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Form **990-PF**

EXTENSION(S) ATTACHED

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Note The foundation may be able to use a copy of this return to satisfy state reporting requirements Open to Public Inspection

_		per and street (or PO box number if mail is not delivered	d to street address)	Room/	suite	B Telephone numb	er (see instructions) . 6) 749 – 9300
		or town, state, and ZIP code ONTO ON CANADA				C If exemption applicate pending check here	ation is
_		eck all that apply: Initial return	Amended ret Name change	e	harity	D 1 Foreign organiza 2 Foreign organiza 85% test, check to computation	itions meeting the nere and attach
1	s	Section 4947(a)(1) nonexempt charitable trust	Other taxable pri			1)(1)(A), check here . 🕨
•	of y	ear (from Part II, col. (c), line	other (specify) column (d) must be on				in a 60-month termination (1)(B), check here
F		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)		(b) Net investment income		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule) . If the foundation is not required to	2,000,000.				,
	2	Check ► □ attach Sch B	33,482.	33,482	-		ATCH 1
	3 4	Interest on savings and temporary cash investments Dividends and interest from securities	298,190.	407,859			ATCH 1
	1	Gross rents					
	1	Net rental income or (loss)					
ne	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 2 197 176	66,084.				
venu	"	assets on line 6a		220 002		.	
Rev	7	, , , , ,		239,902	+		
	8	Net short-term capital gain			+		
		Gross sales less returns and allowances			 -		
	b	Less Cost of goods sold .					
		Gross profit or (loss) (attach schedule)		06.506			
	1	Other income (attach schedule) ATCH 3	2,397,756.	-96,596 584,647			
-	12	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc	2,391,736.	304,047	┿		
	مدا	Other employee salanes and wages		· · · · · · · · · · · · · · · · · · ·	-		
nses	15	Pension plans, employee benefits		· <u>-</u> -			
Φ	16-	Legal fees (attach schedule)		- -			
ŭ	ь	Accounting fees (attach schedule)					
ţ	C	Other professional fees (attach schedule). *.	13,315.	6,657	-		6,6
stra	17	Interest	1,445.		-		
į	18	Taxes (attach schedule) (see instructions) ATCH . 5. Depreciation (attach schedule) and depletion.	1,1131				
₽	17 18 19	Occupancy					
٦	21	Travel, conferences, and meetings					
_	,	Printing and publications					
atin	23 24	Other expenses (attach schedule) ATCH .6 .		77,261	•		
per	24	Total operating and administrative expenses.	14,760.	83,918			6,6
ō	25	Add lines 13 through 23	350,000.		+		350,0
	26	Total expenses and disbursements Add lines 24 and 25	364,760.	83,918			356,6
	27	Subtract line 26 from line 12				-	
	1	Excess of revenue over expenses and disbursements $\ \ .$	2,032,996.				
		Net investment income (if negative, enter -0-)		500,729	4		
, -	or Pa	Adjusted net income (if negative enter -0-) perwork Reduction Act Notice, see instructions	<u> </u>	*ATCH 4			Form 990-PF (20
1410	1 000	5369BG B44T 11/13/2013 2:00		AAICH 4		6-	PA PA

