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Form 990-PF

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

SCANNED SEP 0 3 2018

<u>Interr</u>	rtmen <u>ial R</u> ev	t of the Treasury venue Service N	lote The foun	<u>dation m</u> ay	be able to	use a copy of th	is return to sat	isfy state repo	rting requirements.	ZUII
		dar year 2011 or tax year		DEC		2011			NOV 30, 2012	
Nai	ne of	foundation		.,	<u> </u>				A Employer identification i	number
		GORDON AND				UNDATIO	N		27-2010156	
		nd street (or P O box number i			t address)			Room/suite	B Telephone number	
		5 NORTH MARK	KET STR	REET				1300	302-651-83	/0
		own, state, and ZIP code MINGTON, DE	19801	_					C If exemption application is per	nding, check here
		all that apply:	Initial return			Initial return of a	former public	charity	D 1 Foreign organizations,	check here
			Final return			Amended return	•	•		
			Address char	nge		Name change			Foreign organizations mee 2, check here and attach com	ting the 85% test, putation
H C	_					ate foundation			E If private foundation statu	. []
		ction 4947(a)(1) nonexem				able private foun			under section 507(b)(1)(A), check here
		rket value of all assets at o	end of year	J Account	-		L Acc	rual	F If the foundation is in a 6	
		Part II, col (c), line 16)	- 000	0 []	ther (spec	ify)	. 61		under section 507(b)(1)(B), check here
	<u> </u>	Analysis of Revenue an	O, YYU.	raiti, colu	T	nust be on casi				(d) parkers
	art I	(The total of amounts in colunecessarily equal the amount	mns (b), (c), and	(d) may not	(a) expe	Revenue and nses per books		nvestment come	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, gran					<u> </u>		N/A	
	2	Check X if the foundation		ittach Sch B			-			
	3	Interest on savings and tempo cash investments								
	4	Dividends and interest fro	om securities		<u> </u>					
	5a				-		+			
		b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				112 040	 			
e Re	ба					113,840	•			
Revenue	, D	D assets on line 6a					11	35030	W. ALERNE DO	
Re	7	Capital gain net income (from						3,840.	15 60 4 4 5	<u> </u>
	8	Net short-term capital gail Income modifications	(1)					A AI	 	
	10a	Gross sales less returns	1							
	l .	and allowances Less Cost of goods sold			 		 		UEN, UT 77	
		Gross profit or (loss)						E. DE MI		
	11	Other income		-		7 -7				
	12	Total Add lines 1 throug	jh 11			113,840	. 11	13,840.		
	13	Compensation of officers, dire	ectors, trustees,	etc		0	•	0.		0.
	14	Other employee salaries a	and wages							
	15	Pension plans, employee	benefits							
ses	16a	Legal fees								
ben		Accounting fees		IT 1		3,500		2,333.		1,167. 1,333.
ŭ	1	Other professional fees	STM	IT 2		4,000	•	2,667.		1,333.
tive	1	Interest				4 ==				
itra	18	Taxes		IT 3		47	•	0.		0.
inis	19	Depreciation and depletion	n							
Ę	20	Occupancy								
ρ	21	Travel, conferences, and			-					
ā	22	Printing and publications Other expenses		1T 4		61		0.		61.
ţi	24	Total operating and adm		11 4	 	0.1	•			01.
Operating and Administrative Expenses	~ 7	expenses Add lines 13 t				7,608		5,000.		2 561
Ö	25	Contributions, gifts, gran				486,000		3,000.	·	2,561. 486,000.
	26	Total expenses and disb					1			200,000.
	-"	Add lines 24 and 25	- committee			493,608		5,000.		488,561.
	27	Subtract line 26 from line	12.				-	<u> </u>		100,001
	i	Excess of revenue over expen		ements	<	379,768				
	l .	Net investment income (08,840.		
		Adjusted net income of n	_				1		N/A	

LHA For Paperwork Reduction Act Notice, see instructions.

