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Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

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1

Briefly describe the organization's mission

TO RECEIVE PUBLIC CONTRIBUTIONS AND MAKE GRANTS TO QUALIFIED CHARITABLE ORGANIZATIONS

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ 850,219 including grants of \$ 850,219 ) (Revenue \$ )

NATIONAL ACADEMY OF SCIENCES THIS GIFT FROM THE BESSEMER NATIONAL GIFT FUND WAS USED TO SUPPORT THE INSTITUTE OF MEDICINE THIS GIFT WAS INTENDED FOR GENERAL OPERATING SUPPORT THE INSTITUTE OF MEDICINE IS AN INDEPENDENT, NONPROFIT ORGANIZATION THAT WORKS OUTSIDE GOVERNMENT TO PROVIDE UNBIASED AND AUTHORITATIVE ADVICE TO DECISION MAKERS AND THE PUBLIC ESTABLISHED IN 1970, THE INSTITUTE OF MEDICINE IS THE HEALTH ARM OF THE NATIONAL ACADEMY OF SCIENCES, WHICH WAS CHARTED UNDER PRESIDENT LINCOLN IN 1863

4b

(Code ) (Expenses \$ 520,750 including grants of \$ 520,750 ) (Revenue \$ )

THE HARPETH HALL SCHOOL THIS GIFT FROM THE BESSEMER NATIONAL GIFT FUND WAS USED TO HELP SUPPORT THE DAY-TO-DAY OPERATIONS OF THE HARPETH HALL SCHOOL THE HARPETH HALL SCHOOL IS THE ONLY INDEPENDENT COLLEGE PREPARATORY SCHOOL FOR 5TH THROUGH 12TH GRADE GIRLS IN MIDDLE TENNESSEE THE HARPETH HALL COMMUNITY STUDENT AND FACULTY HAS CHOSEN RESPECT, INTEGRITY, INDIVIDUALITY, AND TRUST TO BE THEIR GUIDING PRINCIPLES THE SCHOOL HAS A 148-YEAR TRADITION OF EXCELLENCE AND COMMITMENT TO LIFE-LONG LEARNING, AND IT EDUCATES YOUNG WOMEN TO THINK CRITICALLY, TO LEAD CONFIDENTLY, AND TO LIVE HONORABLY

4c

(Code ) (Expenses \$ 260,000 including grants of \$ 260,000 ) (Revenue \$ )

AGNES SCOTT COLLEGE THIS GIFT FROM THE BESSEMER NATIONAL GIFT FUND WAS USED TO SUPPORT DEVELOPMENT AND TEACHING OF A PUBLIC HEALTH MINOR, INTEGRATE PUBLIC HEALTH INTO THE LIBERAL ARTS CURRICULUM, ESTABLISH PUBIC HEALTH INTERNSHIPS, AND PROMOTE PROJECT MANAGEMENT AND MARKETING AT THE COLLEGE AGNES SCOTT COLLEGE, FOUNDED IN 1889, IS AN INDEPENDENT NATIONAL LIBERAL ARTS COLLEGE FOR WOMEN LOCATED IN THE METROPOLITAN ATLANTA AREA WITH OVER 904 STUDENTS

(Code ) (Expenses \$ 5,301,468 including grants of \$ 5,301,468 ) (Revenue \$ )

THE ORGANIZATION ALSO MADE GRANTS TO A NUMEROUS AMOUNT OF OTHER ORGANIZATIONS FOR CHARITABLE PURPOSES

4d

Other program services (Describe in Schedule O )
















(Expenses \$ 5,301,468 including grants of \$ 5,301,468 ) (Revenue \$ )

4e

Total program service expenses

6,932,437

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6 Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a	No
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		No
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the organization make any taxable distributions under section 4966?		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?		No
10	<b>Section 501(c)(7) organizations.</b> Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	<b>Section 501(c)(12) organizations.</b> Enter		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	3	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	2	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	15a	No
15b	Other officers or key employees of the organization	15b	No
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	►NJ, NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	►BESSEMER TRUST COMPANY 101 WOODBRIDGE CENTER DRIVE WOODBRIDGE, NJ (732) 855-0800

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]



## Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b</b> Sub-Total . . . . .										
<b>c</b> Total from continuation sheets to Part VII, Section A . . . . .										
<b>d</b> Total (add lines 1b and 1c) . . . . .							245,754	0	0	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

		Yes	No
<b>3</b>	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b>	No
<b>4</b>	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b>	No
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>	No

