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Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

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

OMB No 1545-0052

**2012**

Open to Public Inspection

For calendar year 2012 or tax year beginning , and ending

Name of foundation <b>CLERMONT CHARITABLE TRUST</b>		A Employer identification number <b>04-6772671</b>
Number and street (or P O box number if mail is not delivered to street address) <b>P.O. BOX 43250</b>	Room/suite	B Telephone number (see instructions) <b>609-274-6834</b>
City or town, state, and ZIP code <b>JACKSONVILLE FL 32202</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <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 checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <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, col (c), line 16) <b>\$ 1,436,523</b>	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))

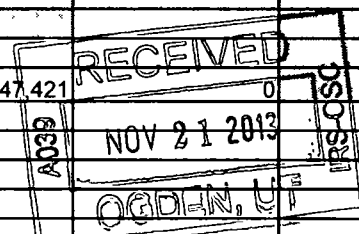
	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>				
1 Contributions, gifts, grants, etc., received (attach schedule)	2,865,223			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	2,864	2,864		
5 a Gross rents				
b Net rental income or (loss)				
6 a Net gain or (loss) from sale of assets not on line 10	2,644,557			
b Gross sales price for all assets on line 6a <b>3,233,757</b>				
7 Capital gain net income (from Part IV, line 2)		2,644,557		
8 Net short-term capital gain				
9 Income modifications				
10 a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	5,512,644	2,644,421		
<b>Operating and Administrative Expenses</b>				
13 Compensation of officers, directors, trustees, etc				
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16 a Legal fees (attach schedule)				
b Accounting fees (attach schedule)	818			818
c Other professional fees (attach schedule)	1,833	1,100		733
17 Interest				
18 Taxes (attach schedule) (see instructions)	8,437			
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule)	250			250
24 Total operating and administrative expenses. Add lines 13 through 23	11,338	1,100	0	1,801
25 Contributions, gifts, grants paid	1,878,600			1,878,600
26 Total expenses and disbursements. Add lines 24 and 25	1,889,938	1,100	0	1,880,401
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	3,622,706			
b Net investment income (if negative, enter -0-)		2,646,321		
c Adjusted net income (if negative, enter -0-)			0	

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2012)

HTA

SCANNED DEC 05 2013



Form 990-PF (2012) CLERMONT CHARITABLE TRUST

04-6772671

Page **2**

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing	2	2	2
	<b>2</b> Savings and temporary cash investments	466,982	1,436,521	1,436,521
	<b>3</b> Accounts receivable <input type="checkbox"/> Less allowance for doubtful accounts <input type="checkbox"/>			
	<b>4</b> Pledges receivable <input type="checkbox"/> Less allowance for doubtful accounts <input type="checkbox"/>			
	<b>5</b> Grants receivable			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	<b>7</b> Other notes and loans receivable (attach schedule) <input type="checkbox"/> Less allowance for doubtful accounts <input type="checkbox"/>			
	<b>8</b> Inventories for sale or use			
	<b>9</b> Prepaid expenses and deferred charges			
	<b>10 a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule)			
	<b>c</b> Investments—corporate bonds (attach schedule)			
	<b>11</b> Investments—land, buildings, and equipment basis <input type="checkbox"/> Less accumulated depreciation (attach schedule) <input type="checkbox"/>			
	<b>12</b> Investments—mortgage loans			
	<b>13</b> Investments—other (attach schedule)			
	<b>14</b> Land, buildings, and equipment basis <input type="checkbox"/> Less accumulated depreciation (attach schedule) <input type="checkbox"/>			
	<b>15</b> Other assets (describe <input type="checkbox"/> )			
	<b>16</b> Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	466,984	1,436,523	1,436,523
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses			
	<b>18</b> Grants payable			
	<b>19</b> Deferred revenue			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule)			
	<b>22</b> Other liabilities (describe <input type="checkbox"/> )			
	<b>23</b> Total liabilities (add lines 17 through 22)	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> <input type="checkbox"/>			
	<b>24</b> Unrestricted			
	<b>25</b> Temporarily restricted			
	<b>26</b> Permanently restricted			
	<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> <input checked="" type="checkbox"/>			
	<b>27</b> Capital stock, trust principal, or current funds	466,984	1,436,523	
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund			
	<b>29</b> Retained earnings, accumulated income, endowment, or other funds			
	<b>30</b> Total net assets or fund balances (see instructions)	466,984	1,436,523	
	<b>31</b> Total liabilities and net assets/fund balances (see instructions)	466,984	1,436,523	