For	m 99	0-PF(2011) THE GORDON AND JENNY SI			2010156 Page 2
P	àrt	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	-
_		Column should be for end-or-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	1,968.	208,361.	208,361.
		Savings and temporary cash investments			
	3	Accounts receivable -			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
	_	Less: allowance for doubtful accounts Grants receivable			
		Receivables due from officers, directors, trustees, and other			· · · · · · · · · · · · · · · · · · ·
	6	disqualified persons			
	7	Other notes and loans receivable			· · · · · · · · · · · · · · · · · · ·
	′	Less: allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			
	l	Investments - corporate stock		****	
	С	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 5	2,217,223.	1,631,062.	2,128,629.
	14	Land, buildings, and equipment; basis	j		
		Less accumulated depreciation			
	15	Other assets (describe ►)			
			0 010 101	1 020 402	0 226 000
		Total assets (to be completed by all filers)	2,219,191.	1,839,423.	2,336,990.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ė	20	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			
<u>:</u>	Ť	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted	2,219,191.	1,839,423.	
<u>a</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			
Pun		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds			
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	2 210 101	1 020 422	
ž	30	Total net assets or fund balances	2,219,191.	1,839,423.	
	31	Total liabilities and not essets/fund balances	2,219,191.	1,839,423.	
_		Total liabilities and net assets/fund balances		1,000,4200	
LP	art	III Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)		1	2,219,191.
2		r amount from Part I, line 27a		2	<379,768.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,839,423.
		eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	1,839,423.
_		-			Form 990-PF (2011)

5

6

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8

	GORDON AND JENN			ATION	27-203	10156 Page 3	
(a) List and desc	and Losses for Tax on In tribe the kind(s) of property sold (e.g. arehouse; or common stock, 200 shs	, real estate,	Income	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a							
b SEE ATTACHED	STATEMENT						
<u>C</u>					 		
d							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis kpense of sale		(h) Gain or (los (e) plus (f) minus		
a							
b							
С							
d						112 010	
e 700,743.		1	586,90	3.	(0.0	113,840.	
Complete only for assets snowl	ng gain in column (h) and owned by	r -			(I) Gains (Col. (h) gai col. (k), but not less th	in minus ian -0-) or	
(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69				Lösses (from col. (h))		
_ a							
b							
<u> </u>							
<u>d</u>						113,840.	
<u>e</u>	∫ If gain, also enter	n Part I, line	7	3		113,840.	
2 Capital gain net income or (net c	apıtal loss) 👤 If (loss), enter -0	- ın Part I, line	7	J 2		113,040.	
If gain, also enter in Part I, line 8	•	ıd (6):		}	N/.	7.	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Jnder Section 4940(e) for	Reduced	Tax on Net	Investment		<u>. </u>	
L	te foundations subject to the section	•					
If section 4940(d)(2) applies, leave	·			,			
	ction 4942 tax on the distributable an	nount of any ve	ar in the hace ne	riod?		Yes X No	
	alify under section 4940(e). Do not co			rivu;			
1 Enter the appropriate amount in	each column for each year; see instr	uctions before	making any entri	es.			
(a) Base period years Calendar year (or tax year beginn	(b)			(c) oncharitable-use ass	sets (col. (b) o	(d) ribution ratio divided by col. (c))	
2010	~	7,047.		2,556,9		.037954	
2009		1.931.		494,6		.145414	

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2010	97,047.	2,556,986.	.037954
2009	71,931.	494,665.	.145414
2008			
2007			
2006			

2 Total of line 1, column (d)

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

4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5

5 Multiply line 4 by line 3

6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

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

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222,183.

223,271.

488,561.

1,088.

	1990-PF (2011) THE GORDON AND JENNY SINGER FOUNDATION 27-2010 TVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4
	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)			<u>,</u>
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		1 N	88.
U	of Part I, line 27b		1,0	00.
•	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
2	Add lines 1 and 2		1 0	88.
ى 4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		<u> </u>	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1 0	88.
6	Credits/Payments:		- / -	
9	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld 6d 6d			
	Total credits and payments. Add lines 6a through 6d			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1.0	88.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2012 estimated tax			
	rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		Х
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	16		Х
	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			
¢	Did the foundation file Form 1120-POL for this year?	_1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ▶ \$ 0 .			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2		_X_
	If "Yes," attach a detailed description of the activities			ļ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_ 3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	<u>4b</u>		ļ
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5_		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			ļ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	1		1
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
_	If "Yes," complete Part II, col. (c), and Part XV	-		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	DE			1
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	۵.	v	
_	of each state as required by General Instruction G? If "No," attach explanation	_8b	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			-
40	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	<u> </u>	X
<u>_10</u>		10 rm 000	DE	