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a			
	b	Membership dues . . . . .	1b			
	c	Fundraising events . . . . .	1c			
	d	Related organizations . . . .	1d	26,039		
	e	Government grants (contributions)	1e			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	16,313,651		
	g	Noncash contributions included in lines 1a-1f \$		8,435,788		
	h	Total. Add lines 1a-1f . . . . .		16,339,690		
Program Service Revenue	2a		Business Code			
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f . . . . .				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	904,086		
4		Income from investment of tax-exempt bond proceeds . .				
5		Royalties . . . . .				
6a		Gross rents	(i) Real	(ii) Personal		
b		Less rental expenses				
c		Rental income or (loss)				
d		Net rental income or (loss) . . . . .				
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
b		Less cost or other basis and sales expenses	6,007,886			
c		Gain or (loss)	5,683,907			
d		Net gain or (loss) . . . . .	323,979			323,979
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a			
b		Less direct expenses . . . .	b			
c		Net income or (loss) from fundraising events . .				
9a		Gross income from gaming activities See Part IV, line 19 . . . .	a			
b		Less direct expenses . . . .	b			
c		Net income or (loss) from gaming activities . .				
10a		Gross sales of inventory, less returns and allowances .	a			
b		Less cost of goods sold . . .	b			
c		Net income or (loss) from sales of inventory . .				
	Miscellaneous Revenue	Business Code				
11a						
b						
c						
d	All other revenue . . . . .					
e	Total. Add lines 11a-11d . . . . .					
12	Total revenue. See Instructions . . . . .		17,567,755	0	0	1,228,065

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	6,932,437	6,932,437		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	245,754		245,754	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits.				
10	Payroll taxes.				
11	Fees for services (non-employees):				
a	Management.				
b	Legal.				
c	Accounting.	15,514		15,514	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).				
12	Advertising and promotion.				
13	Office expenses.				
14	Information technology.				
15	Royalties.				
16	Occupancy.				
17	Travel.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.				
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.				
23	Insurance.				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O).				
a	FOREIGN TAXES PAID	15,195		15,195	
b	MISCELLANEOUS	527		527	
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	7,209,427	6,932,437	276,990	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

☒

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .				1	
	2	Savings and temporary cash investments . . . . .			4,034,321	2	6,612,742
	3	Pledges and grants receivable, net . . . . .			0	3	200,000
	4	Accounts receivable, net . . . . .				4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .			2,400,000	7	0
	8	Inventories for sale or use . . . . .				8	
	9	Prepaid expenses and deferred charges . . . . .				9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			10c	
	b	Less accumulated depreciation . . . . .	10b				
	11	Investments—publicly traded securities . . . . .			15,013,252	11	26,573,727
	12	Investments—other securities See Part IV, line 11 . . . . .			15,407,046	12	15,906,997
	13	Investments—program-related See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets See Part IV, line 11 . . . . .				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			36,854,619	16	49,293,466
Liabilities	17	Accounts payable and accrued expenses . . . . .			35,829	17	40,154
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .				19	
	20	Tax-exempt bond liabilities . . . . .				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D . . . . .				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .				22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .				23	
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D . . . . .				25	
	26	Total liabilities. Add lines 17 through 25 . . . . .			35,829	26	40,154
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			36,818,790	27	49,253,312
	28	Temporarily restricted net assets . . . . .				28	
	29	Permanently restricted net assets . . . . .				29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	Total net assets or fund balances . . . . .			36,818,790	33	49,253,312
	34	Total liabilities and net assets/fund balances . . . . .			36,854,619	34	49,293,466

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	17,567,755
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,209,427
3	Revenue less expenses Subtract line 2 from line 1	3	10,358,328
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	36,818,790
5	Net unrealized gains (losses) on investments	5	2,076,194
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	49,253,312

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

SCHEDULE A  
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
THE BESSEMER NATIONAL GIFT FUND  
C/O BESSEMER TRUST COMPANY

Employer identification number  
13-7111099

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- ☐ 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- ☐ 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- ☐ 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- ☐ 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- ☐ 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- ☐ 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- ☒ 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- ☐ 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- ☐ 9 An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- ☐ 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- ☐ 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

☐ a Type I ☐ b Type II ☐ c Type III - Functionally integrated ☐ d Type III - Non-functionally integrated
- ☐ e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- ☐ f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- ☐ g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

Yes

No

(ii) A family member of a person described in (i) above?

Yes

No

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Yes

No

☐ h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	4,054,909	5,492,793	15,343,945	8,430,892	16,339,690	49,662,229
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	4,054,909	5,492,793	15,343,945	8,430,892	16,339,690	49,662,229
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						21,496,136
6 Public support. Subtract line 5 from line 4						28,166,093

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	4,054,909	5,492,793	15,343,945	8,430,892	16,339,690	49,662,229
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	847,311	503,010	799,074	887,816	904,086	3,941,297
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
11 Total support (Add lines 7 through 10)						53,603,526
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	52 550 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	44 610 %
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶		

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		



**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

THE BESSEMER NATIONAL GIFT FUND  
C/O BESSEMER TRUST COMPANY

Employer identification number

13-7111099

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	95
2	Aggregate contributions to (during year)	16,313,651
3	Aggregate grants from (during year)	6,932,437
4	Aggregate value at end of year	49,093,443
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4

Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

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Cat No 52283D

Schedule D (Form 990) 2012

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				0

Schedule D (Form 990) 2012



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	19,643,949
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains on investments . . . . .	<b>2a</b>	2,076,194
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	2,076,194
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	17,567,755
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	17,567,755

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	7,209,427
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	7,209,427
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	7,209,427

**Part XIII Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE FUND RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY WHEN THEY ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS DETERMINED THAT THE FUND HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE. THE FUND IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO 2009.

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Grants and Other Assistance to Organizations,  
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990

OMB No 1545-0047

2012

Open to Public  
Inspection

Name of the organization  
THE BESSEMER NATIONAL GIFT FUND  
C/O BESSEMER TRUST COMPANY

Employer identification number  
13-7111099

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

134

3

Enter total number of other organizations listed in the line 1 table . . . . .

