9 Income modifications			0.	
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit/(loss) (att sch)				
11 Other income (attach schedule)	0.	0.	0.	
12 Total. Add lines 1 through 11	62,637.	62,637.	52,826.	
13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
14 Other employee salaries and wages	0.	0.	0.	0.
15 Pension plans, employee benefits	0.	0.	0.	0.
16a Legal fees (attach schedule)	0.	0.	0.	0.
b Accounting fees (attach sch) L-16b Stmt	18,000.	9,000.	9,000.	9,000.
c Other prof fees (attach sch) L-16c Stmt	13,523.	13,523.	13,523.	0.
17 Interest	0.	0.	0.	0.
18 Taxes (attach schedule)(see instrs) See Line 18 Stmt	-2,285.	153.	0.	0.
19 Depreciation (attach sch) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) See Line 23 Stmt	672.	30.	30.	642.
24 Total operating and administrative expenses. Add lines 13 through 23	29,910.	22,706.	22,553.	9,642.
25 Contributions, gifts, grants paid	124,700.			124,700.
26 Total expenses and disbursements. Add lines 24 and 25	154,610.	22,706.	22,553.	134,342.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-91,973.			
b Net investment income (if negative, enter -0-)		39,931.		
c Adjusted net income (if negative, enter -0-)			30,273.	

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ADMINISTRATIVE AND EXPENSES

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Part II Balance Sheets		Beginning of year		End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
ASSETS	1 Cash — non-interest-bearing	74.	103,766.	103,766.	
	2 Savings and temporary cash investments	381,451.	8,591.	8,591.	
	3 Accounts receivable				
	Less allowance for doubtful accounts				
	4 Pledges receivable				
	Less allowance for doubtful accounts				
	5 Grants receivable	0.			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)	0.			
	7 Other notes and loans receivable (attach sch)				
	Less allowance for doubtful accounts	0.			
	8 Inventories for sale or use	0.			
	9 Prepaid expenses and deferred charges	0.			
	10a Investments — U S and state government obligations (attach schedule)	1,052,319.			
	b Investments — corporate stock (attach schedule) L-10b Stmt	763,651.	1,178,764.	1,341,621.	
	c Investments — corporate bonds (attach schedule) L-10c Stmt		814,437.	828,828.	
	11 Investments — land, buildings, and equipment basis				
Less accumulated depreciation (attach schedule)					
12 Investments — mortgage loans					
13 Investments — other (attach schedule)					
14 Land, buildings, and equipment basis					
Less accumulated depreciation (attach schedule)					
15 Other assets (describe)					
16 Total assets (to be completed by all filers — see the instructions. Also, see page 1, item i)	2,197,495.	2,105,558.	2,282,806.		
LIABILITIES	17 Accounts payable and accrued expenses	0.	0.		
	18 Grants payable	0.	0.		
	19 Deferred revenue	0.	0.		
	20 Loans from officers, directors, trustees, & other disqualified persons	0.	0.		
	21 Mortgages and other notes payable (attach schedule)	0.	0.		
	22 Other liabilities (describe)	0.	0.		
	23 Total liabilities (add lines 17 through 22)	0.	0.		
NET ASSETS OR FUND BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>				
	27 Capital stock, trust principal, or current funds	0.	0.		
	28 Paid-in or capital surplus, or land, building, and equipment fund	0.	0.		
	29 Retained earnings, accumulated income, endowment, or other funds	2,197,495.	2,105,558.		
	30 Total net assets or fund balances (see instructions)	2,197,495.	2,105,558.		
	31 Total liabilities and net assets/fund balances (see instructions)	2,197,495.	2,105,558.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,197,495.
2 Enter amount from Part I, line 27a	2	-91,973.
3 Other increases not included in line 2 (itemize) <input type="checkbox"/> ROUNDING	3	36.
4 Add lines 1, 2, and 3	4	2,105,558.
5 Decreases not included in line 2 (itemize) <input type="checkbox"/>	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	2,105,558.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a 100,000 FEDERAL FARM CREDIT	P	02/02/11	02/02/12
b 700 SHARES GILLEAD SCIENCES	P	09/21/10	12/07/11
c 1,600 SHARES STAPLES INC	P	10/14/10	10/19/12
d 300 SHARES MONSANTO	P	10/20/10	07/24/12
e BROADCOM SECURITY LITIGATION	P	10/31/10	05/31/12

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 100,000.	0.	100,000.	0.
b 27,815.	0.	19,431.	8,384.
c 23,920.	0.	32,077.	-8,157.
d 25,864.	0.	16,292.	9,572.
e 12.	0.	0.	12.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Column (h) gain minus column (k), but not less than -0) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			0.
b			8,384.
c			-8,157.
d			9,572.
e			12.