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Part I	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year	
r ar c i	- Dalalice Sileets	amounts only (See instructions)	mounts only (See instructions) (a) Book Value (b)		(c) Fair Market Value	
1	Cash - non-interest-bear	nng , , , ,				
2		cash investments	11,159,346.	4,986,597.	4,986,597	
3	Accounts receivable ▶					
	Less allowance for dou	ubtful accounts ▶				
4						
	Less, allowance for dou	ibtful accounts ▶				
5					· · · · · · · · · · · · · · · · · · ·	
6		officers, directors, trustees, and other				
"		ttach schedule) (see instructions)				
7		receivable (attach schedule)				
'		ibtful accounts				
10				-		
Assets		se		-		
9		deferred charges		-		
iv a	Investments - U.S. and stat	te government obligations (attach schedule).	1 700 225	7 002 001	7 002 001	
		e stock (attach schedule) ATCH 7	1,788,335.	7,923,201.	7,923,201.	
11 C	Investments - corporate Investments - land building	e bonds (attach schedule)				
1,,						
	Less accumulated deprecia (attach schedule)	ation				
12	Investments - mortgage	loans	,	-,		
13	Investments - other (atta	ach schedule) ATCH 8	4,954,892.	7,041,112.	7,041,112.	
14	Land, buildings, and equipment basis	>				
	Less accumulated deprecia (attach schedule)	ation >				
15	Other assets (describe					
16	Total assets (to be	completed by all filers - see the				
	instructions Also, see p	page 1, item I)	17,902,573.	19,950,910.	19,950,910.	
17		accrued expenses				
18						
<u>≅</u> 20		ors, trustees, and other disqualified persons				
Liabilities 02 12 13		otes payable (attach schedule)				
3 22		e •				
**	Other habilities (describe	/				
23	Total liabilities (add line	es 17 through 22)	d	٨		
+25						
		low SFAS 117, check here ▶ ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐				
S	<u>-</u>	=		-		
24 25		· · · · · · · · · · · · · · · · · · ·				
교 교 연 25		<i></i>				
26	Permanently restricted .	. <i></i>				
Net Assets or Fund B 25 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3		not follow SFAS 117,				
5	check here and com	plete lines 27 through 31. ▶ X				
g 27	Capital stock, trust prin	cipal, or current funds	17,902,573.	19,950,910.		
9 28	Paid-in or capital surplus, or	r land bldg , and equipment fund				
& 29	Retained earnings, accumi	ulated income, endowment, or other funds				
<u>등</u> 30	Total net assets or fund	d balances (see instructions)	17,902,573.	19,950,910.		
2 31	Total liabilities and	net assets/fund balances (see		-		
	instructions)	<u> </u>	17,902,573.	19,950,910.		
Part I	Analysis of Cha	anges in Net Assets or Fund E				
		palances at beginning of year - Part		must agree with		
		d on prior year's return)			17,902,573.	
2 Ente	er amount from Part I	line 27a		2	2,032,996.	
3 Othe	er increases not includ	line 27a ded in line 2 (itemize) ► ATCH 9	• • • • • • • • • • • • • • • • • • • •	3	15, 341.	
7 744	l.maa 1 7 mm d 2				19,950,910.	
				4	10,900,910.	
. UEU				_		
	reases not included in		no 5) - Port II column (5)	5 5 6	19,950,910.	

_			
μ	20	9	_'

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Part IV Capital Gains	s and Losses for Tax on Inv	estment Income	(b) How		
• •	nd describe the kind(s) of property sold (· · · · · · · · · · · · · · · · · · ·	acquired P - Purchase	(c) Date acquired	(d) Date sold (mo , day, yr)
·	brick warehouse, or common stock, 200	shs MLC Co)	D - Donation	(mo., day, yr.)	(110 , day, yi)
1a SEE PART IV SCHE	DOPE				_
<u>b</u>		 -	 		-
<u>c</u> d			-	~	
e					
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	nee)
(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) min	
a					
b					
c			-		
d					
e					
Complete only for assets	s showing gain in column (h) and owne	d by the foundation on 12/31/69	(1)	Gains (Col (h) g	iain minus
(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (ı)		(k), but not less	than -0-) or
(I) F IVI V 25 01 12/31/09	as of 12/31/69	over col (j), if any		Losses (from co	ol (h))
a					
<u>b</u>					
<u>c</u>	ļ				
_d					
<u>e</u>			.		
2 Capital gain net income o		gain, also enter in Part I, line 7			66.004
	· · · · · · · · · · · · · · · · · · ·	(loss), enter -0- in Part I, line 7	2		66,084.
	n or (loss) as defined in sections 12		1		
_	irt I, line 8, column (c) (see insti				0
	Linday Cootion 4040(a) for Da		3		0
	Under Section 4940(e) for Rec				
(For optional use by dolliest	ic private foundations subject to the	e section 4340(a) tax on het invest	ment theor	ille.)	
If section 4940(d)(2) applies	leave this part blank				
ii section 4540(d)(2) applies	, leave this part blank				
Was the foundation liable for	the section 4942 tax on the distrib	outable amount of any year in the b	ase period	1 7	Yes X No
	not qualify under section 4940(e).		•		
1 Enter the appropriate am	ount in each column for each year	, see the instructions before making	any entri	es	
(a) Base period years	(b)	(c)		(d) Distribution r	atio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col (b) divided by	
2011	2,109,547.	21,748,233.			0.096999
2010	201,986.	16,624,386.			0.012150
2009	1,209,408.	16,806,902.			0.071959
2008	208,775.	16,820,257.			0.012412
2007	3,989,951.	17,258,301.			0.231190
			_		
2 Total of line 1, column (d) <u>.</u>		2		0.424710
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
number of years the four	ndation has been in existence if less	s than 5 years	3		0.084942
4 Enter the net value of no	ncharitable-use assets for 2012 fro	m Part X, line 5	4	18,	638,408.
5 Multiply line 4 by line 3			5	1,	583,184.
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		5,007.
			_		E00 -0-
7 Add lines 5 and 6			7	1,	588,191.
					254 455
8 Enter qualifying distributi	ons from Part XII, line 4	Dad VII line 4h	8		356,658.
If line 8 is equal to or gi	reater than line 7, check the box	in Part VI, line 1b, and complete t	inat part	using a 1% ta	x rate See the
JSA Part VI Instructions					n 990-PF (2012)
2F1430 1 000				FUII	(2012)