**Part III**

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information.		
Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information		
Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE BESSEMER NATIONAL GIFT FUND GENERALLY LIMITS ITS GRANT MAKING TO ORGANIZATIONS RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT FROM TAX UNDER SECTION 501 (C)3 OF THE INTERNAL REVENUE CODE AND CLASSIFIED AS PUBLIC CHARITIES THE BESSEMER NATIONAL GIFT FUND'S DUE DILIGENCE PROCEDURES INCLUDE SCREENING GRANTEEES WITH THE IRS BUSINESS MASTER FILE, THE IRS AUTOMATIC REVOCATION LIST AND OFAC REVIEW, AS WELL AS OTHER INTERNAL GRANT MONITORING AND REVIEW PROCEDURES

Additional Data

Return to Form

Software ID:

Software Version:

EIN: 13-7111099

Name: THE BESSEMER NATIONAL GIFT FUND  
C/O BESSEMER TRUST COMPANY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
21ST CENTURY PARKS471 MAIN STREET LOUISVILLE,KY 40202	20-1780317	501(C)3	10,000				GENERAL OPERATING SUPPORT
564 PARK AVENUE PRESERVATION FOUNDATION564 PARK AVENUE NEWYORK,NY 10065	20-3719314	501(C)3	10,000				GENERAL OPERATING SUPPORT
ACTORS THEATRE OF LOUISVILLE316 W MAIN STREET LOUISVILLE,KY 40202	61-0645030	501(C)3	30,000				GENERAL OPERATING SUPPORT
AGNES SCOTT COLLEGE 141 EAST COLLEGE AVE DECATUR,GA 30030	58-0566116	501(C)3	260,000				GENERAL OPERATING SUPPORT
AMERICAN RED CROSS DISASTER RELIEFPO BOX 4002018 DES MOINES,IA 50340	53-0196605	501(C)3	10,000				GENERAL OPERATING SUPPORT
AMNESTY INTERNATIONAL USA5 PENN PLAZA NEWYORK,NY 10001	52-0851555	501(C)3	200,000				GENERAL OPERATING SUPPORT
ATLANTA SYMPHONY ORCHESTRA1280 PEACHTREE STREET NE ATLANTA,GA 30309	20-2944887	501(C)3	10,000				GENERAL OPERATING SUPPORT
ATLANTIC THEATER COMPANY76 NINTH AVENUE NEWYORK,NY 10011	13-3218253	501(C)3	10,000				GENERAL OPERATING SUPPORT
AVCAP2906 FANTA REED ROAD LA CROSSE,WI 54603	39-1975994	501(C)3	50,000				GENERAL OPERATING SUPPORT
BIBLICAL ARCHAEOLOGY SOCIETY6710 41ST ST WASHINGTON,DC 20016	23-7416300	501(C)3	50,000				GENERAL OPERATING SUPPORT
BOWNE HOUSE HISTORICAL SOCIETY INC 37-01 BOWNE STREET FLUSHING,NY 11354	11-6111192	501(C)3	10,000				GENERAL OPERATING SUPPORT
BREAST TREATMENT TASK FORCE150 W 25TH STREET NEWYORK,NY 10001	13-4018407	501(C)3	10,000				GENERAL OPERATING SUPPORT
BRYN MAWR COLLEGE101 N MERION AVENUE HELFARIAN BRYN MAWR,PA 19010	23-1352621	501(C)3	100,000				GENERAL OPERATING SUPPORT
CAMP MICHAWANA5800 HEAD LAKE ROAD HASTINGS,MI 49058	38-6087770	501(C)3	20,000				GENERAL OPERATING SUPPORT
CAPE COD MARITIME MUSEUMPO BOX 443 HYANNIS,MA 02601	04-3438295	501(C)3	50,000				GENERAL OPERATING SUPPORT
CAPUCHIN FRANCISCAN FOUNDATION FOR RETIRED FRIARS1345 CORTEZ AVENUE BURLINGAME,CA 94010	94-2609627	501(C)3	62,500				GENERAL OPERATING SUPPORT
CHATTAHOOCHEE VALLEY HOSPITAL SOCIETY INC 4800 48TH STREET VALLEY,AL 36884	63-0288852	501(C)3	10,000				GENERAL OPERATING SUPPORT
CHEEKWOOD1200 FORREST PARK DRIVE NASHVILLE,TN 37205	62-0627921	501(C)3	6,000				GENERAL OPERATING SUPPORT
CHI PHI EDUCATIONAL TRUSTPO BOX 2187 COLUMBUS,GA 31902	58-6035103	501(C)3	15,000				GENERAL OPERATING SUPPORT
CHICAGO HISTORY MUSEUM1601 N CLARK STREET CHICAGO,IL 60614	20-4982186	501(C)3	10,000				GENERAL OPERATING SUPPORT



Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHICAGO SYMPHONY ORCHESTRA220 SOUTH MICHIGAN AVENUE CHICAGO,IL 60604	36-2167823	501(C)3	55,000				GENERAL OPERATING SUPPORT
CHILDREN'S HOSPITAL COLORADO FOUNDATION 13123 EAST 16TH AVE AURORA,CO 80045	84-0813462	501(C)3	10,000				GENERAL OPERATING SUPPORT
CORNERSTONE UNIVERSITY1001ERES BERTLINE AVE NE GRAND RAPIDS,MI 49525	38-1443369	501(C)3	50,000				GENERAL OPERATING SUPPORT
CURE INTERNATIONALPO BOX 2323 HARRISBURG,PA 17105	58-2248383	501(C)3	10,000				GENERAL OPERATING SUPPORT
DREPUNG LOSELING MONASTERY INC1791 DRESDEN DRIVE ATLANTA,GA 30319	58-1953690	501(C)3	10,000				GENERAL OPERATING SUPPORT
DUKE UNIVERSITYPO BOX 27708 DURHAM,NC 27708	56-0532129	501(C)3	25,000				GENERAL OPERATING SUPPORT
EPISCOPAL HIGH SCHOOL 1200 NORTH QUAKER LANE ALEXANDRIA,VA 22302	76-0056509	501(C)3	100,000				GENERAL OPERATING SUPPORT
EPISCOPAL HIGH SCHOOL 1200 NORTH QUAKER LANE ALEXANDRIA,VA 22302	54-0506326	501(C)3	100,000				GENERAL OPERATING SUPPORT
FIRST PRESBYTERIAN CHURCH1390 NORTH STATE STREET JACKSON,MS 39202	64-3004266	501(C)3	55,000				GENERAL OPERATING SUPPORT
FIRST UNITED METHODIST CHURCH OF WEST POINT 306 E 7TH STREET WEST POINT,GA 31833	58-0648679	501(C)3	89,300				GENERAL OPERATING SUPPORT
FOREST PARK PROJECT CORPORATIONPO BOX 868 LAKE FOREST,IL 60045	45-3461963	501(C)3	67,500				GENERAL OPERATING SUPPORT
FRANKLIN ROAD ACADEMY 4700 FRANKLIN ROAD NASHVILLE,TN 37220	62-1138075	501(C)3	70,000				GENERAL OPERATING SUPPORT
FRIENDS OF THE SMOKIES PO BOX 1660 KODAK,TN 37764	62-1564782	501(C)3	13,750				GENERAL OPERATING SUPPORT
FRIST CENTER FOR THE VISUAL ARTS919 BROADWAY NASHVILLE,TN 37203	62-1731495	501(C)3	5,000				GENERAL OPERATING SUPPORT
GERMANTOWN FRIENDS SCHOOL31 WEST COULTER STREET PHILADELPHIA,PA 19144	05-0630018	501(C)3	15,000				GENERAL OPERATING SUPPORT
HAGGAI INSTITUTEPO BOX 13 ATLANTA,GA 30370	58-0898309	501(C)3	275,000				GENERAL OPERATING SUPPORT
HARDING ACADEMY170 WINDSOR DRIVE NASHVILLE,TN 37205	62-0852815	501(C)3	20,750				GENERAL OPERATING SUPPORT
HAYWOOD ANIMAL WELFARE ASSOCIATION 182 RICHLAND STREET WAYNESVILLE,NC 28786	56-1574745	501(C)3	20,000				GENERAL OPERATING SUPPORT
HILTON HEAD REGIONAL HABITAT FOR HUMANITY 21 BRENDAN LANE BLUFFTON,SC 29910	57-0916245	501(C)3	10,000				GENERAL OPERATING SUPPORT
HOAG HOSPITAL FOUNDATION500 SUPERIOR AVENUE NEWPORT BEACH,CA 92663	95-3222343	501(C)3	10,000				GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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INDIANA UNIVERSITY SCHOOL OF LAW520 WEST NEW YORK STREET INDIANAPOLIS,IN 46202	23-7056162	501(C)3	10,000				GENERAL OPERATING SUPPORT
INTERVARSITY CHRISTIAN FELLOWSHIPPO BOX 7895 MADISON,WI 53791	36-2171714	501(C)3	15,000				GENERAL OPERATING SUPPORT
JACKSONVILLE SYMPHONY ASSOCIATION300 WATER STREET JACKSONVILLE,FL 32202	59-6002520	501(C)3	10,000				GENERAL OPERATING SUPPORT
JOHN AUSTIN CHELEY FOUNDATIONPO BOX 151663 LAKEWOOD,CO 80215	48-1077337	501(C)3	10,000				GENERAL OPERATING SUPPORT
JOURNEY WITHIN SPIRITUALISTS' NATIONAL UNION CHURCH25 CARR STREET POMPTON PLAINS,NJ 07442	22-3502794	501(C)3	20,000				GENERAL OPERATING SUPPORT
KENT PLACE SCHOOL42 NORWOOD AVENUE SUMMIT,NJ 07902	22-1487233	501(C)3	10,000				GENERAL OPERATING SUPPORT
LA ANNA UNITED METHODIST CHURCH152 PENNSYLVANIA 191 CRESCO,PA 18326	20-3654399	501(C)3	6,000				GENERAL OPERATING SUPPORT
LAKE COUNTY COMMUNITY FOUNDATION114 SOUTH GENESEE STREET SUITE 505 WAUKEGAN,IL 60085		501(C)3	10,000				GENERAL OPERATING SUPPORT