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
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))?	Y ₆	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,	i	
any voter registration drive?	• • •		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7		es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?	i accorded in scotion	X Ye	s No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	ar advantional nurnages or f		ומא ופי	
• • • • • • • • • • • • • • • • • • • •	or educational purposes, or i		₹₽	
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	_	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•			b X
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta		_	
expenditure responsibility for the grant?		\mathbf{x}	es No	
If "Yes," attach the statement required by Regulations section 53.4945	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		□ \(\frac{1}{2} \) \(\frac{1} \) \(\frac{1}{2} \) \(\frac{1}{2} \) \(\frac^	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		6	Sb X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	<u></u>	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			-	'b
		nagers Highly		<u>- </u>
Part VIII Paid Employees, and Contractors	ccs, i canadation ma	inagers, riiging	,	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	(e) Expense account, other
CODDON CINCED	to position	enter'-0-)	compensation	allowances
	PRESIDENT&TRE	ASOKEK/DI	RECT.	
C/O DDK & CO LLP ONE PENN PLAZA 4FL	5 00			•
NEW YORK, NY 10119	5.00	0.	0.	0.
	VICE PRESIDEN	T/DIRECTO	R	
C/O DDK & CO LLP ONE PENN PLAZA 4FL				
NEW YORK, NY 10119	5.00	0.	0.	0.
	SECRETARY			
C/O KKWC,551 FIFTH AVENUE				
NEW YORK, NY 10176	5.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(-) Name and address of each arrelance and acceptance for acceptance	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	develop to promon		Compansacon	4
110412				
				
	1			
	-			
		ļ		
	-			
	L	L	<u> </u>	
Total number of other employees paid over \$50,000				0
			Form 9	990-PF (2011)

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Infant C. Abart Officer Division Testing Franchis Management Highligh	7-2010	156 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. 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	•	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the		<u> </u>
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1 N/A		
2		
3		
3		
	_	
4		
T		
•	=	
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.		Amount
1 <u>N/A</u>		
2	_	
All other program related investments. Can instructions	+	
All other program-related investments. See instructions.		
3	\dashv	
Total Add lines 1 through 3		

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	idation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	2,329,623.
	Average of monthly cash balances	1b	130,636.
	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	2,460,259.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,460,259.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	36, <u>904</u> .
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,423,355.
6	Minimum investment return Enter 5% of line 5	6	121,168.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certaii	n
1	Minimum investment return from Part X, line 6	1	121,168.
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	1,088.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	120,080.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	120,080.
6	Deduction from distributable amount (see-instructions) –	6	<u> </u>
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	120,080.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	488,561.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	488,561.
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	1,088.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	487,473.
	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 the section

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THE GORDON AND JENNY SINGER FOUNDATION 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				120,080.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2011:		0.		
a From 2006				
b From 2007				
c From 2008				
d From 2009 21,322.				
e From 2010				
f Total of lines 3a through e	21,322.			
4 Qualifying distributions for 2011 from				
Part XII, line 4 ► \$ 488, 561.				
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	262 401			120,080.
e Remaining amount distributed out of corpus	368,481.		<u></u>	
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	389,803.			
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 instr.			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	0.			
section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2006	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.	0.			
Subtract lines 7 and 8 from line 6a	389,803.			
10 Analysis of line 9.	337333.	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
a Excess from 2007				
b Excess from 2008				
c Excess from 2009 21,322.				
d Excess from 2010				
e Excess from 2011 368, 481.		· 		

	DON AND JEN			27-20	10156 Page 10
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo	•	•	▶		
b Check box to indicate whether the found		g foundation described	· · · · · · · · · · · · · · · · · · ·	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	T- (1) 2000	
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	1				
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				1	
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" 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 Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t			ii die iodiidadoii	παα φο,σσο σι πιο	ne in assets
1 Information Regarding Foundation					
a List any managers of the foundation wh		than 20/ of the total con	tributions recoved by the	foundation before the alor	on of any toy
year (but only if they have contributed n	nore than \$5.000). (See so	ection 507(d)(2).)	mbudons received by the	Touridation before the clos	se of any lax
NONE					
b List any managers of the foundation wh	in own 10% or more of the	a ctack of a corporation	(or an equally large ports	an of the autorobin of a ne	ortnorobin or
other entity) of which the foundation ha	s a 10% or greater interes	t.	tot all equally large portion	of the ownership of a pa	armership or
NONE					
2 Information Regarding Contribut	ion Crant Cift Loon	Sabalarahin ata D			···
Check here ► X if the foundation of	on, Grant, Girt, Loan,	o procedented shorteble	organist	ent names was also taid as a w	anta far frinda . If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	o preselecteu charitable iduals or organizations i	under other conditions or	ioi accepi unsoncheu requ implete items 22 h c 2nd	esis ioi iulius. II
a The name, address, and telephone num	per of the person to whon	n applications should be	addressed:		
b The form in which applications should be	e submitted and informat	ion and materials they s	hould include:		····
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields	, kinds of institutions, or o	other factors:	
				···	<u>., ,</u>