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions	s)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter *N/A* on line 1)			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
, р	Domestic foundations that meet the section 4940(e) requirements in Part V, check		10,	015.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		10,0	015.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-		10,0	015.
6	Credits/Payments			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 3,000.			
ь	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c 10,500.			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		13,5	500.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		3,4	185.
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ 3, 485. Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			l
	definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1		
	(1) On the foundation \$ \$ (2) On foundation managers \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
_	foundation managers ▶\$	_		x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		 ^
	If "Yes," attach a detailed description of the activities	1]
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	١,		x
4		3		X
4 d	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		
5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		х
•	If "Yes," attach the statement required by General Instruction T.	 		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
	with the state law remain in the governing instrument?	6		х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	
8a				
	NJ,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	1		
	of each state as required by General Instruction G? If "No," attach explanation	8b_	Х	
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	_9_		х
10	Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing their names and			
	addresses ATCH 10	10	Х	

Form	990-PF (2012) THE APOTEX FOUNDATION, INC. 22-357	4994		Page 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	Ĺ.	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		Х
	Website address ► N/A			
14	The books are in care of ▶ APOTEX HOLDINGS, INC. Telephone no. ▶ 416-74	930	0	
	Located at ►ATTACHMENT 11 ZIP+4 ► M9L 1T	9		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	. []
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	Х	<u> </u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country CA			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	,		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			v
	were not corrected before the first day of the tax year beginning in 2012?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? Yes X No	1		
	6e. Part XIII) for tax year(s) beginning before 2012?			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		х
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
Ĭ	•			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2012)	3Ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		X

(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000		·		

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO	NE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NOME	
NONE	
otal number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
	.]
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	<u>l</u>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	-
2	
4	
All other program-related investments See instructions	
3 NONE	
	ľ

ì	Pan	0	S

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	gn founda	rage o
<u> </u>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.	T	
	purposes		
а	Average monthly fair market value of securities	1a	10,849,270.
b		1b	8,072,972.
С	Fair market value of all other assets (see instructions)	1c	
d		1d	18,922,242.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Cubirost line 2 from line 1d	3	18,922,242.
4	Cash deemed held for chantable activities Enter 1 1/2 % of line 3 (for greater amount, see		
		4	283,834.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	18,638,408.
6	Minimum investment return. Enter 5% of line 5	6	931,920.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	<u> </u>	
	foundations and certain foreign organizations check here > and do not complete this	part)	
1	Minimum investment return from Part X, line 6	1	931,920.
2a			
b		1	
С	Add lines 2a and 2b	2c	10,015.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	921,905.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	921,905.
6		6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	921,905.
P:	art XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	356,658.
b	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	356,658.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	356,658.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years	culating wi	nether the foundation

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Pa	rt XIII Undistributed Income (see instru	uctions)			
1	Distributable amount for 2012 from Part XI,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
	line 7				921,905.
2	Undistributed income, if any, as of the end of 2012				
	Enter amount for 2011 only				
	Total for prior years 20 10 ,20 09 ,20 08	_			
3	Excess distributions carryover, if any, to 2012				-
	From 2007				
	From 2008			-	
	From 2009				
	From 2010				
	From 2011 1,027,425.				
		4,560,160.			
	Total of lines 3a through e	1,000,100.			-
	Qualifying distributions for 2012 from Part XII, line 4 > \$ 356,658.				
а	Applied to 2011, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)		- 		
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2012 distributable amount				356,658.
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2012	565,247.			565,247.
	(If an amount appears in column (d), the same				
6	emount must be shown in column (a)) Enter the net total of each column as				
	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,994,913.			<u> </u>
b	Prior years' undistributed income Subtract line 4b from line 2b				
c	Enter the amount of prior years' undistributed		**		
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed	· · · ·			
d	Subtract line 6c from line 6b Taxable amount - see instructions				
e	Undistributed income for 2011 Subtract line				
	4a from line 2a Taxable amount - see				
	instructions ,				
f	Undistributed income for 2012 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2013				
7	Amounts treated as distributions out of corpus				
′	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2007 not				
•	applied on line 5 or line 7 (see instructions)	2,587,629.			
9	Excess distributions carryover to 2013.				
,	Subtract lines 7 and 8 from line 6a	1,407,284.			
10	Analysis of line 9			-	
	Excess from 2008				
	Excess from 2009 379, 859.				
	Excess from 2010				
	Excess from 2011 1,027,425.				
	Excess from 2012				