LEARNING LEADERS INC80 MAIDEN LANE NEW YORK,NY 10038	13-2658549	501(C)3	10,000				GENERAL OPERATING SUPPORT
LONGHOUSE RESERVE133 HANDS CREEK ROAD EAST HAMPTON,NY 11937	33-1058583	501(C)3	10,000				GENERAL OPERATING SUPPORT
LOUISVILLE COLLEGIATE SCHOOL2427 GLENMARY AVENUE LOUISVILLE,KY 40204	61-0449630	501(C)3	12,000				GENERAL OPERATING SUPPORT
MAYO CLINIC JACKSONVILLE4500 SAN PABLO ROAD SOUTH JACKSONVILLE,FL 32224	41-6011702	501(C)3	125,000				GENERAL OPERATING SUPPORT
MIZPAH CONGREGATION 9223 MCCALLIE AVENUE CHATTANOOGA,TN 37403	62-0534807	501(C)3	25,000				GENERAL OPERATING SUPPORT
NATIONAL ACADEMY OF SCIENCES2101 CONSTITUTION AVENUE WASHINGTON,DC 20418	53-0196932	501(C)3	850,219				GENERAL OPERATING SUPPORT
NATURE LYCEUM FOR ORGANIC HORTICULTURE PO BOX 254 WESTHAMPTON,NY 11973	11-3223519	501(C)3	10,000				GENERAL OPERATING SUPPORT
NEW HORIZON COMMUNITY THEATER INCPO BOX 131 WEST POINT,GA 31833	63-1133823	501(C)3	15,000				GENERAL OPERATING SUPPORT
NEW YORK CITY BALLET20 LINCOLN CENTER NEW YORK,NY 10023	13-2947386	501(C)3	100,000				GENERAL OPERATING SUPPORT
NEW YORK PRESBYTERIANWEILL CORNELL MEDICAL CENTER 525 EAST 68TH STREET BOX 123 NEW YORK,NY 10065	13-3957095	501(C)3	10,000				GENERAL OPERATING SUPPORT
NORCROSS FIRST BAPTIST CHURCH706 N PEACHSTREET ST NORCROSS,GA 30071	83-0494683	501(C)3	10,000				GENERAL OPERATING SUPPORT
NORTH COUNTY TRADE TECH HIGH SCHOOL1126 NORTH MELROSE DRIVE VISTA,CA 92081		501(C)3	10,000				GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOVA SOUTHEASTERN UNIVERSITY3301 COLLEGE AVENUE FT LAUDERDALE,FL 33314	59-1083502	501(C)3	25,000				GENERAL OPERATING SUPPORT
OM SHIPS INTERNATIONAL781 ST ANDREWS RD FLORENCE,SC 24501	03-0577695	501(C)3	40,000				GENERAL OPERATING SUPPORT
PALMER MEMORIAL EPISCOPAL CHURCH6221 MAIN STREET HOUSTON,TX 77030	74-1157370	501(C)3	18,000				GENERAL OPERATING SUPPORT
PARK DAY SCHOOL CORPORATION360 42ND STREET OAKLAND,CA 94609	94-2368070	501(C)3	10,000				GENERAL OPERATING SUPPORT
PASCAL RIOULT DANCE THEATRE INC246 W 38TH STREET NEW YORK,NY 10018	13-3700857	501(C)3	50,000				GENERAL OPERATING SUPPORT
PAUL VERSLUIS MINISTRIES11 GIDDINGS AVE SE GRAND RAPIDS,MI 49506	64-0961225	501(C)3	25,000				GENERAL OPERATING SUPPORT
PEN CENTER USAPO BOX 6037 BEVERLY HILLS,CA 90212	95-3502910	501(C)3	6,250				GENERAL OPERATING SUPPORT
PETA501 FRONT STREET NORFOLK,VA 23510	52-1218336	501(C)3	30,000				GENERAL OPERATING SUPPORT
PETER DEYKENA MINISTRIESPO BOX 496 WHEATON,IL 60187	35-1835273	501(C)3	25,000				GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD 434 WEST 33RD STREET NEW YORK,NY 10001	13-2621497	501(C)3	5,200				GENERAL OPERATING SUPPORT
POINT UNIVERSITY2605 BEN HILL RONE EAST POINT,GA 30344	58-6044761	501(C)3	10,000				GENERAL OPERATING SUPPORT
POPULATION ACTION INTERNATIONAL1300 19TH STREET NW WASHINGTON,DC 20036	52-0812075	501(C)3	10,000				GENERAL OPERATING SUPPORT
RECIPE FOR SUCCESS FOUNDATIONPO BOX 56405 HOUSTON,TX 77256	20-3377041	501(C)3	10,000				GENERAL OPERATING SUPPORT
RICE UNIVERSITYMS-81 PO BOX 1892 HOUSTON,TX 77251	74-1109620	501(C)3	25,000				GENERAL OPERATING SUPPORT
RIVER OAKS BAPTIST SCHOOL ENDOWMENT FUND2300 WILLOWICK HOUSTON,TX 77027	76-0336852	501(C)3	35,000				GENERAL OPERATING SUPPORT
RIVER OAKS CHAMBER ORCHESTRA1973 WEST GRAY HOUSTON,TX 77019	30-0288750	501(C)3	15,000				GENERAL OPERATING SUPPORT