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> 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)	<b>1</b>	466,984
<b>2</b> Enter amount from Part I, line 27a	<b>2</b>	3,622,706
<b>3</b> Other increases not included in line 2 (itemize) <input type="checkbox"/> <u>GRANTS PAID IN 2012, CLEARED IN 2013</u>	<b>3</b>	49,000
<b>4</b> Add lines 1, 2, and 3	<b>4</b>	4,138,690
<b>5</b> Decreases not included in line 2 (itemize) <input type="checkbox"/> <u>See Attached Statement</u>	<b>5</b>	2,702,167
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	<b>6</b>	1,436,523

**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 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b> See Attached Statement			
<b>b</b> See Attached Statement			
<b>c</b> See Attached Statement			
<b>d</b> See Attached Statement			
<b>e</b> See Attached Statement			

(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)
<b>a</b>			0
<b>b</b>			0
<b>c</b>			0
<b>d</b>			0
<b>e</b>			0

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			0
<b>b</b>			0
<b>c</b>			0
<b>d</b>			0
<b>e</b>			0

<b>2</b> Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	2,644,557
<b>3</b> 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 }	<b>3</b>	0

**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 (col. (b) divided by col. (c))
2011	2,227,953	712,965	3.124912
2010	1,661,342	2,323,871	0.714903
2009	1,606,810	3,700,108	0.434260
2008	1,570,885	4,190,667	0.374853
2007	694,618	2,122,514	0.327262

<b>2</b> Total of line 1, column (d)	<b>2</b>	4.976190
<b>3</b> 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	<b>3</b>	0.995238
<b>4</b> Enter the net value of noncharitable-use assets for 2012 from Part X, line 5	<b>4</b>	1,826,918
<b>5</b> Multiply line 4 by line 3	<b>5</b>	1,818,218
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	26,463
<b>7</b> Add lines 5 and 6	<b>7</b>	1,844,681
<b>8</b> 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	<b>8</b>	1,880,401

**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 ☐ and enter "N/A" on line 1  
Date of ruling or determination letter \_\_\_\_\_ (attach copy of letter if necessary—see instructions)

**b** Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b

**c** All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)

**2** Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

**3** Add lines 1 and 2

**4** Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

**5** Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-

**6** Credits/Payments

**a** 2012 estimated tax payments and 2011 overpayment credited to 2012

**b** Exempt foreign organizations—tax withheld at source

**c** Tax paid with application for extension of time to file (Form 8868)

**d** Backup withholding erroneously withheld

**7** Total credits and payments Add lines 6a through 6d

**8** Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached

**9** Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

**10** Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

**11** Enter the amount of line 10 to be Credited to 2013 estimated tax

Refunded

**Part VII-A Statements Regarding Activities**

**1** a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

**b** Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?

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

**c** Did the foundation file Form 1120-POL for this year?

**d** Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year

(1) On the foundation **e** Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers

**2** Has the foundation engaged in any activities that have not previously been reported to the IRS?

If "Yes," attach a detailed description of the activities

**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

**4a** Did the foundation have unrelated business gross income of \$1,000 or more during the year?

**b** If "Yes," has it filed a tax return on Form 990-T for this year?

**5** Was there a liquidation, termination, dissolution, or substantial contraction during the year?

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

• 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? 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)

MA

**b** If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation

**9** 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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV

**10** Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

**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 <b>N/A</b>	13	X	
14	The books are in care of <b>MLTC, A DIVISION OF BANK OF AMERICA, N.A.</b> Telephone no <b>609-274-6834</b> Located at <b>1300 MERRILL LYNCH DRIVE PENNINGTON NJ</b> ZIP+4 <b>08534-1501</b>			
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 2012, 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
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<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	1b	X
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 2012?	1c	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 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? If "Yes," list the years <b>20</b> , <b>20</b> , <b>20</b> , <b>20</b>	<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)	2b	N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <b>20</b> , <b>20</b> , <b>20</b> , <b>20</b>		
3a	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 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012)	3b	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	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 2012?	4b	X

**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))?
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?
- (3) Provide a grant to an individual for travel, study, or other similar purposes?
- (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)
- (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☐ Yes ☒ No☐ Yes ☒ No☐ Yes ☒ No☐ 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)?