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

NOT APPLICABLE

1 a	If the foundation has	•			ing		
	foundation, and the rulin				P [1040(1)(5)	
٠ь	Check box to indicate wh	Tax year	private operating found	Prior 3 years	4942()(3) or 4942(j)(5)	
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total	
	I or the minimum investment return from Part X for each		(-,	1,7,2	(-/2000	-	
	year listed						
b	85% of line 2a						
C	Qualifying distributions from Part						
đ	XII, line 4 for each year listed . Amounts included in line 2c not used directly for active conduct						
e	of exempt activities Qualifying distributions made directly for active conduct of exempt activities Subtract line		-				
3	2d from line 2c Complete 3a, b, or c for the					ļ	
	alternative test relied upon						
а	"Assets" alternative test - enter (1) Value of all assets						
	(2) Value of assets qualifying under section						
b	4942(j)(3)(B)(i) "Endowment" alternative test-						
	enter 2/3 of minimum invest- ment return shown in Part X.						
	line 6 for each year listed						
С	"Support" alternative test - enter						
	(1) Total support other than gross investment income						
	(interest dividends, rents, payments on securities						
	loans (section 512(a)(5)) or royalties)						
	(2) Support from general		<u> </u>				
	public and 5 or more exempt organizations as						
	provided in section 4942 (j)(3)(B)(iii)				· · · · · · · · · · · · · · · · · · ·		
	(3) Largest amount of sup- port from an exempt						
	organization						
Pa	1 /	ary Information (Co	omplete this part	only if the foundat	ion had \$5,000	or more in assets	
		during the year - see					
1	Information Regarding						
а	before the close of any	the foundation who had tax year (but only if the	ey have contributed more	e than 2% of the total on the total of the t	contributions receives section 507(d)(2)	ed by the foundation	
-	N/A						
D	List any managers of ownership of a partner			the stock of a corpor has a 10% or greater in		large portion of the	
	N/A						
2	Information Regarding						
	Check here ► X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.						
а	The name, address, a			n to whom applications s	hould be addressed		
b	b The form in which applications should be submitted and information and materials they should include:						
С	Any submission deadli	nes.					
	Any postmeticas as 1	mitations			- 6.11-		
a	Any restrictions or lift factors:	milations on awards,	such as by geogra	ipnicai areas, charitabl	e tields, kinds of i	nstitutions, or other	

Page 11

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	
·Recipient	If recipient is an individual show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year				
		ļ		İ
ATCH 12				
	1			
	İ			
		Ï		
				1
	•			
Total			▶ 3a	350,000.
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·		Ja	330,000.
b Approved for fature payment				
			•	
	•			
Total				
				<u> </u>

ter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
Program	n service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•	- Service reteriors					(OCC III STRUCTORIS)
						· · · · · · · · · · · · · · · · · · ·
f						
g Fees	and contracts from government agencies					
Member	ship dues and assessments					
Interest o	on savings and temporary cash investments			14	33,482.	
Dividend	ds and interest from securities			15	298,190.	· · · · · · · · · · · · · · · · · · ·
Net rent	tal income or (loss) from real estate					<u></u>
	-financed property					····
b Not o	debt-financed property					
	al income or (loss) from personal property .					
Other in	vestment income			16		
	loss) from sales of assets other than inventory			18	66,084.	
Net inco	ome or (loss) from special events					и
	rofit or (loss) from sales of inventory					
Other re	venue a					
b						
				<u> </u>		
c				_		
c d e						·
c d e Subtotal Total. A					397,756.	397,756
c d e Subtotal Total. A	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calcu	ulations) to the Ac	complishment of Ex	xempt Purp	oses 13	397,756
c d e Subtotal Total. Acee worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribution	ited importantly to
c d e Subtotal Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce Relationship of Activities Explain below how each activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribution	ited importantly to
c d e Subtotal Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce Relationship of Activities Explain below how each activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribu	ited importantly to
c d e Subtotal Total. Ace workshirt XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce Relationship of Activities Explain below how each activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribu	ited importantly to
c d e Subtotal Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce Relationship of Activities Explain below how each activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribu	ited importantly to
c d e Subtotal Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce Relationship of Activities Explain below how each activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribu	ited importantly to
c d e Subtotal Total. Acee worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce Relationship of Activities Explain below how each activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribu	ited importantly to
c d e Subtotal Total. Acee worksh art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce Relationship of Activities Explain below how each activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribu	ited importantly to
c d e Subtotal Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce Relationship of Activities Explain below how each activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribu	ited importantly to
c d e Subtotal Total. Acee worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce Relationship of Activities Explain below how each activities	ulations) to the Ac y for which	complishment of Ex	xempt Purp ın column (e	oses of Part XVI-A contribu	ited importantly to