SLE LUPUS FOUNDATION 330 SEVENTH AVENUE SUITE 1701 NEW YORK,NY 10001	13-3060086	501(C)3	10,000				GENERAL OPERATING SUPPORT
SALISBURY UNIVERSITY FOUNDATIONPO BOX 2655 SALISBURY,MD 21802	52-1127396	501(C)3	6,300				GENERAL OPERATING SUPPORT
SAN DIEGO PUBLIC LIBRARY820 E STREET SAN DIEGO,CA 92101	33-0959608	501(C)3	5,000				GENERAL OPERATING SUPPORT
SAN DIEGO STATE UNIVERSITYSAN DIEO STATE UNIVERSITY SAN DIEGO,CA 92182	95-6042721	501(C)3	70,000				GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAT7PO BOX 2770 EASTON,MD 21601	23-2964829	501(C)3	10,000				GENERAL OPERATING SUPPORT
SCHWAB CHARITABLE FBO ERIN KONEN MEMORIAL FUND1958 SUMMIT PARK DRIVE ORLANDO,FL 32810	31-1640316	501(C)3	780,754				GENERAL OPERATING SUPPORT
SENAI INTERNATIONALPO BOX 133 WAXHAW,NC 28173	26-2607296	501(C)3	20,000				GENERAL OPERATING SUPPORT
SHRINERS HOSPITAL FOR CHILDREN2900 ROCKY POINT DRIVE TAMPA,FL 336071435	36-2193608	501(C)3	6,000				GENERAL OPERATING SUPPORT
SME FOUNDATION129999 EAST ADAM AIRCRAFT CIRCLE ENGLEWOOD,CO 80112	84-1175450	501(C)3	10,000				GENERAL OPERATING SUPPORT
SOLANO COMMUNITY FOUNDATION470 CHADBOURNE ROAD FAIRFIELD,CA 94534	68-0354961	501(C)3	50,000				GENERAL OPERATING SUPPORT
SOUTHAMPTON COLONIAL SOCIETYPO BOX 303 SOUTHAMPTON,NY 11969	11-6027807	501(C)3	10,000				GENERAL OPERATING SUPPORT
SOUTHAMPTON HOSPITAL FOUNDATION240 MEETING HOUSE LANE SOUTHAMPTON,NY 11968	11-3466516	501(C)3	10,000				GENERAL OPERATING SUPPORT
SQUAM LAKES CONSERVATION SOCIETY PO BOX 696 HOLDERNESS,NH 03245	02-6012747	501(C)3	5,200				GENERAL OPERATING SUPPORT
ST BARNABAS EPISCOPAL CHURCH953 LAKE AVENUE GREENWICH,CT 06831	62-0525715	501(C)3	45,000				GENERAL OPERATING SUPPORT
ST GEORGE'S EPISCOPAL CHURCH4715 HARDING PIKE NASHVILLE,TN 37205		501(C)3	20,000				GENERAL OPERATING SUPPORT
ST ISAAC JOGUES CHURCH 306 W FOURTH STREET HINSDALE,IL 60521	94-1322195	501(C)3	16,000				GENERAL OPERATING SUPPORT
ST ISIDORE CHURCH440 LA GONDA WAY DANVILLE,CA 94526		501(C)3	90,000				GENERAL OPERATING SUPPORT
ST MARK'S EPISCOPAL CHURCH3816 BELLAIRE BLVD HOUSTON,TX 77025	76-0503732	501(C)3	20,000				GENERAL OPERATING SUPPORT
STANFORD FREE LIBRARY PO BOX 120 STANFORDVILLE,NY 12581	14-1492555	501(C)3	100,000				GENERAL OPERATING SUPPORT
STRATFORD HALL482 GREAT HOUSE ROAD STRATFORD,VA 22558	26-4720864	501(C)3	10,000				GENERAL OPERATING SUPPORT
STRINGS MUSIC FESTIVAL PO BOX 774627 STEAMBOAT SPRINGS,CO 80487	84-1101995	501(C)3	20,000				GENERAL OPERATING SUPPORT
SUNY STONY BROOK230 ADMINISTRATION STONY BROOK,NY 11794	11-6077945	501(C)3	16,500				GENERAL OPERATING SUPPORT
SUSTAINABLE HEALTH ENTERPRISES630 NINTH AVENUE NEW YORK,NY 10036	30-0502122	501(C)3	25,000				GENERAL OPERATING SUPPORT
THE ACTOR'S FUND OF AMERICA729 SEVENTH AVENUE NEWYORK,NY 10019	13-1635251	501(C)3	25,000				GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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THE ASSOCIATION FOR FRONTOTEMPORAL DEMENTIASRANDOR STATION BLDG 2 STE 320 290 KING OF PRUSSIA ROAD RANDOR,PA 19087	41-2073220	501(C)3	30,000				GENERAL OPERATING SUPPORT
THE ATLANTA OPERA1575 NORTHSIDE DRIVE NW ATLANTA,GA 30318	58-1371843	501(C)3	10,000				GENERAL OPERATING SUPPORT
THE BATTERY CONSERVANCY1 NEWYORK PLAZA CONCOURSE NEWYORK,NY 10004	13-3769101	501(C)3	10,000				GENERAL OPERATING SUPPORT
THE BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY326 GALVEZ STREET STANFORD,CA 94305	94-1156365	501(C)3	26,500				GENERAL OPERATING SUPPORT
THE BRENTON ARBORETUM 25141 260TH STREET DALLAS CENTER,IA 50063	31-1578089	501(C)3	30,000				GENERAL OPERATING SUPPORT