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?

N/A

☐ 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?

If "Yes" to 6b, file Form 8870

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

<b>5b</b>	N/A	
<b>6b</b>		X
<b>7b</b>	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
HOWARD COX 15 CONGRESS STREET, B6 BOSTON, MA 02	TRUSTEE 2 00			

**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				

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

☐

0

**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		►

**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 NONE	
2	
3	
4	

**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 NONE	
2	
All other program-related investments. See instructions	
3 NONE	
Total. Add lines 1 through 3	

0



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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances	<b>1b</b>	1,854,739
<b>c</b>	Fair market value of all other assets (see instructions)	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	1,854,739
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	1,854,739
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions)	<b>4</b>	27,821
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	1,826,918
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	91,346

**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.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	91,346
<b>2a</b>	Tax on investment income for 2012 from Part VI, line 5	<b>2a</b>	26,463
<b>b</b>	Income tax for 2012 (This does not include the tax from Part VI )	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	26,463
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	64,883
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	64,883
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	64,883

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	<b>1a</b>	1,880,401
<b>b</b>	Program-related investments—total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	1,880,401
<b>5</b>	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)	<b>5</b>	26,463
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	1,853,938

**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 2011	(c) 2011	(d) 2012
<b>1</b> Distributable amount for 2012 from Part XI, line 7				64,883
<b>2</b> Undistributed income, if any, as of the end of 2012				
<b>a</b> Enter amount for 2011 only			0	
<b>b</b> Total for prior years. 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2012				
<b>a</b> From 2007	613,256			
<b>b</b> From 2008	1,445,882			
<b>c</b> From 2009	1,423,085			
<b>d</b> From 2010	1,562,418			
<b>e</b> From 2011	2,211,723			
<b>f</b> Total of lines 3a through e	7,256,364			
<b>4</b> Qualifying distributions for 2012 from Part XII, line 4 <b>▶</b> \$ 1,880,401				
<b>a</b> Applied to 2011, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions)				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions)				
<b>d</b> Applied to 2012 distributable amount				64,883
<b>e</b> Remaining amount distributed out of corpus	1,815,518			
<b>5</b> Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	9,071,882			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0		
<b>c</b> 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				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions				
<b>e</b> Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
<b>f</b> Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
<b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	613,256			
<b>9</b> Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	8,458,626			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2008	1,445,882			
<b>b</b> Excess from 2009	1,423,085			
<b>c</b> Excess from 2010	1,562,418			
<b>d</b> Excess from 2011	2,211,723			
<b>e</b> Excess from 2012	1,815,518			

**N/A**

- b** Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

- 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

- (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(i)(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 foundation 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) )

HOWARD E COX

- 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

**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 or e-mail of the person to whom applications should be addressed

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

- c Any submission deadlines**

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

**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
<b>a</b> <i>Paid during the year</i> See Attached Statement				
<b>Total</b>			<b>3a</b>	1,878,600
<b>b</b> <i>Approved for future payment</i> NONE				
<b>Total</b>			<b>3b</b>	0