Page 11

Part XV Supplementary Information	ii (continued)	 -		
3 Grants and Contributions Paid During the '		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
PRIMARY CARE PROGRESS 7 SAINT MARY ROAD	NONE	IRC 501(C)(3)	FOR CHARITABLE PURPOSE OF ORGANIZATION	
CAMBRIDGE, MA 02139				50,000
VH1 SAVE THE MUSIC 1515 BROADWAY	NONE	IRC 501(C)(3)	FOR CHARITABLE PURPOSE	
NEW YORK, NY 10036				150,000
AMERICAN IRELAND FUNDS 211 CONGRESS STREET, 10TH FLOOR	NONE	IRC 501(C)(3)	FOR CHARITABLE PURPOSE OF ORGANIZATION	
BOSTON, MA 02110				33,000
CELTIC FC CHARITY FUND	NONE	CHILDREN ORGANIZATION	FOR CHARITABLE PURPOSE OF ORGANIZATION	
GLASGÓW, UNITED KINGDOM G40 3RE				39,000
GRASSROOT SOCCER INC	NONE	IRC 501(C)(3)	FOR CHARITABLE PURPOSE OF ORGANIZATION	100 000
HANOVER, NH 03755 Total SEE CC	NTINUATION SHE		▶ 3a	100_000 486_000
b Approved for future payment				400,000
NONE				
				-
Total			▶ 3b	

art XVI-A Analysis of Income-Prod	lucing Activitie	S			
er gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
Program service revenue:	code	Amount	sion	Amount	function income
ı					
)					
·					
1	_				· ·
B					. <u></u>
	_				
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments					
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
a Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal	1				
property					
Other investment income					
Gain or (loss) from sales of assets other					
han-inventory-			18	113,840	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a	_				
	_				
C	-				
d	_				
·	_			112 010	· · · · · · · · · · · · · · · · · · ·
Subtotal. Add columns (b), (d), and (e)			0.	113,840.	112.0
Total. Add line 12, columns (b), (d), and (e)				13	113,8
e worksheet in line 13 instructions to verify calculations.					· · · · · · · · · · · · · · · · · · ·
art XVI-B Relationship of Activities	s to the Accon	nplishment of	Exempt P	urposes	
ne No. Explain below how each activity for which in	ncome is reported in	solumn (a) of Part V	// A contributor	Limportantly to the accomi	alichment of
the foundation's exempt purposes (other th				i importantly to the accomp	phoninent of
<u> </u>	y promong rome		,-		
		···			
			· · · · · · · · · · · · · · · · · · ·		
		· · · · · · · · · · · · · · · · · · ·			
	 				
				• •	
				•	· · · · ·

Form **990-PF** (2011)