THE BRIGHT SCHOOL INC 1950 HIXON PIKE CHATTANOOGA,TN 37405	62-0476284	501(C)3	30,000				GENERAL OPERATING SUPPORT
THE CITADEL FOUNDATION171 MAULTRIE STREET CHARLESTON,SC 294096230	57-6020493	501(C)3	15,000				GENERAL OPERATING SUPPORT
THE COLLEGE OF WILLIAM AND MARY FOUNDATION PO BOX 8795 WILLIAMSBURG,VA 23187	54-0734117	501(C)3	20,000				GENERAL OPERATING SUPPORT
THE FOODBANK OF MONMOUTH AND OCEAN COUNTIES3300 ROUTE 66 NEPTUNE,NJ 07753	22-2622522	501(C)3	10,000				GENERAL OPERATING SUPPORT
THE FRIENDS OF THE JACOBUS VANDERVEER HOUSEPO BOX 723 BEDMINSTER,NJ 07921	22-3576710	501(C)3	7,500				GENERAL OPERATING SUPPORT
THE HARPETH HALL SCHOOL3801 HOBBS RD NASHVILLE,TN 37215	62-0501916	501(C)3	520,750				GENERAL OPERATING SUPPORT
THE HEALING PLACE1020 W MARFAT STREET LOUISVILLE,KY 40202	61-1164775	501(C)3	10,000				GENERAL OPERATING SUPPORT
THE HUMANE SOCIETY OF THE UNITED STATES2100 L STREET NW WASHINGTON,DC 20037	22-1671626	501(C)3	10,000				GENERAL OPERATING SUPPORT
THE JOHNS HOPKINS UNIVERSITY201 N CHARLES STREET BALTIMORE,MD 21201	52-0595110	501(C)3	25,000				GENERAL OPERATING SUPPORT
THE LEUKEMIA & LYMPHOMA SOCIETYP.O BOX 4072 PITTSFIELD,MA 01202	13-5644916	501(C)3	6,000				GENERAL OPERATING SUPPORT
THE METROPOLITAN OPERALINCOLN CENTER NEWYORK,NY 10023	13-1624087	501(C)3	100,000				GENERAL OPERATING SUPPORT
THE OPEN DOOR COMMUNITY910 PONCE DELEON AVENUE NE ATLANTA,GA 30306	58-1453550	501(C)3	15,000				GENERAL OPERATING SUPPORT
THE SALVATION ARMY814 LIGHT STREET BALTIMORE,MD 21230	58-0660607	501(C)3	6,300				GENERAL OPERATING SUPPORT
THE SEED COMPANY3030 MATLOCK RD ARLINGTON,TX 760152934	33-0838929	501(C)3	70,000				GENERAL OPERATING SUPPORT
THE SPEED ART MUSEUM 2035 S THIRD STREET LOUISVILLE,KY 40208	61-0444823	501(C)3	110,000				GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE VALERIE FUND2101 MILLBURN AVENUE MAPLEWOOD,NJ 07040	22-2126867	501(C)3	20,000				GENERAL OPERATING SUPPORT
THE WYCK ASSOCIATION 6026 GERMANTOWN AVENUE PHILADELPHIA,PA 19144	23-2121975	501(C)3	5,500				GENERAL OPERATING SUPPORT
THE YANCEY JERNIGAN FOUNDATIONPO BOX 37 BREWTON,AL 36427	45-2831551	501(C)3	10,000				GENERAL OPERATING SUPPORT
TRINITY PAWLING SCHOOL 700 ROUTE 22 PAWLING,NY 12564	14-1601551	501(C)3	15,000				GENERAL OPERATING SUPPORT
TURNING FOR HOMEPO BOX 300 BENSALEM,PA 19020	26-2698385	501(C)3	60,000				GENERAL OPERATING SUPPORT
UC RIVERSIDE FOUNDATION900 UNIVERSITY AVENUE RIVERSIDE,CA 92521	23-7433570	501(C)3	26,000				GENERAL OPERATING SUPPORT
UNC CHAPEL HILLPO BOX 309 CHAPEL HILL,NC 27514	56-6001393	501(C)3	20,000				GENERAL OPERATING SUPPORT
UNITED WAY OF NORTHEAST FLORIDAPO BOX 864228 ORLANDO,FL 32886	59-0637825	501(C)3	110,000				GENERAL OPERATING SUPPORT
UNIVERSITY OF CONNECITCUT FOUNDATION2390 ALUMNI DRIVE STORRS,CT 06269	06-6070722	501(C)3	25,000				GENERAL OPERATING SUPPORT
VANCOUVER HUMANE SOCIETY & SPCA1110 NE 192ND AVENUE VANCOUVER,WA 98684	91-0759124	501(C)3	25,000				GENERAL OPERATING SUPPORT
VITERBO UNIVERSITY900 VITERBO DRIVE LA CROSSE,WI 54601	39-0978445	501(C)3	100,000				GENERAL OPERATING SUPPORT
VOICE OF SAN DIEGO2223 AVENIDA DE LA PLAYA LA JOLLA,CA 92037	20-1585919	501(C)3	15,000				GENERAL OPERATING SUPPORT
WILDLIFE CONSERVATION SOCIETY2300 SOUTHERN BOULEVARD BRONX,NY 10460	13-1740011	501(C)3	10,000				GENERAL OPERATING SUPPORT
YALE UNIVERSITYBOX 803 NEW HAVEN,CT 06503	06-0646973	501(C)3	10,000				GENERAL OPERATING SUPPORT