2 Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	9,811.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2010	160,866.	2,297,909.	0.070005
2009	178,899.	2,322,941.	0.077014
2008	99,572.	2,151,411.	0.046282
2007	175,624.	2,838,145.	0.061880
2006	115,000.	3,275,966.	0.035104

2 Total of line 1, column (d)	2	0.290285
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.058057
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	2,230,758.
5 Multiply line 4 by line 3	5	129,511.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	399.
7 Add lines 5 and 6	7	129,910.
8 Enter qualifying distributions from Part XII, line 4	8	134,342.

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

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

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1			
• Date of ruling or determination letter <u>10/20/70</u> (attach copy of letter if necessary – see instrs)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	399.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (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	399.
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	399.
6 Credits/Payments			
a 2011 estimated tax pmts and 2010 overpayment credited to 2011	6 a	6,000.	
b Exempt foreign organizations – tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments. Add lines 6a through 6d	7	6,000.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	5,601.	
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax <u>2,000.</u> Refunded	11	3,601.	

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		X
<i>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</i>		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <u>\$</u> (2) On foundation managers <u>\$</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <u>\$</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities</i>		X
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? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>See States Registered In</u>		
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 <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>	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)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	X	
14	The books are in care of DORIS STANLEY Telephone no (914) 273-3121 Located at 17 GREENBRIAR CIRCLE ARMONK NY ZIP + 4 10504-1353			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the name of the foreign country	16	Yes	No X

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

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

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

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is 'Yes' to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here

☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?☐ Yes ☐ No

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

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

6b

If 'Yes' to 6b, file Form 8870

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?

7b N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MARTHA A. DAVIES 976 SHAW HILL ROAD STOWE VT 06672	PRESIDENT 2.00	0.	0.	0.
ANNABEL DAVIES MOYNIHAN 2553 GREGG HILL ROAD WATERBURY CENTER VT 05677	VICE PRESIDENT 0.00	0.	0.	0.
DORIS STANLEY 17 GREENBRIAR CIRCLE ARMONK NY 10504	SECRETARY/TREASURER/MAN 20.00	18,000.	0.	0.
See Information about Officers, Directors, Trustees, Etc.		0.	0.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
0				
0				
0				
0				

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

None

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		None

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1	
2	
3	
4	
	NONE

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

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

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1 a	2,038,495.
b Average of monthly cash balances	1 b	226,234.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	2,264,729.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	2,264,729.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	33,971.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,230,758.
6 Minimum investment return. Enter 5% of line 5	6	111,538.

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

1 Minimum investment return from Part X, line 6		1	111,538.
2a Tax on investment income for 2011 from Part VI, line 5	2 a	399.	
b Income tax for 2011 (This does not include the tax from Part VI)	2 b		
c Add lines 2a and 2b	2 c		399.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3		111,139.
4 Recoveries of amounts treated as qualifying distributions	4		
5 Add lines 3 and 4	5		111,139.
6 Deduction from distributable amount (see instructions)	6		
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7		111,139.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	134,342.
b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	134,342.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	399.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	133,943.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				111,139.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2011				
a From 2006	0.			
b From 2007	55,198.			
c From 2008	106,076.			
d From 2009	115,893.			
e From 2010	161,174.			
f Total of lines 3a through e	438,341.			
4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 134,342.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2011 distributable amount				0.
e Remaining amount distributed out of corpus	134,342.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	111,139.			111,139.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	461,544.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	461,544.			
10 Analysis of line 9				
a Excess from 2007	0.			
b Excess from 2008	50,135.			
c Excess from 2009	115,893.			
d Excess from 2010	161,174.			
e Excess from 2011	134,342.			

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

N/A

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

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

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2011	(b) 2010	(c) 2009	(d) 2008	
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon				
a 'Assets' alternative test — enter			N/A	
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				
c 'Support' alternative test — enter				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year — see instructions.)**1 Information Regarding Foundation Managers:**