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

- |          |  |              |            |           |
|----------|--|--------------|------------|-----------|
| <b>1</b> | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  |              | <b>Yes</b> | <b>No</b> |
| <b>a</b> | Transfers from the reporting foundation to a noncharitable exempt organization of:   |              |            |           |
| (1)      | Cash   | <b>1a(1)</b> |            | X         |
| (2)      | Other assets   | <b>1a(2)</b> |            | X         |
| <b>b</b> | Other transactions   |              |            |           |
| (1)      | Sales of assets to a noncharitable exempt organization   | <b>1b(1)</b> |            | X         |
| (2)      | Purchases of assets from a noncharitable exempt organization   | <b>1b(2)</b> |            | X         |
| (3)      | Rental of facilities, equipment, or other assets   | <b>1b(3)</b> |            | X         |
| (4)      | Reimbursement arrangements   | <b>1b(4)</b> |            | X         |
| (5)      | Loans or loan guarantees   | <b>1b(5)</b> |            | X         |
| (6)      | Performance of services or membership or fundraising solicitations   | <b>1b(6)</b> |            | X         |
| <b>c</b> | Sharing of facilities, equipment, mailing lists, other assets, or paid employees   | <b>1c</b>    |            | X         |
| <b>d</b> | 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 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. |              |            |           |

[illegible]

- 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
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**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 on all information of which preparer has any knowledge.

Signature of officer or trustee

10/21/2013  
Date

Trustee  
Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

**Paid /**  
**Preparer**  
**Use Only**

Print/Type preparer's name

Preparer's signature

Date \_\_\_\_\_

Check ☒ if self-employed

PTIN

**DONALD J ROMAN**

10/21/2013

P00364310

Firm's name ► PricewaterhouseCoopers, LLP

Firm's EIN ▶ 13-4008324

Firm's address ► 600 GRANT STREET, PITTSBURGH, PA 15219

Phone no	412-355-6000
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CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

COUNCIL ON FOREIGN RELATIONS

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

20,000

Name

HARVARD BUSINESS SCHOOL

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

50,000

Name

CHANTICLEER

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

500

Name

PRINCETON UNIVERSITY CLASS OF 1964

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

50

Name

POPULATION COUNCIL

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

5,000

Name

HOOVER INSTITUTE

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

10,000

CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

GLADES ACADEMY

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

5,000

Name

PRINCETON UNIVERSITY

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

1,000

Name

PRESERVATION FDN

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

5,000

Name

PIONEER INSTITUTE

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

500

Name

ART SPRING FDN

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

1,000

Name

FULLER CRAFTS MUSEUM

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

4,000



CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

AMERICAN IRELAND FUND

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 2,000

Name

HARVARD SCHOOL OF PUBLIC HEALTH

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 10,000

Name

COMMON GOOD

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 500

Name

PRINCETON UNIVERSITY

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 10,000

Name

THE TRUSTEES OF PRINCETON UNIVERSITY

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 11,000

Name

COLUMBIA LAW SCHOOL

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 2,500

CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

THE PALM BEACH ZOO

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

THE ASPEN INSTITUTE

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 2,500

Name

PRINCETON UNIVERSITY

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 200,000

Name

COMMONWEALTH OF SHAKESPEAR

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

FRIENDS OF WESTHAMPTON BEACH

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 100

Name

THE ASPEN INSTITUTE

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,500

CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

THE ORDER OF ST JOHN

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

THE ASIA FOUNDATION

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 2,500

Name

THE PERLMAN MUSIC PROGRAM

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

MIDDLE EAST CHILDRENS INSTITUTE

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 2,000

Name

MUSEUM OF SCIENCE

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

Name

BRIGHAM AND WOMEN HOSPITAL

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

EAST END HOSPICE

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

250

Name

COLLEGIATE SCHOOL

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

2,000

Name

BROOKINGS INSTITUTE

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

200,000

Name

THE FOUR ARTS

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

10,000

Name

DANA FARBER CANCER INSTITUTE

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

200,000

Name

THE SOC OF MSKCC

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

2,000

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

MUSEUM OF FINE ARTS

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 200,000

Name

HARVARD ART MUSEUM

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

Name

COUNCIL OF FOREIGN RELATIONS

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 150,000

Name

BUSINESS EXECUTIVES

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 50,000

Name

BATH AND TENNIS CLUB

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 2,000

Name

EAST END HOSPICE

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 250,000

CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

USTA SERVES

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

3,500

Name

PRINCETON UNIVERSITY

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

15,000

Name

NATIONAL TROPIC BOTANICAL GARDEN

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

10,000

Name

EPIPHANY SCHOOL OF DORCHESTER

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

500

Name

NEW ENGLAND GENEEOLOGICAL

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

2,500

Name

ENDEAVOR GLOBAL INC

Street

City

State

Zip Code

Foreign Country

Relationship

NONE

Foundation Status

501 (C)(3)