SCHEDULE M  
(Form 990)

Noncash Contributions

OMB No 1545-0047

2012

Open to Public Inspection

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

Name of the organization  
THE BESSEMER NATIONAL GIFT FUND  
C/O BESSEMER TRUST COMPANY

Employer identification number  
13-7111099

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	57	8,435,788	FAIR MARKET VALUE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( )				
26 Other ►( )				
27 Other ►( )				
28 Other ► ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .

29

0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		No
b If "Yes," describe in Part II		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

Supplemental Information.

Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE NUMBER OF CONTRIBUTIONS IS REPORTED IN PART I, COLUMN (B)



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

**Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.**

**► Attach to Form 990 or 990-EZ.**

**2012**

**Open to Public  
Inspection**

Name of the organization  
THE BESSEMER NATIONAL GIFT FUND  
C/O BESSEMER TRUST COMPANY

**Employer identification number**

13-7111099

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE BESSEMER NATIONAL GIFT FUND HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE. WHEN THE FORM 990 HAS BEEN PREPARED, IT IS ELECTRONICALLY SENT TO THE CORPORATE TRUSTEE OF THE ORGANIZATION FOR ANY COMMENTS. THE DRAFT 990 IS REVIEWED BY A MEMBER OF THE TAX DEPARTMENT OF THE CORPORATE TRUSTEE, WHO CREATES A SPREADSHEET, BALANCES EACH ACCOUNT AND COMPARES HIS SPREADSHEET TO THE 990, FOCUSING SPECIFICALLY ON CONTRIBUTIONS RECEIVED, CHARITABLE DONATIONS AND THE SUPPORT TEST. OTHER EMPLOYEES OF THE CORPORATE TRUSTEE REVIEW THE RESPONSES TO THE NON-FINANCIAL QUESTIONS ON THE DRAFT 990 AND RECOMMEND CHANGES AS NEEDED. A COPY OF THE FINAL DRAFT OF THE FORM 990 IS ALSO THEN ELECTRONICALLY SENT TO THE BOARD OF TRUSTEES FOR REVIEW. ONCE THE RETURN HAS BEEN APPROVED BY THE CORPORATE TRUSTEE, THE RETURN IS FILED WITH THE APPROPRIATE FILING AUTHORITIES.
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS APPLICABLE TO THE BOARD TRUSTEES. DISCLOSURE STATEMENTS ARE REQUIRED ANNUALLY, AND WERE LAST COMPLETED IN FEBRUARY 2012. TRUSTEES ARE EXPECTED TO VOLUNTARILY DISCLOSE CONFLICTS IF THEY SHOULD ARISE DURING THE YEAR. IF A CONFLICT WERE TO ARISE, THE TRUSTEE WOULD NOT PARTICIPATE IN ANY DECISION WITH RESPECT TO THAT CONFLICT.
		THE ORGANIZATION DOES NOT HAVE POLICIES REGARDING COMPENSATION AS IT HAS NO EMPLOYEES, IF IT DID IT WOULD FOLLOW THE PROCEDURES AS SET BY THE IRS FOR ESTABLISHING REASONABLE COMPENSATION.
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS FORM 990 AND FORM 1023 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. THE RETURN IS POSTED ON GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WEBSITES. IN ADDITION, THE FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, FORM 990, FORM 1023, AND GOVERNING DOCUMENTS ARE ALSO AVAILABLE UPON WRITTEN REQUEST OR BY CALLING THE ORGANIZATION DIRECTLY.
	FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS DID NOT CHANGE FROM THE PRIOR YEAR.

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
THE BESSEMER NATIONAL GIFT FUND  
C/O BESSEMER TRUST COMPANY

Employer identification number  
  
13-7111099

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproporionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) BESSEMER TRUST COMPANY  101 WOODBRIDGE CENTER DRIVE WOODBRIDGE, NJ 07095 22-0770670	STATE CHARTERED COMMERCIAL BANK AND TRUST COMPANY	NJ	N/A	S					No

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

No

1c

Yes

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

Yes

1n

No

1o

No

1p

No

1q

No

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2012

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

**Part VII**   **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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**Software ID:**

**Software Version:**

**EIN:** 13-7111099

**Name:** THE BESSEMER NATIONAL GIFT FUND  
C/O BESSEMER TRUST COMPANY

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