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

NONE

See Information Regarding Foundation Managers

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

NONE

See Managers Owning More Than 10%

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

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

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

N/A

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

N/A

- c** Any submission deadlines

N/A

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

N/A

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ABBOTT HOUSE 100 NORTH BROADWAY IRVINGTON NY 10533		501-C3	DISABLED POPULATION	8,000.
UNIVERSITY OF VERMONT 106 HIGH POINT CTR. COLECHESTER VT 05446		501-C3	SAVE THE ISLAND POND	3,000.
GREEN MOUNTAIN PERFORMING ARTS 37 COMMERCIAL DRIVE WATERBURY VT 06676		501-C3	GENERAL	2,000.
VERMONT SYMPHONY 2 CHURCH STREET - SUITE 3B BURLINGTON VT 05401		501-C3	CAPITAL CAMPAIN	7,500.
STOWE LAND TRUST P. O. BOX 284 STOWE, VT 05672		501-C3	PROTECT FOREST LAND	2,000.
VERMONT COMMUNITY FOUNDATION 3 COOURT STREET MIDDLEBURY VT 05753		501-C3	WOMEN'S FUND	1,200.
NEW YORK LIFE ARTS 219 WEST 19TH STR. NEW YORK NY 10011		501-C3	GENERAL	5,000.
RINGSIDE INC 51 NORTH 1ST STR. BROOKLYN NY 11211		501-C3	GENERAL	1,500.
HALEAKALA INC 512 W 19TH STREET NEW YORK NY 10011		501-C3	GENERAL	15,000.
See Line 3a statement				79,500.
Total			3a	124,700.
b Approved for future payment				
Total			3b	0.

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
FEDERAL EXCISE TAXES	-2,438.	0.	0.	0.
FOREIGN TAXES	153.	153.	0.	0.
Total	-2,285.	153.	0.	0.

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
LEGAL ADVERTISING	39.	0.	0.	39.
FILING FEES	534.	0.	0.	534.
DEPOSIT FEES	30.	30.	30.	0.
CHECKBOOK FEE	34.	0.	0.	34.
IRS FEES	35.	0.	0.	35.
Total	672.	30.	30.	642.

Form 990-PF, Page 4, Part VII-A, Line 8a

States Registered In

DE - Delaware

NY - New York

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> APRIL DAVIES TAYLOR 976 SHAW HILL ROAD STOWE VT 05672	ASSISTANT SECRETARY 0.00	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> MICHAEL A. FOLEY 142 RUSSELL STREET CARLISLE MA 01741	TRUSTEE/DIRECTOR 0.00	0.	0.	0.

Total

0. 0. 0.