123621 12-02-11

Form 990-PF (2011) THE GORDON AND JENNY SINGER FOUNDATION 27-2010156

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

the Code (other than section 501(c)(3) organizations) or in section 527, relating to portical organizations? 1 Ital(1)			rectly engage in any of the following			Yes	No
(1) Cash (2) Other sacets (3) Refer sacets (1) Sales of assets to a noncharitable exempt organization (1) Sales of assets to a soncharitable exempt organization (3) Rental of facilities, equipment, or other assets (3) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (3) Performance of services or membership or fundrasing solicitations (3) Rental of facilities, equipment, making lists, other assets, or paid employees (3) Performance of services or membership or fundrasing solicitations (3) Rental of facilities, equipment, making lists, other assets, or paid employees (3) Rental of facilities, equipment, making lists, other assets, or paid employees (4) Performance of services or membership or fundration descreted less than fair maket value of the goods, care assets, or or services owns by the reporting foundation. If the foundation received less than fair maket value in any fransaction or sharing arrangement, show in coolimn (d) the value of the goods, cheer assets, or services owns by the reporting foundation. If the foundation received less than fair maket value in any fransaction or sharing arrangement, show in coolimn (d) the value of the goods, cheer assets, or services owns by the reporting foundation. If the foundation received less than fair maket value in any fransaction or sharing arrangement, show in column (d) the value of the goods, cheer assets, or services over the fair maket value in any fransaction or sharing arrangement, show in column (d) the value of the goods, cheer assets, or services over the fair maket value in any fransaction or sharing arrangement, show in column (d) the fair maket value of the goods, and assets are assets as a service of the goods of the fair maket value of the goods, and assets are maket value in any fransaction of relationship. Price Yes X No I I I'ves; Complete the following schedule. (a) Name of noncharitable exempt organization (d) Description of relationship. I I'ves Yes X No					zations?		
22) Other sasets 142 X 150		· -	ation to a noncharitable exempt or	ganization of:		4-(1)	v
b Other transactions: (1) Sales of assets to a moncharitable exempt organization (2) Purchases of assets from a moncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Remittered est arrangement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fund assing solicitations (6) Performance of services or membership or fund assing solicitations (7) A life of the services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (9) Amount involved (1) Rime of noncharitable exempt organization (1) Amount involved (2) Rime of noncharitable exempt organization (3) Rime of organization (4) Description of vaxieties, transactions, and enables are serviced in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (4) Press (5) Loans or foundation directly or indirectly siffacted with, or related to, one or more tax-exempt organization (5) Amount involved (6) Rime of noncharitable exempt organization (7) Rime of noncharitable exempt organization (8) Description of vaxieties, transactions, and enable exempt organization (9) Annount involved (1) Annound involved (1) Annound involved (1) Annound involved (1) Annound involved (2) Annound involved (3) Rime of organization (4) Description of relationships (5) Loans of the Code (other than section 501(c)(3)) or in section 527? (8) If Yes, complete the following schedule. (9) Annound involved (1) Annound involved (2) Annound involved (3) Rime of organization (4) Description of relationships (5) Loans organization (6) Description of relationships (7) Annound involved (8) Annound involved (9) Annound involved (1) Annound involved (1) Annound involved (1) Annound involved (1) Annound involv							<u>~</u>
(1) Sales of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of Identifies, equipment, or other assets (4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Salaring of Eachiese, equipment, mailtag lists, other assets, or paid employes (8) If the answer to any of the above is "Yes," complete the following schedule. Column (5) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation decered less than fair market value in any transaction or sharing arrangements. Show in column (6) the value of the goods, other assets, or services given by the reporting foundation. If the foundation decered less than fair market value in any transactions or sharing arrangements. Show in column (6) the value of the goods, other assets, or services given by the reporting foundation. If the foundation decered less than fair market value in any transactions or sharing arrangements. Show in column (6) the value of the goods, other assets, or services given by the reporting foundation. If the foundation decered less than fair market value in any transactions, and any arrangements. Show in section 50 (6) (6) (6) the Code (cite than sections 50 (6)(3)) or in section 527? It "Yes Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A It "Yes Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A It "Yes Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A It "Yes Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A It "Yes Complete the following schedule. (a) Name of or						18(2)	
(2) Purchases of assets from a nonchariable exempt organization 10(2) X (4) Reimbursement arrangements 10(2) X (5) Lears or loan guarantees 10(3) X (6) Lears or loan guarantees 10(3) X (6) Lears or loan guarantees 10(3) X (6) Lears or loan guarantees 10(3) Lears or loan	_		this evenust organization			16/13	Y
(a) Rental of Eachies, equipment, or other assets (b) Loans or loan guarantees (c) Loans or loan guarantees (d) A X 195] X 196]			· · ·				X
(4) Rembursement arrangements (5) Loans or to one guarantees (5) Loans or to one guarantees (1940) X (6) Performance of services or membership or fundraising solicitations (1946) X (• • •				
(6) Chars or loan guarantees (6) Performance of serveces or memborship or fundraising solicitations 1							X
e Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1	(5)	Loans or loan guarantees		_			
d If the answer to any of the above is Yes, Complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation recoved less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. One of the value of the goods, other assets, or services received.	(6)	Performance of services or me	mbership or fundraising solicitation	ons		1b(6)	X
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.							<u>X</u>
Dime no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Signature of officer or trustee Printy reparer's name Preparer's signature Preparer's signature Preparer's signature Preparer's signature Preparer's signature Printy saddless ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 Phone no. 212-997-0600							
(c) Name of noncharitable exempt organization N/A Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship					e in any transaction or sharing arrangement	, show in	