Purpose of grant/contribution

GENERAL OPERATING-CASH

Amount

2,500

CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

FRIENDS OF WESTHAMPTON BEACH

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 100

Name

PRESERVATION FDN

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 2,400

Name

THE SOC OF MSKCC

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

ST ANDREWS DUNE

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

Name

THE AMERICAN IRELAND FUND

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

Name

BRIGHAM AND WOMEN HOSPITAL

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 10,000

CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

DANA FARBER CANCER

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

Name

COUNCIL OF FOREIGN RELATIONS

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 20,000

Name

BOSTON PUBLIC LIBRARY

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

Name

SOUTHAMPTON HOSPITAL

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

ST MARKS EPISCOPAL

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 2,000

Name

HARVARD BUSINESS SCHOOL

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 75,000



CLERMONT CHARITABLE TRUST

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**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

POLICE ATHLETIC

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

FREINDS OF WESTHAMPTON

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 500

Name

HARVARD BUSINESS SCHOOL

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 200,000

Name

POLICE BENEVOLENT

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 500

Name

TOWN OF PALM BEACH

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

Name

INNER CITY SCHOOL

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

CLERMONT CHARITABLE TRUST

04-6772671 Page 12 of 13

**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

ENDS OF THE EARTH

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 700

Name

PALM BEACH ZOO

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

Name

MIDDLE EAST CHILDRENS INSTITUTE

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

FRIENDS OF THE PUBLIC GARDEN

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

FDN FRO ART &amp; PRESERVATION

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 2,500

Name

GLADES ACADEMY

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

CLERMONT CHARITABLE TRUST

04-6772671 Page 13 of 13

**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

Name

ROGERSON COMMUNITIES

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 5,000

Name

ST BARTHOLEMEWS

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 8,000

Name

VILLAGE IMPROVEMENT ASSN

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 1,000

Name

CURE ALZHEIMERS FUND

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 20,000

Name

THE METRO MUSEUM OF ART

Street

City	State	Zip Code	Foreign Country
Relationship NONE	Foundation Status 501 (C)(3)		
Purpose of grant/contribution GENERAL OPERATING-CASH			Amount 20,000

Name

Street

City	State	Zip Code	Foreign Country
Relationship	Foundation Status		
Purpose of grant/contribution			Amount

Online at: [www.mymerrill.com](http://www.mymerrill.com)

HOWARD E COX TTEE  
U/A DTD 05/19/1998  
CLERMONT CHARITABLE TRUST  
15 CONGRESS ST STE B6  
BOSTON MA 02109-3601

Account Number: **REDACTED**

24-Hour Assistance: (800) MERRILL

**Net Portfolio Value: \$1,436,522.72**

Your Private Wealth Advisor:  
ATWOOD GROUP  
100 FEDERAL STREET 17TH FLOOR  
BOSTON MA 02110  
1-800-765-6194

## CLERMONT TRUST

December 01, 2012 - December 31, 2012

ASSETS	December 31	November 30
Cash/Money Accounts	1,436,522.72	1,469,131.74
Fixed Income	-	-
Equities	-	-
Mutual Funds	-	-
Options	-	-
Other	-	-
<b>Subtotal (Long Portfolio)</b>	<b>1,436,522.72</b>	<b>1,469,131.74</b>
<b>TOTAL ASSETS</b>	<b>\$1,436,522.72</b>	<b>\$1,469,131.74</b>
<b>LIABILITIES</b>		
Debit Balance	-	-
Short Market Value	-	-
<b>TOTAL LIABILITIES</b>	<b>-</b>	<b>-</b>
<b>NET PORTFOLIO VALUE</b>	<b>\$1,436,522.72</b>	<b>\$1,469,131.74</b>