Part	XVII	Information R Exempt Orga		nsfers To and Tra	nsacti	ons and	Relationships W	ith Nonc	hari	itable	9
· II	n sect	_		engage in any of the fection 501(c)(3) orga	_		•			Yes	No
				a noncharitable exemp	_						١
(1) Cas	sh		• • • • • • • • • • • • • • • • • • • •		• • • • •			1a(1)		X
		transactions			• • • •	• • • • •		• • • • •	1a(2)		
			oncharitable exem	pt organization			. 		1b(1)		x
(2) Pur	rchases of assets fr	om a noncharitat	ole exempt organization	١		. .	[1b(2)	1	Х
(3) Re	ntal of facilities, equ	iipment, or other a	assets			· • • • • • • • • • • • • • • • • • • •		1b(3)		X_
(4) Rei	ımbursement arrang	ements				· • • • • • • • • • • • • • • • • • • •		1b(4)		X
(5) Loa 6) Do	ans or loan guarante	es				• • • • • • • • • • • • • • • • • • • •		1b(5)		X
				p or fundraising solicita s, other assets, or paid					1b(6) 1c		X
d II	the a	answer to any of the first the goods, other	ne above is "Yes assets, or servic	es given by the report es given by the report ement, show in column	wing scl rting fou	hedule Co Indation, l	olumn (b) should alway f the foundation rece	ays show	the t	faır m	arke arke
(a) Line	no	(b) Amount involved	(c) Name of no	ncharitable exempt organiza	tion	(d) Descr	ption of transfers, transactio	ns, and shari	ng arra	ngeme	nts
		N/A	ļ			N/A					
		·									
											
				· · · · · · · · · · · · · · · · · · ·							
											
	-										
	-										
	-				\longrightarrow						
					-						
d	escrib	ed in section 501(c) " complete the follo) of the Code (oth wing schedule	nated with, or related ner than section 501(c))(3)) or II		527?	C		es X] No
		(a) Name of organizatio	11	(b) Type of organi	zation		(c) Description	of relationsh	.ip		
		· ·					····				
Sian	Under correc	penalties of perjury I decided to and complete Declaration of	are that I have examine of preparer (other than tax	ed this return, including accomp payer) is based on all information	panying sch	edules and st reparer has any	atements and to the best of a knowledge	my knowledge	and b	elief it	is true,
Sign				1	ì		· ·	May the IRS	discuss	s this	return
Here	Sign	nature of officer or trustee		l Date	!	Title		vith the prej	77	7 ~	belo v
	0.91			Date			(s	see instructions)	<u> </u>	Yes	No
Paid		Print/Type preparer's	name	Preparer's signature			Date Check	k If P	TIN		
	ror	Stuart M. I	riedman	1	<u>_</u>	خـــــــــــــــــــــــــــــــــــــ		employed P	0004	4159	1
Prepa			ROWE HORWATH				Firm's EIN	▶ 35-09	2168	30	
Use C	лпу			VENUE - FLOOR 3					_		_
		I NE	W YORK, NY			1002	22 Phone no	212-57	2-55	000	