N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes X No If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship					1.0		
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No	a) Line no	(b) Amount involved		e exempt organization	(0) Description of transfers, transactions, an	d sharing arrangemer	nts
Ra Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship		-	N/A				
Ra Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No							
Ra Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No			 				
Ra Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No		<u> </u>		· · · · · · · · · · · · · · · · · · ·	+		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it's true, correct and complete Declaration of preparer (other than taxpayer) is black of nall information of which preparer has any knowledge shown below (see instr) No Print/Type preparer's name Preparer'sisignature Preparer'sisignature Preparer Firm's name ▶ DDK & COMPANY LIP Firm's address ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 Proper organization (b) Type of organization (c) Description of relationship May the IRS discuss this return with the preparer shown below (see instr) No Title Print/Type preparer's name Preparer'sisignature Print's self- employed Firm's EIN ▶ 13 – 2738625		-	-				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it's true, correct and complete Declaration of preparer (other than taxpayer) is black of nall information of which preparer has any knowledge shown below (see instr) No Print/Type preparer's name Preparer'sisignature Preparer'sisignature Preparer Firm's name ▶ DDK & COMPANY LIP Firm's address ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 Proper organization (b) Type of organization (c) Description of relationship May the IRS discuss this return with the preparer shown below (see instr) No Title Print/Type preparer's name Preparer'sisignature Print's self- employed Firm's EIN ▶ 13 – 2738625							
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it's true, correct and complete Declaration of preparer (other than taxpayer) is blaced in all information of which preparer has any knowledge shown below (see instit) Print/Type preparer's name Preparer'ssignature Preparer'ssignature Preparer'ssignature Prim's address ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 Print/Type preparer Phone no. 212-997-0600							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it's true, correct and complete Declaration of preparer (other than taxpayer) is blaced in all information of which preparer has any knowledge shown below (see instit) Print/Type preparer's name Preparer'ssignature Preparer'ssignature Preparer'ssignature Prim's address ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 Print/Type preparer Phone no. 212-997-0600	0 1-11	1					
Sign Director trustee Date Title					zations described		7 No.
(a) Name of organization (b) Type of organization (c) Description of relationship N/A				(11011 5277		L Yes LAL	טאו נ
N/A Sign Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, the true, correct and complete Declaration of preparer (other than taxpayer) is based in all information of which preparer has any knowledge and belief, the true, correct and complete Declaration of preparer (other than taxpayer) is based in all information of which preparer has any knowledge and belief, the true, correct and complete Declaration of preparer (other than taxpayer) is based in all information of which preparer has any knowledge and belief, the true, correct and complete Declaration of preparer (other than taxpayer) is based in all information of which preparer has any knowledge and belief, the true, correct and complete Declaration of preparer (other than taxpayer) is based in all information of which preparer has any knowledge and belief, the true, correct and complete Declaration of preparer (other than taxpayer) is based in all information of which preparer has any knowledge. PIN	וו ע			(b) Type of organization	(c) Description of relation	ıshıp	
Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based in all information of which preparer has any knowledge. V V Y DIRECTOR			, <u>-</u>	(L) type or or gameston	(0) = 150 (pist of 150 in 150 i		
Sign Here Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Date Title Date Title Prim's name ▶ DDK & COMPANY LIP Firm's address ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 PIRECTOR DIRECTOR Title Check ☐ if Self- employed Prim's EIN ▶ 13-2738625 Phone no. 212-997-0600			· · · · · · · · · · · · · · · · · · ·	-			
Sign Here Signature of officer or trustee Date Title Print/Type preparer's name Preparer Signature Date Title Date Title Prim's name ▶ DDK & COMPANY LIP Firm's address ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 PIRECTOR Title Print/Type preparer (other than taxpayer) is based in all information of which preparer has any knowledge in all information of which preparer has any knowled							
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Sign Here Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Date Title Date Title Prim's name ▶ DDK & COMPANY LIP Firm's address ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 PIRECTOR DIRECTOR Title Check ☐ if Self- employed Prim's EIN ▶ 13-2738625 Phone no. 212-997-0600							
Signature of officer or trustee Print/Type preparer's name Preparer's signature Date Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Date Print/Type preparer's name Preparer's signature Date Print/Type preparer's name Print/Ty					ation of which accorded has any knowledge.		
Signature of officer or trustee Print/Type preparer's name Preparer's signature Date Title Print/Type preparer's name Preparer's signature Date Date Check if PTIN self- employed Prim's name ▶ DDK & COMPANY LIP Firm's name ▶ DDK & COMPANY LIP Firm's address ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 Phone no. 212-997-0600	Sign	and benefit its index, confect, and	inplotes becausion of prepare found the		, i	hown below (see inst	
Print/Type preparer's name Preparer's signature Date Check if PTIN self- employed Preparer's self- employed Preparer Preparer Prim's name	Here					LX Yes L	J No I
Paid Preparer Use Only Firm's address ► ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 self- employed P00116434 Firm's EIN ► 13-2738625 Phone no. 212-997-0600	1.						
Paid Preparer Use Only Firm's address ► ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 P00116434 Firm's EIN ► 13-2738625 Prim's EIN ► 13-2738625		Prinviype preparer's na	ame Preparer's	signature	-7\ <i>I</i>	4	
Preparer Use Only Firm's name ▶ DDK & COMPANY LIP Firm's address ▶ ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 Firm's EIN ▶ 13-2738625 Phone no. 212-997-0600	Daid	TOBODOV 211	WORR		X 1111)	00116424	
Use Only Firm's address ► ONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 Phone no. 212-997-0600				 			
Firm's address NONE PENN PLAZA, 4TH FLR NEW YORK, NY 10119 Phone no. 212-997-0600	•		. « COMPANY LUP	' f (- Firm s Ein ► 13-	4/30043	
NEW YORK, NY 10119 Phone no. 212-997-0600	JJ0 U	· ·	TE DENNI DIAZA /	יים איז איז איז איז איז			
		ŀ			Phone no 212	_997_060	0
							