CASH FLOW	This Statement	Year to Date
Opening Cash/Money Accounts	\$1,469,131.74	
<b>CREDITS</b>		
Funds Received	-	28,802.05
Electronic Transfers	-	210,823.13
Other Credits	204.52	6,318.19
<b>Subtotal</b>	<b>204.52</b>	<b>245,943.37</b>
<b>DEBITS</b>		
Electronic Transfers	-	-
Margin Interest Charged	-	-
Other Debits	(2,799.18)	(17,822.61)
Visa Purchases (debits)	-	-
ATM/Cash Advances	-	-
Checks Written/Bill Payment	(30,200.00)	(1,925,700.00)
<b>Subtotal</b>	<b>(32,999.18)</b>	<b>(1,943,522.61)</b>
<b>Net Cash Flow</b>	<b>(\$32,794.66)</b>	<b>(\$1,697,579.24)</b>
Dividends/Interest Income	185.64	3,360.88
Security Purchases/Debits	-	(570,000.00)
Security Sales/Credits	-	3,233,757.36
<b>Closing Cash/Money Accounts</b>	<b>\$1,436,522.72</b>	
Securities You Transferred In/Out	-	2,772,000.00

The Private Banking and Investment Group makes available products and services offered by Merrill Lynch, Pierce, Fenner & Smith Incorporated (MLPF&S) and other subsidiaries of Bank of America Corporation. Investment products: ☐ Are Not FDIC Insured ☐ Are Not Bank Guaranteed ☐ May Lose Value  
MLPF&S is a registered broker-dealer, Member Securities Investor Protection Corporation (SIPC) and a wholly owned subsidiary of Bank of America Corporation.

HOWARD E COX TTEE

Account Number **010-000000**

24-Hour Assistance: (800) MERRILL

## YOUR TAA BANK DEPOSIT INTEREST SUMMARY

December 01, 2012 - December 31, 2012

Money Account Description	Opening Balance	Average Deposit Balance	Current Yield%	Interest on Deposits	Closing Balance
FIA Card Services, N.A.	977,102	965,641	.15	122.98	944,515
Bank of America RI, N.A.	492,028	492,001	.15	62.66	492,006
<b>TOTAL ML Bank Deposit Program</b>	<b>1,469,130</b>			<b>185.64</b>	<b>1,436,521</b>

## YOUR TAA STATEMENT OF PRINCIPAL INVESTMENTS

CASH/MONEY ACCOUNTS	Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Estimated Annual Income	Est. Annual Yield%
CASH	0.08	0.08		.08		

## YOUR TAA STATEMENT OF INCOME INVESTMENTS

CASH/MONEY ACCOUNTS	Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Estimated Annual Income	Est. Annual Yield%
CASH	1.64	1.64		1.64		
ML BANK DEPOSIT PROGRAM	1,436,521.00	1,436,521.00	1.0000	1,436,521.00	2,155	.15
<b>TOTAL</b>		<b>1,436,522.64</b>		<b>1,436,522.64</b>	<b>2,155</b>	<b>.15</b>
<b>TOTAL INCOME INVESTMENTS</b>		<b>1,436,522.64</b>		<b>1,436,522.64</b>	<b>2,154</b>	<b>.15</b>

LONG PORTFOLIO	Adjusted/Total Cost Basis	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield%
<b>TOTAL PRINCIPAL/INCOME INVESTMENTS</b>	<b>1,436,522.72</b>	<b>1,436,522.72</b>			<b>2,155</b>	<b>.15</b>

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HOWARD E COX TTEE

Account Number: [REDACTED]

## YOUR TAA TRANSACTIONS

December 01, 2012 - December 31, 2012

DIVIDENDS/INTEREST INCOME TRANSACTIONS				
Date	Transaction Type	Quantity	Description	
12/31	Bank Interest		BANK DEPOSIT INTEREST	
			BANKING INTEREST	
			ML BANK DEPOSIT PROGRAM	
	Income Total			17.00
	Subtotal (Taxable Interest)			185.64
	NET TOTAL			185.64
				3,360.88
				3,360.88

## REALIZED GAINS/(LOSSES)

Description	Quantity	Acquired Date	Liquidation Date	Sale Amount	Cost Basis	This Statement	Gains/(Losses) * Year to Date
LINKEDIN CORP	30000.0000	N/A	02/29/12	2,632,349.51	N/A	N/A	
Subtotal (Short-Term)							31,407.85
TOTAL				2,632,349.51			31,407.85

\* - Excludes transactions for which we have insufficient data

N/A - Results which cannot be calculated because of insufficient data are reflected by an N/A entry in the capital gain or (loss) column and are not included in the realized capital gain and loss summary.