Form 990-PF, Page 10, Part XV, Line 1a

Information Regarding Foundation Managers

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

NONE

Form 990-PF, Page 10, Part XV, Line 1b

Managers Owning More Than 10%

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

NONE

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a <i>Paid during the year</i>				
CUNNINGHAM DANCE FOUNDATION				Person or <input type="checkbox"/>
55 BETHUNE STREET		501-C3		Business <input type="checkbox"/>
MEW TORK NY 10014			GENERAL	10,000.
THE WOOSTER GROUP				Person or <input type="checkbox"/>
P.O. BOX 654		501-C3		Business <input type="checkbox"/>
NEW YORK NY 10013			GENERAL	2,000.
CRADLE TO GRAVE ARTS				Person or <input type="checkbox"/>
P.O. BOX 8				Business <input type="checkbox"/>
CHELSEA VT 05038		501-C3	GENERAL	1,500.
PING CHONG				Person or <input type="checkbox"/>
47 GREAT JONES STREET - 6TH FLOOR				Business <input type="checkbox"/>
NEW YORK NY 10012		501-C3	GENERAL	1,000.
TERE O'CONNOR DANCE				Person or <input type="checkbox"/>
42 HORATIO STREET # 9				Business <input type="checkbox"/>
NEW YORK NY 10014		501-C3	GENERAL	1,000.
BROOKLYN ACADEMY OF MUSIC				Person or <input type="checkbox"/>
30 LAFAYETTE AVENUE				Business <input type="checkbox"/>
BROOKLYN NY 11217		501-C3	GENERAL	1,000.
VERMONT LAND TRUST				Person or <input type="checkbox"/>
8 BAILEY AVENUE				Business <input type="checkbox"/>
MONTPELIER VT 05602		501-C3	GENERAL	1,000.
826 MICHIGAN				Person or <input type="checkbox"/>
115 EAST LIBERTY STREET				Business <input type="checkbox"/>
ANN ARBOR MI 48104-2109		501-C3	GENERAL	2,000.
DOCTORS WITHOUT BORDERS				Person or <input type="checkbox"/>
P.O. BOX 5023				Business <input type="checkbox"/>
HAGERSTOWN MD 21741		501-C3	GENERAL	1,500.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a <i>Paid during the year</i>				
HELEN DAY ART CENTER				Person or <input type="checkbox"/>
90 POND STREET				Business <input type="checkbox"/>
STOWE VT 05672		501-C3	GENERAL	2,000.
NORTH CENTRAL MISSOURI COLLEGE				Person or <input type="checkbox"/>
1301 MAIN STREET				Business <input type="checkbox"/>
TRENTON MO 64683		501-C3	GENERAL	5,000.
VERMONT COMMUNITY FOUNDATION				Person or <input type="checkbox"/>
3 COURT STREET				Business <input type="checkbox"/>
MIDDLEBURY VT 05753		501-C3	GENERAL	1,000.
PLANNED PARENTHOOD VERMONT				Person or <input type="checkbox"/>
128 LAKESIDE AVE UITE 301				Business <input type="checkbox"/>
BURLINGTON VT 05401		501-C3	GENERAL	1,000.
POPULATION CONTRUL INTERNATIONAL				Person or <input type="checkbox"/>
777 UNITED NATIONS PLAZA				Business <input type="checkbox"/>
NEW YORK NY 10017		501-C3	GENERAL	1,000.
PUBLICOLOR				Person or <input type="checkbox"/>
149 MADISOB AVENEU - SUITE 1201				Business <input type="checkbox"/>
NEW YORK NY 10016		501-C3	GENERL	500.
THE FRESH AIR FUND				Person or <input type="checkbox"/>
633 THIRD AVENUE				Business <input type="checkbox"/>
NEW YORK NY 10164		501-C3	GENERAL	500.
CHEZ BUSHWICK				Person or <input type="checkbox"/>
304 BEGUM STREET #23				Business <input type="checkbox"/>
NEW YORK NY 11206		501-C3	GENERAL	500.
CONTACT QUARTERLY				Person or <input type="checkbox"/>
P.O. BOX 603				Business <input type="checkbox"/>
NORTHAMPTON MA 01061		501-C3	GENERAL	1,500.
DANSPLACE				Person or <input type="checkbox"/>
131 EAST 10TH STREET				Business <input type="checkbox"/>
NEW YORL NY 10003		501-C3	GENERAL	3,000.
THE FLYNN THEATRE				Person or <input type="checkbox"/>
153 MAIN STREET				Business <input type="checkbox"/>
BURLINGTON VT 05401		501-C3	GENERAL	4,000.
HARVESTWORKS				Person or <input type="checkbox"/>
596 BROADWAY SUITE 602				Business <input type="checkbox"/>
NEW YORK NY 10012		501-C3	GENERAL	1,500.
ISSUE PROJECT ROOM				Person or <input type="checkbox"/>
232 3RD STREET, 3RD FLOOR				Business <input type="checkbox"/>
BROOKLYN NY 11215		501-C3	FENERAL	1,500.
LA MAMA EXPERIMENTAL THEATRE				Person or <input type="checkbox"/>
74A EAST 47TH STREET				Business <input type="checkbox"/>
NEW YORK NY 10003		501-C3	GENERAL	2,500.
MAPP INTERNATIONAL				Person or <input type="checkbox"/>
140 SECOND AVENNUE -SUITE 502				Business <input type="checkbox"/>
NEW YORK NY 10003		501-C3	GENERAL	500.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
MOVEMENT RESEARCH				Person or <input type="checkbox"/>
55 AVENUE C				Business <input type="checkbox"/>
NEW YORK NY 10009		501-C3	GENERAL	3,000.
OTHER MINDS				Person or <input type="checkbox"/>
333 VALENCIA STREET - SUITE 303				Business <input type="checkbox"/>
SAN FRANCISCO CA 94103		501-C3	GENERAL	1,000.
PERFORMANCE SPACE 122				Person or <input type="checkbox"/>
67 WEST STREET UNIT 315				Business <input type="checkbox"/>
BROOKLYN NY 11222		501-C3	GENERAL	1,000.
PICK UP PERFORMANCE CO.				Person or <input type="checkbox"/>
440 WEST 34TH STREET # 5B				Business <input type="checkbox"/>
NEW YORK NY 10001		501-C3	GENERAL	1,500.
ROULETTE EINSTEIN				Person or <input type="checkbox"/>
30 THIRD AVENUE # 208				Business <input type="checkbox"/>
BROOKLYN NY 11217		501-C3	GENERAL	1,500.
THE HOUSE FOUNDATION				Person or <input type="checkbox"/>
260 WEST BROADWAY, SUITE 2				Business <input type="checkbox"/>
NEW YORK NY 10013		501-C3	GENERAL	2,000.
STOWE SUMMER MUSIC FESTIVAL				Person or <input type="checkbox"/>
P.O. BOX 373				Business <input type="checkbox"/>
STOWE VT 05672		501-C3	GENERAL	2,000.
VERMONT FARM WOMEN'S FD. C/O UVM				Person or <input type="checkbox"/>
617 COMSTOCK AVENUE - SUITE 5				Business <input type="checkbox"/>
BERLIN VT 05602		501-C3	GENERAL	500.
GREEN MOUNTAIN PERFORMING ARTS				Person or <input type="checkbox"/>
37 COMMERCIAL DRIVE				Business <input type="checkbox"/>
WATERBURY VT 05676		501-C3	GENERAL	3,000.
TICKLE THE SLEEPING GIANT				Person or <input type="checkbox"/>
600 FIFTH AVENUE				Business <input type="checkbox"/>
NEW YORK NY 11215		501-C3	GENERAL	2,000.
STOWE LAND TRUST				Person or <input type="checkbox"/>
P.O. BOX 284				Business <input type="checkbox"/>
STOWE VT 05672		501-C3	GENERAL	5,000.
BLOOMSBURG THEATRE CO.			NOH	Person or <input type="checkbox"/>
226 CENTER STREET			TRAINING	Business <input type="checkbox"/>
BLOOMSBURG PA 17515		501-C3	PROJECT	4,000.
TICKLE THE SLEEPING GIANT				Person or <input type="checkbox"/>
600 FIFTH AVENUE				Business <input type="checkbox"/>
NEW YORK NY 11215		501-C3	GENERAL	3,000.
HELEN DAY ART CENTER				Person or <input type="checkbox"/>
90 POND STREET				Business <input type="checkbox"/>
STOWE VT 05672		501-C3	GENERAL	3,000.