123622 12-02-11

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
TMOOTHY DRIVING GOVER	1000	,		
HOMSON CRESCENT	NONE	EDUCATIONAL ORGANIZATION	FOR CHARITABLE PURPOSE OF ORGANIZATION	
ROYDON, UNITED KINGDOM CRO 3JT				35,00
NE FAMILY	NONE	IRC 501(C)(3)	FOR CHARITABLE PURPOSE	
029 TEANECK RD, SUITE 3B EANECK, NJ 07666			OF ORGANIZATION	79,00
• .				
				
17				

THE GORDON AND JENNY SINGER FOUNDATION

Part IV | Capital Gains and Losses for Tax on Investment Income

(a) List and 2-story br	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a 240.0513 SHRS	ELLIOTT INTERNAT	IONAL LTD	D	01/01/10	01/01/12
	ELLIOTT INTERNAT		D	01/01/10	
	ELLIOTT INTERNAT		D	01/01/10	
d 299.0392 SHRS	ELLIOTT INTERNAT	IONAL LTD	D	01/01/10	
e SALE OF ELLIOT	T INTERNATIONAL	LTD ADJUSTMENT	D	01/01/10	
f					
9					
h	<u></u>				
k					
<u>m</u>					
n					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) (e) p	Gain or (loss) lus (f) minus (g)	
a 185,000.		163,152.			21,848.
b 150,000.		126,364.			23,636.
c 115,000.		97,027.			17,973.
d 250,000.		200,360.			49,640.
e 743.					743.
f					
g					
h					
1					
1					
k					····
1					· - · · · · · · · · · · · · · · · · · ·
m				1 1	
n					
0					
Complete only for assets showing	ng gain in column (h) and owned by t		(I) Los	ses (from col. (h))	1 (1.)
(ı) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (1) over col. (j), if any	but n	of col. (h) gain over ot less than "-0-")	
<u>a</u>					21,848.
b					23,636.
С					17,973.
d					49,640.
e					743.
f			·····		
<u>g</u>					
<u>h</u>			· · · · · · · · · · · · · · · · · · ·		
!					
le le				·	
k I					
m · ·			 		
0					
2 Capital gain net income or (net ca	pital loss) { If gain, also enter "-0	ın Part I, line 7 -" ın Part I, line 7	2		113,840.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,	column (c).	d (6):			
If (loss), enter "-0-" in Part I, line 8	5		3	N/A	

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		CHARITABLE	
ACCOUNTING FEES	3,500.	2,333.		1,167.	
TO FORM 990-PF, PG 1, LN 16B	3,500.	2,333.		1,167.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S'	TATEMENT 2	
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITABLE	
WILMINGTON TRUST	4,000.	2,667.		1,333.	
TO FORM 990-PF, PG 1-, LN 16C	4,000.	2-, 66-7.		1,333.	
FORM 990-PF	TAX	ES	S'	TATEMENT 3	
DESCRIPTION		(B) NET INVEST- MENT INCOME			
FEDERAL TAX BASED ON INVESTMENT INCOME	47.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	47.	0.		0.	
FORM 990-PF	OTHER EXPENSES		S'	TATEMENT 4	
	(A)	(B)	(C)	(D)	
DESCRIPTION	EXPENSES PER BOOKS			CHARITABLE PURPOSES	
DESCRIPTION FILING FEE	EXPENSES				

FORM 990-PF OTHER	INVESTMENTS	STATEMENT 5	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ELLIOTT INTERNATIONAL LIMITED	COST	1,631,062.	2,128,629.
TOTAL TO FORM 990-PF, PART II, LINE 1	3	1,631,062.	2,128,629.

The Gordon and Jenny Singer Foundation

Attachment to Form 990-PF Part VII-B, Question 5c on page 6

Expenditure Responsibility Statement for the year ending November 30, 2012

EIN: 27-2010156

Pursuant to IRC Regulation § 53.4945-5(d), The Gordon and Jenny Singer Foundation provides the following information:

(i)	Grantee:	Kingsley Primary School, Thompson Crescent, Croydon, United Kingdom CRO 3JT
(ii)	Date and Amount of Grant	June 12, 2012 Cash, US \$35,000 (21,890 British Pounds)
(iii)	Purpose of-Grant:	To purchase a thirty (30)-piece steel band for use by the students attending the school
(iv) and (vi)	Reports:	A report was provided by the Grantee reflecting that all funds were used to steel pans in order to assemble a thirty (30) piece steel band as set forth in the grant agreement. Accordingly, its annual report shows that the grantee used the funds properly.
(v)	Diversions:	To the knowledge of the grantor, no funds have been diverted to any activity other than the activity for which the grant was originally made.
(vii)	Verification:	No independent verification of any reports will be made unless there is reasonable cause to question the reliability of such reports.