The capital gains and losses shown above may not reflect all transactions which must be reported on your 2012 tax return. These reportable transactions will appear on your January statement.

## CASH/OTHER TRANSACTIONS

Date	Transaction Type	Quantity	Description	Income Cash	Principal Cash
12/11	Trustee Fee		TRUSTEE FEE-PERIOD OF 10/27/2012 TO 11/30/2012 APPLIED TO PRINCIPAL BASED ON AVG MKT VAL OF \$1,625,807.74		(166.66)
12/13	Portfolio Xfer		1640ADJ NON RPT ADJ NON RPT Portfolio adjustment accum income to	(204.52)	

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Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

Totals														
Capital Gains/Losses														
Other sales														
Amount														
Long Term CG Distributions														
Short Term CG Distributions														
0														
0														
Check "X" to include in Part IV	Description	CUSIP #	Purchaser	Check "X" if Purchaser is a Business	Date Acquired	Acquisition Method	Date Sold	Gross Sales Price	Cost or Other Basis	Gross Sales		Cost, Other Basis and Expenses		Net Gain or Loss
										Valuation Method	Expense of Sale and Cost of Improvements	Depreciation	Adjustments	
1	X	FACEBOOK INC	30303M102		5/17/2012		5/18/2012	216,643	205,200					11,443
2	X	FACEBOOK INC	30303M102		5/17/2012		5/18/2012	28,083	26,600					1,483
3	X	FACEBOOK INC	30303M102		5/17/2012		5/18/2012	177,559	168,264					9,295
4	X	FACEBOOK INC	30303M102		5/17/2012		5/18/2012	36,080	34,200					1,880
5	X	FACEBOOK INC	30303M102		5/17/2012		5/18/2012	21,701	20,596					1,105
6	X	FACEBOOK INC	30303M102		5/17/2012		5/18/2012	94,103	89,338					4,765
7	X	FACEBOOK INC	30303M102		5/17/2012		5/18/2012	23,223	22,002					1,221
8	X	LINKEDIN CORP	53576A108		2/29/2012		2/29/2012	2,632,350	19,200					2,613,150
9	X	FACEBOOK INC	30303M102		5/17/2012		5/18/2012	4,015	3,800					215

**Part I, Line 16b (990-PF) - Accounting Fees**

		818	0	0	818
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	TAX PREP FEES	818			818



**Part I, Line 16c (990-PF) - Other Professional Fees**

		1,833	1,100	0	733
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	MERRILL LYNCH FEES AS AGENT	1,833	1,100		733

**Part I, Line 18 (990-PF) - Taxes**

		8,437	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	ESTIMATED EXCISE TAX PAID	8,437	0		

**Part I, Line 23 (990-PF) - Other Expenses**

		250	0	0	250
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	STATE AG FEES	250	0		250

**Part III (990-PF) - Changes in Net Assets or Fund Balances**

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**Line 3 - Other increases not included in Part III, Line 2**

1	GRANTS PAID IN 2012, CLEARED IN 2013	1	49,000
2	Total	2	49,000

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**Line 5 - Decreases not included in Part III, Line 2**

1	COST BASIS ADJUSTMENT	1	80,767
2	EXCESS FMV OVER COST OF ASSETS CONTRIBUTED	2	2,606,400
3	GRANTS PAID IN 2011, CLEARED IN 2012	3	15,000
4	Total	4	2,702,167

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Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