Total

79,500.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
ACE LTD	36,788.	39,615.
ANHEUSER BUSH INVEB SA/NV	28,702.	43,985.
BAXTER INTERNATIONAL	23,120.	33,135.
BOOMBADIER	16,090.	10,530.
CELANESE CORP	12,794.	16,416.
CENTURYLINK	23,599.	23,304.
CHEVRON CORP	23,721.	31,977.
CISCO	17,368.	13,335.
CORNING INC.	31,313.	22,176.
EMC CORP	18,008.	24,820.
EMERSON ELECTRIC	30,338.	30,384.
GENERAL ELECTRIC	31,954.	42,260.
GOOGLE	12,982.	17,459.
HEINZ H J CO	38,432.	46,768.
HONEYWELL INTL INC	25,864.	37,044.
INTEL CORP	20,860.	21,769.
INTERNATIONAL BUSINESS MACHINES	27,048.	38,184.
JP MORGAN CHASE	36,484.	41,080.
KRAFT FOODS	13,151.	13,572.
LOWES COMPANIES	22,795.	36,090.
MEAD JOHNSON	16,569.	20,457.
MICROSOFT	43,369.	45,637.
MONDELEZ INTERNATIONAL INC.	12,548.	12,945.
OCCIDENTAL PETROLEUM CORP.	24,292.	22,563.
PEPSICO	48,753.	52,658.
PFIZER	29,480.	37,860.
PROCTOR & GAMBLE	12,220.	13,966.
QUALCOM	17,397.	19,086.
QUESTAR	26,022.	29,685.
RIO TINTO PLC	10,192.	7,470.
ROLLS ROYCE GROUP PLC	18,764.	28,778.
SCHLUMBERGER	36,090.	35,948.
SPECTRA ENERGY GROUP	33,687.	42,383.
ST. JUDE MEDICAL	38,324.	34,280.
STATE STREET CORP.	20,016.	22,220.
TARGET CORP.	29,427.	38,094.
TEVA PHARMACEUTICALS	25,210.	20,303.
TIME WARNER	34,881.	47,560.
UNITED PARCEL SERVICE	28,129.	29,472.
US BANCORP DELAWARE	22,432.	32,260.
UTD O/S BANK SGD1	31,363.	33,745.
VANGUARD INTERNATIONAL EQUITY INDEX FUNDS	22,211.	21,008.
VODAPHONE GROUP PLC	24,350.	26,314.
WASTE MANAGEMENT INC	42,003.	39,510.
XILINX INC.	15,736.	17,325.
XYLEM INC.	23,888.	26,191.
Total	<u>1,178,764.</u>	<u>1,341,621.</u>

Form 990-PF, Page 2, Part II, Line 10b

Continued

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
LOWES COMPANIES	22,795.	36,090.
MEAD JOHNSON	16,569.	20,457.
MICROSOFT	43,369.	45,637.
MONDELEZ INTERNATIONAL INC.	12,548.	12,945.
OCCIDENTAL PETROLEUM CORP.	24,292.	22,563.
PEPSICO	48,753.	52,658.
PFIZER	29,480.	37,860.
PROCTOR & GAMBLE	12,220.	13,966.
QUALCOM	17,397.	19,086.
QUESTAR	26,022.	29,685.
RIO TINTO PLC	10,192.	7,470.
ROLLS ROYCE GROUP PLC	18,764.	28,778.
SCHLUMBERGER	36,090.	35,948.
SPECTRA ENERGY GROUP	33,687.	42,383.
ST. JUDE MEDICAL	38,324.	34,280.
STATE STREET CORP.	20,016.	22,220.
TARGET CORP.	29,427.	38,094.
TEVA PHARMACEUTICALS	25,210.	20,303.
TIME WARNER	34,881.	47,560.
UNITED PARCEL SERVICE	28,129.	29,472.
US BANCORP DELAWARE	22,432.	32,260.
UTD O/S BANK SGD1	31,363.	33,745.
VANGUARD INTERNATIONAL EQUITY INDEX FUNDS	22,211.	21,008.
VODAPHONE GROUP PLC	24,350.	26,314.
WASTE MANAGEMENT INC	42,003.	39,510.
XILINX INC.	15,736.	17,325.
XYLEM INC.	23,888.	26,191.
Total	<u>1,178,764.</u>	<u>1,341,621.</u>