The Gordon and Jenny Singer Foundation

EIN: 27-2010156

Attachment to Form 990-PF Part VII-B, Question 5c on page 6

Expenditure Responsibility Statement for the year ending November 30, 2012

Pursuant to IRC Regulation § 53.4945-5(d), The Gordon and Jenny Singer Foundation provides the following information:

(i)	Grantee:	Celtic FC Charity Fund, Celtic Park, Glasgow, Scotland, United Kingdom G40 3RE
(ii)	Date and Amount of Grant	August 31, 2012 Cash, US \$39,000 (23,564 British Pounds)
(iii)	Purpose of Grant:	To co-fund music programs at three (3) specific schools.
(iv) and (vi)	Reports:	A report was provided by the Grantee reflecting that all funds were used as set forth in the grant agreement, and a balance of \$1,065.68 remains on hand to be used. Accordingly, its annual report shows that the grantee used the funds properly.
(v)	Diversions:	To the knowledge of the grantor, no funds have been diverted to any activity other than the activity for which the grant was originally made.
(vii)	Verification:	No independent verification of any reports will be made unless there is reasonable cause to question the reliability of such reports.

Form 8868 (Rev 1-2012)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ext	ension o	complete only Part II and check this	s box	b	Page 2
Note. Only complete Part II if you have already been granted an all				8868	
If you are filing for an Automatic 3-Month Extension, complet					
Part II Additional (Not Automatic) 3-Month Ex			nal (no c	opies needed).	
			_	ig number, see ins	tructions
Type or Name of exempt organization or other filer, see instruc	ctions			identification numl	
print					, ,
File by the THE GORDON AND JENNY SINGER	the THE GORDON AND JENNY SINGER FOUNDATION				6
due date for Number, street, and room or suite no If a P O box, se	e instruct	tions.	Social sec	Social security number (SSN)	
return See 1105 NORTH MARKET STREET, NO					
City, town or post office, state, and ZIP code For a fo	reign add	ress, see instructions.			
WILMINGTON, DE 19801					
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Anatination		T	 -		T
Application	Return	Application			Return
Is For Form 990	Code 01	Is For			Code
Form 990-BL	02	Form 1041-A		-	08
Form 990-EZ	01	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870		•	12
STOP! Do not complete Part II if you were not already granted	an auton	natic-3-month extension on a prev	iously file	d Form 8868	
TAXPAYER					
• The books are in the care of ▶ 1105 NORTH MARK	ET S	r, SUITE 1300 - WI	LMING	TON, DE 19	801
Telephone No ► 302-651-8370		FAX No 🕨			
If the organization does not have an office or place of business				>	
• If this is for a Group Return, enter the organization's four digit (Group Exe	emption Number (GEN) I	f this is for	r the whole group, o	check this
box ► L If it is for part of the group, check this box ► L		ch a list with the names and EINs of	f all memb	ers the extension is	for
		BER 15, 2013.			
5 For calendar year, or other tax year beginning				30, 2012	
6 If the tax year entered in line 5 is for less than 12 months, ch	heck reas	on: Initial return	Final re	eturn	
Change in accounting period					
7 State in detail why you need the extension	TICE I	TUTED DARMY THEODY	A III T O NI	MECECCADA	7 MO
ADDITIONAL TIME IS NEEDED BECA FILE A COMPLETE AND ACCURATE R				NECESSAR	10
FIRE A COMPRETE AND ACCORAGE IN	CELOIL	N 15 NOI AVAIDABLE	•		
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069 e	nter the tentative tax less any			
nonrefundable credits See instructions	J. 0000, 0	The the termany tax, 1990 arry	8a	\$ 5	5,000.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	00		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
tax payments made Include any prior year overpayment allo	-				
previously with Form 8868	,	8b	\$ 5	5,000.	
c Balance due. Subtract line 8b from line 8a Include your page	yment wit	h this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System) See instru	ictions		8c	\$	0.
Signature and Verificati	on mus	st be completed for Part II o	only.		
Under penalties of perjury, I declare that I have examined this form, including the true correct and complete and that I am authorized to proper the form	ng accomp	panying schedules and statements, and to	o the best o	f my knowledge and b	elief,
it is true, correct, and complete, and that I am authorized to prepare this for					
Signature ► Title ► I	DIREC'	<u>ror</u>	Date	>	

Form 8868 (Rev 1-2012)