Long Term CG Distributions										Short Term CG Distributions										Amount	
Description of Property Sold		CUSIP #	How Acquired	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed	Adjustments	Cost or Other Basis Plus Expense of Sale	Gain or Loss	F MV as of 12/31/89	Adjusted Basis as of 12/31/89	Excess of FMV Over Adj. Basis	2,844,557	0	Gain Minus Excess of FMV Over Adjusted Basis or Losses					
1	FACEBOOK INC	30303M102	Acquired	5/17/2012	5/18/2012	218,643		0	205,200	11,443	0	0	0	11,443							
2	FACEBOOK INC	30303M102	Acquired	5/17/2012	5/18/2012	28,083		0	26,600	1,483	0	0	0	1,483							
3	FACEBOOK INC	30303M102	Acquired	5/17/2012	5/18/2012	177,559		0	168,284	9,295	0	0	0	9,295							
4	FACEBOOK INC	30303M102	Acquired	5/17/2012	5/18/2012	38,080		0	34,200	1,880	0	0	0	1,880							
5	FACEBOOK INC	30303M102	Acquired	5/17/2012	5/18/2012	21,701		0	20,596	1,105	0	0	0	1,105							
6	FACEBOOK INC	30303M102	Acquired	5/17/2012	5/18/2012	94,103		0	89,338	4,765	0	0	0	4,765							
7	FACEBOOK INC	30303M102	Acquired	5/17/2012	5/18/2012	23,223		0	22,002	1,221	0	0	0	1,221							
8	LINKEDIN CORP	53578A108	Acquired	2/29/2012	2/29/2012	2,832,350		0	19,200	2,813,150	0	0	0	2,813,150							
9	FACEBOOK INC	30303M102	Acquired	5/17/2012	5/18/2012	4,015		0	3,800	215	0	0	0	215							

0	Expense Account -	0	.
---	-------------------	---	---

**Part XV, Lines 1a-1b (990-PF) - Information Regarding Foundation Managers**

---

List Managers who contributed more than 2%  
of the total contributions received by the foundation

1	HOWARD E. COX
2	
3	
4	
5	
6	
7	
8	
9	
10	

List Managers who own 10% or more of the stock  
of a corporation of which the foundation has a 10%  
or greater interest

1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

---

**Part VI, Line 6a (990-PF) - Estimated Tax Payments**

	Date	Amount
1 Credit from prior year return . . . . .	1	1,272
2 First quarter estimated tax payment . . . . .	2	
3 Second quarter estimated tax payment . . . . .	3	
4 Third quarter estimated tax payment . . . . .	4	
5 Fourth quarter estimated tax payment . . . . .	5	
6 Other payments . . . . .	6	8,437
7 Total . . . . .	7	9,709



Form **8868**  
(Rev. January 2013)  
Department of the Treasury  
Internal Revenue Service

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

► File a separate application for each return.

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- 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](http://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 File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	CLERMONT CHARITABLE TRUST	04-6772671
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	P.O. BOX 43250	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	JACKSONVILLE	FL 32203-3250

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 (sec. 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 ► MLTC, A DIVISION OF BANK OF AMERICA, N.A.

Telephone No ► 609-274-6834

FAX No ►

- 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 8/15/2013 to file the exempt organization return for the organization named above. The extension is for the organization's return for: ☒ calendar year 2012 or

► ☐ tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

- 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	\$	26,463
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	\$	9,709
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	\$	16,754

**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

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

Form **8868** (Rev. 1-2013)

HTA

- 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

Type or print  File by the due date for filing your return. See instructions.	Name of exempt organization	Employer identification number (EIN) or
	CLERMONT CHARITABLE TRUST	04-6772671
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	P.O. BOX 43250	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	JACKSONVILLE	FL 32203-3250

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 (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 automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of ☒ MLTC, A DIVISION OF BANK OF AMERICA, N.A.  
Telephone No. ☒ 609-274-6834 FAX No. ☐
- 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 11/15/2013
- 5 For calendar year 2012, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_
- 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. An attempt to obtain information necessary for filing a return was requested in a timely fashion, but the information was not furnished in sufficient time to permit the timely filing of the return, or the taxpayer personally visited an IRS office for the purpose of securing information or advice and was unable to meet with an IRS representative.

<b>8a</b> 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.	<b>8a</b>	\$	26,463
<b>b</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 and any amount paid previously with Form 8868.	<b>8b</b>	\$	26,463
<b>c</b> <b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$	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 ☐Title ☐ TrusteeDate ☐