Form 990-PF, Page 2, Part II, Line 10c

L- 10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
JP MORGAN CHASE	100,218.	102,083.
METLIFE	101,928.	102,848.
GENERAL ELECTRIC	104,863.	105,829.
BERKSHIRE HATHAWAY	105,201.	106,492.
CITIGROUP	49,900.	51,789.
US BANCORP	50,841.	52,842.
HEWLETT PACKARD CO.	100,222.	98,351.
DU PONT E I DE NEMOURS & CO	100,378.	104,254.
TORONTO DOMINION BANK SHARES UNSECURED	51,247.	52,777.
BHP BILLITIN FIN USA LTD	49,639.	51,563.
Total	<u>814,437.</u>	<u>828,828.</u>

Supporting Statement of:

Form 990-PF, p1/Line 18(a)-1

Description	Amount
ESTIMATED TAXES PAID	4,000.
UNITE STATES TREASUR - REFUND RE. Y/E 11/30/10	-2,746.
UNITED STATE TREASURY - REFUND RE. Y/E 11/30/11	-3,692.
Total	<u>-2,438.</u>

Supporting Statement of:

Form 990-PF, p1/Line 18(a)-2

Description	Amount
CANADA	46.
ISRAEL	107.
Total	<u>153.</u>

Supporting Statement of:

Form 990-PF, p1/Line 23(a)-1

Description	Amount
JOURNAL NEWS	39.
Total	<u>39.</u>

Supporting Statement of:

Form 990-PF, p1/Line 23(a)-2

Description	Amount
NEW YORK STATE DEPARTMENT OF LAW	250.
CT CORPORATION	284.
Total	<u>534.</u>

Supporting Statement of:

Form 990-PF, p12/Line 4 Column (b)

Description	Amount
ACE LTD	631.

Continued

Supporting Statement of:

Form 990-PF, pl2/Line 4 Column (b)

Description	Amount
ANEUSER BUSH INVEB SA/NV	570.
BANK OF AMERICA	160.
BAXTER INTERNATIONAL	803.
BERKSHIRE HATHAWAY	3,200.
BHP BILLINGTON FIN USA LTD	406.
BOMBADIER	230.
CELANESE COPR	108.
CENTURY LINK	870.
CHEVRON CORP	1,026.
CISCO	252.
CITICORP	674.
CORNING	540.
DUPONT E I DEMOURS	1,950.
EMERSON ELECTRIC	960.
FEDERAL FARM CREDIT BKS CONS 2%	1,000.
GENENTECH	340.
GENERAL ELECTRIC	3,750.
GENERAL ELECTRIC	1,020.
HEINZ	1,592.
HEWLETT PACKARD	2,125.
HONEYWELL	894.
INTEL CORP	941.
INTERNATIONAL BUSINESS MACHINES	640.
JP MORGAN	1,650.
JP MORGAN CHASE	1,150.
LOWES COMPANIES INC	600.
MEAD JOHNSON	348.
METLIFE	2,375.
MICROSOFT	1,360.
MONSANTO	270.
OCCIDENTAL PETROLEUM	470.
PEPSICO	1,579.
PFIZER	1,290.
PROCTOR & GAMBLE	225.
QUALCOM	168.
QUESTAR	986.
RIO TINTO	248.
SCHLUMBERGER	513.
SPECTRA ENERGY	1,680.
ST. JUDE MEDICAL	900.
STAPLES	160.
STATE STREET CORP	450.
TARGET	726.
TEVA PHARMACEUTICAL	494.
TIME WARNER CABLE	768.
TORONTO DOMINION BANK NOTES 2.375%	1,188.
UNITED PARCEL SERVICE	684.
UNITED STATES TREASURY	49.
US BANCORP DEL	613.
US BANCORP DEL	710.
US BANCORP SR. MTN	613.
UTD O/S BANK	1,049.
VANGUARD INTERNATIONAL EQUITY INDEX FUND	716.

Continued

Supporting Statement of:

Form 990-PF, p12/Line 4 Column (b)

Description	Amount
VODAPHONE	2,105.
WASHINGTON MUTUAK	426.
WASTE NABAGEMENT	1,260.
XILINX	220.
XYLEM INC	101.
Total	<u>52,826.</u>

JAMES E. ROBISON FOUNDATION
13-6075171
YEAR ENDED NOVEMBER 30, 2012

STATEMENT

					<u>Line 1 b</u>	<u>Line 1 d</u>
PART X		FMV	Cash	Cash		
		Securities	United States	Bank of America		
		United States	United States	Checking		
		Trust Co	Trust Co	Account		
<u>MINIMUM INVESTMENT RETURN</u>		Management	Management	Total	Total	Total
		Account	Account	Cash	Cash and	Securities
December	Beginning	1,882,690	381,451	74	381,526	2,264,216
	Ending	1,857,132	388,900	3,869	392,769	2,249,901
	Average	1,869,911	385,176	1,972	387,147	2,257,058
January	Beginning	1,857,132	388,900	3,869	392,769	2,249,901
	Ending	1,924,696	309,213	12,169	321,382	2,246,077
	Average	1,890,914	349,056	8,019	357,075	2,247,989
February	Beginning	1,924,696	309,213	12,169	321,382	2,246,077
	Ending	1,858,406	406,655	7,669	414,324	2,272,730
	Average	1,891,551	357,934	9,919	367,853	2,259,404
March	Beginning	1,858,406	406,655	7,669	414,324	2,272,730
	Ending	2,035,820	262,714	1,669	264,384	2,300,203
	Average	1,947,113	334,685	4,669	339,354	2,286,467
April	Beginning	2,035,820	262,714	1,669	264,384	2,300,203
	Ending	2,109,160	179,390	669	180,059	2,289,219
	Average	2,072,490	221,052	1,169	222,222	2,294,711
May	Beginning	2,109,160	179,390	669	180,059	2,289,219
	Ending	2,015,337	174,287	669	174,957	2,190,294
	Average	2,062,248	176,839	669	177,508	2,239,756
June	Beginning	2,015,337	174,287	669	174,957	2,190,294
	Ending	2,067,801	172,163	647	172,810	2,240,611
	Average	2,041,569	173,225	658	173,883	2,215,452
July	Beginning	2,067,801	172,163	647	172,810	2,240,611
	Ending	2,124,410	133,276	647	133,923	2,258,333
	Average	2,096,105	152,720	647	153,367	2,249,472
August	Beginning	2,124,410	133,276	647	133,923	2,258,333
	Ending	2,140,563	135,002	147	135,150	2,275,712
	Average	2,132,486	134,139	397	134,536	2,267,023
September	Beginning	2,140,563	135,002	147	135,150	2,275,712
	Ending	2,168,531	140,150	263	140,413	2,308,945
	Average	2,154,547	137,576	205	137,781	2,292,328
October	Beginning	2,168,531	140,150	263	140,413	2,308,945
	Ending	2,133,515	137,625	74	137,699	2,271,214
	Average	2,151,023	138,888	169	139,056	2,290,079
November	Beginning	2,133,515	137,625	74	137,699	2,271,214
	Ending	2,170,447	8,591	103,766	112,358	2,282,805
	Average	2,151,981	73,108	51,920	125,028	2,277,009
Total of Averages		24,461,938	2,634,397	80,415	2,714,811	27,176,749
Average per Month		2,038,495	219,533	6,701	226,234	2,264,729

STATEMENT

AFFIDAVIT OF PUBLICATION

FROM

The Journal News

CECILIA HERNANDEZ

being duly sworn says that he/she is the principal clerk of The Journal News, a newspaper published in the County of Westchester and State of New York, and the notice of which the annexed is a printed copy, was published in the newspaper area(s) on the date(s) below:

Note: the code to the left of the run dates indicates the zone(s) that the ad was published. (See legend below)

ZONE

DATE

AN

09/18/2013

Signed Cecilia Hernandez

Sworn to before me

This 24th day of SEPTEMBER 20 13

John L. Franco D'Senza
Notary Public

John L. Franco D'Senza
Notary Public, State of New York
No. 0-4560320
Qualified in Westchester County
Commission Expires November 18, 2014

Legend:
Northern Area (AN):
Amawalk, Armonk, Baldwin Place, Bedford, Bedford Hills, Briarcliff Manor, Buchanan, Chappaqua, Crompond, Cross River, Croton Falls, Croton on Hudson, Goldens Bridge, Granite Springs, Jefferson Valley, Katonah, Lincolndale, Millwood, Mohegan Lake, Montrose, Mount Kisco, North Salem, Ossining, Peekskill, Pound Ridge, Purdys, Tenorock, Shrub Oak, Somers, South Salem, Verplanck, Waccabuc, Yorktown Heights, Brewster, Carmel, Cold Spring, Garrison, Lake Peekskill, Mahopac, Mahopac Falls, Putnam Valley, Patterson
Central Area (AC):
Ardsley, Ardsley on Hudson, Dobbs Ferry, Elmsford, Greenburg, Harrison, Hartsdale, Hastings, Hastings on Hudson, Hawthorne, Irvington, Larchmont, Mamaroneck, Pleasantville, Port Chester, Purchase, Rye, Scarsdale, Tarrytown, Thornwood, Valhalla, White Plains
Southern Area (AS):
Bronxville, Eastchester, Mount Vernon, New Rochelle, Pelham, Tuckahoe, Yonkers
Greater Westchester (GW or LGW):
Includes Northern area, Southern area and Central area. (See details below each area)
Westchester Rockland (WR):
Includes Greater Westchester area and Rockland area.
Rockland Area (AS, AR and RK):
Blauvelt, Congers, Garnerville, Haverstraw, Hillburn, Monsey, Nanuet, New City, Nyack, Orangeburg, Palisades, Pearl River, Piermont, Pomona, Slootsburg, Sparkill, Spring Valley, Stony Point, Suffern, Tallman, Tappan, Thiells, Tomkins Cove, Valley Cottage, West Haverstraw, West Nyack

Express (XPWR):

Amawalk, Ardsley, Armonk, Baldwin Place, Bedford, Bedford Hills, Brewster, Briarcliff Manor, Bronxville, Buchanan, Carmel, Chappaqua, Cold Spring, Cortlandt Manor, Cross River, Croton-on-Hudson, Dobbs Ferry, Eastchester, Elmsford, Garrison, Goldens Bridge, Granite Springs, Harrison, Hartsdale, Hastings, Hawthorne, Irvington, Jefferson Valley, Katonah, Lake Peekskill, Larchmont, Mahopac, Mamaroneck, Millwood, Mohegan Lake, Montrose, Mount Kisco, New Rochelle, North Salem, Ossining, Patterson, Peekskill, Pelham, Pleasantville, Port Chester, Pound Ridge, Purchase, Purdy's, Putnam Valley, Rye, Scarsdale, Shrub Oak, Somers, South Salem, Tarrytown, Thornwood, Tuckahoe, Valhalla, Waccabuc, White Plains, Yorktown Heights, Blauvelt, Congers, Garnerville, Haverstraw, Hillburn, Monsey, Nanuet, New City, Nyack, Orangeburg, Palisades, Pearl River, Piermont, Pomona, Slootsburg, Sparkill, Spring Valley, Stony Point, Suffern, Tallman, Tappan, Thiells, Tomkins Cove, Valley Cottage, West Haverstraw, West Nyack, Mt. Vernon, Yonkers

3526786

Ad Number	Size	Start Date	End Date
3526786	14	9/18/2013	09/18/2013

Run dates: 09/18

Ad Text:

THE ANNUAL REPORT OF
THE JAMES E. ROBISON
FOUNDATION for the fiscal
year ended November 30,
2012 is available at its prin-
cipal office located at 17
Greenbriar Circle, Armonk,
New York 10504, for inspec-
tion during regular business
hours by any citizen who re-
quests it within 180 days
hereof. Principal Manager of
the Foundation is MARTHA
A. DAVIES, PRESIDENT.

Form 990-PF, Page 4, Part VII-A, Line 8a**States Registered In**

DE - Delaware

NY - New York

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

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

Enter filer's identifying number, see instructions	
Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
JAMES E. ROBISON FOUNDATION	13-6075171
Number, street and room or suite number. If a P.O. box, see instructions	Social security number (SSN)
17 GREENBRIAR CIRCLE	
City, town or post office, state and ZIP code. For a foreign address, see instructions	
ARMONK NY 10504	

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ 04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

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

- The books are in care of DORIS STANLEY
Telephone No (914) 273-3121 FAX No (914) 283-6382
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until OCTOBER 15, 20 13
- 5 For calendar year _____, or other tax year beginning Dec 1, 20 11, and ending Nov 30, 20 12
- 6 If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension
THE ACCOUNTING WORK WILL NOT BE COMPLETED BY JULY 15, 2013

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$	6,000.
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$	6,000.
8c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c \$	0.

Signature and Verification must be completed for Part II only.

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

Signature D. Stanley Title TREASURER Date 06/17/13
BAA FIFZ0502 01/21/13 Form 8868 (Rev 1-2013)

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

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service▶ **File a separate application for each return.**

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

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

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

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns***Enter filer's identifying number, see instructions**

Type or print	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	JAMES E. ROBISON FOUNDATION	13-6075171
	Number, street, and room or suite number. If a P.O. box, see instructions	Social security number (SSN)
	17 GREENBRIAR CIRCLE	
File by the due date for filing your return. See instructions	City, town, or post office, state, and ZIP code. For a foreign address, see instructions	
	ARMONK NY 10504	

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

04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶
- DORIS STANLEY

Telephone No ▶ (914) 273-3121 FAX No ▶ (914) 273-6382

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

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Jul 15, 2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for

- ▶ ☐ calendar year 20____ or
▶ ☒ tax year beginning Dec 1, 2011, and ending Nov 30, 2012

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	6,000.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	6,000.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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