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Schedule of Contributors

OMB No 1545-0047

2012

Name of the organization		Employer identification number
THE APOTEX FOUNDATION,	INC.	
C/O APOTEX HOLDINGS, I	NC.	22-3574994
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
	ered by the General Rule or a Special Rule. B), or (10) organization can check boxes for both the General Rule and a S	pecial Rule. See
General Rule		
	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 c contributor. Complete Parts I and II	ır more (ın money or
Special Rules		
under sections 509(a)(organization filing Form 990 or 990-EZ that met the 33 1/3 % support to 1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 10 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	year, a contribution of
during the year, total co	, (8), or (10) organization filing Form 990 or 990-EZ that received from a contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitatis, or the prevention of cruelty to children or animals. Complete Parts I, II,	ole, scientific, literary,
during the year, contrib not total to more than \$ year for an <i>exclusively</i> r applies to this organiza	, (8), or (10) organization filing Form 990 or 990-EZ that received from a utions for use exclusively for religious, charitable, etc., purposes, but the 61,000. If this box is checked, enter here the total contributions that were eligious, charitable, etc., purpose. Do not complete any of the parts unles tion because it received nonexclusively religious, charitable, etc., contrib	se contributions did e received during the es the General Rule outions of \$5,000 or
990-EZ, or 990-PF), but it must a	ot covered by the General Rule and/or the Special Rules does not file Sonswer "No" on Part IV, line 2 of its Form 990, or check the box on line Hot certify that it does not meet the filing requirements of Schedule B (Form	of its Form 990-EZ or on

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of organization THE APOTEX FOUNDATION, INC. C/O APOTEX HOLDINGS, INC.

Employer identification number 22-3574994

Part I	Contributors (see instructions) Use duplicate copies of Pa	irt I if additional space is nee	ded
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
1_	APOTEX CORPORATION 150 SIGNET DRIVE M9L 1T9 TORONTO, ONTARIO CANADA	\$2,000,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization THE APOTEX FOUNDATION, INC. C/O APOTEX HOLDINGS, INC.

Employer identification number

22-3574994

Partil	Noncash Property (see instructions). Ose duplicate copies of Pa	in il additional space is nee	eaea
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Page 4 Name of organization THE APOTEX FOUNDATION, INC. Employer Identification number C/O APOTEX HOLDINGS, INC. 22-3574994 Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions.) ▶\$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No from (b) Purpose of grft (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

THE APOTEX FOUNDATION, INC

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 12

RECIPIENT NAME AND ADDRESS

PUBLIC CHARITY

GENERAL SUPPORT

300,000.

AMOUNT

50,000.

FRIENDS OF YASHAR LACHAYAL 49 MEADOW LANE

LAWRENCE, NY 11559

LOS ANGELES, CA 90035-4709

1399 SOUTH ROXBURY DRIVE

SWC MUSEUM CORP

PUBLIC CHARITY NONE

GENERAL SUPPORT

350,000.

TOTAL CONTRIBUTIONS PAID

PAGE 33 ATTACHMENT 12

5369BG B44T 11/13/2013

8

2.00:04 PM

SCHEDULE D (Form 1041)

Capital Gains and Losses

Attach to Form 1041, Form 5227, or Form 990-T.

Information about Schedule D (Form 1041) and its separate instructions is at OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

www.irs.gov/form1041. THE APOTEX FOUNDATION, INC.

Employer identification number

C/O APOTEX HOLDINGS, INC

22-3574994

	: Form 5227 filers need to complete only	Parts Land II			22-33/499	· · · · · · · · · · · · · · · · · · ·
Par			Held One Ve	ar or less		
ı al	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other ba	
1a	· · · · · · · · · · · · · · · · · · ·			A-D-10	· ·	Subtract (e) worn (u)
						-
	···					
b	Enter the short-term gain or (loss), if any	, from Schedule D	-1, line 1b			1b 66,084.
2	Short-term capital gain or (loss) from Fo					2
3 4	Net short-term gain or (loss) from partner Short-term capital loss carryover. Enter	erships, S corporat	tions, and other	estates or trusts	Contol Lass	3
-						4 (
5	Carryover Worksheet Net short-term gain or (loss). Combin- column (3) on the back Long-Term Capital Gains and L	e lines 1a throug	h 4 in columi	n (f) Enter here an	d on line 13,	5 66,084.
Par		1	T I	nan One Year		(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other ba (see instructions)	ISIS the entire year
6a				· · · · · ·		
b	Enter the long-term gain or (loss), if any,	from Schedule D-	1, line 6b			6b
7	Long-term capital gain or (loss) from For	rms 2439, 4684, 6	3252, 6781, and	d 8824		7
8	Net long-term gain or (loss) from partner	rships, S corporati	ons, and other e	estates or trusts		8
9	Capital gain distributions		<i></i>			9
10	Gain from Form 4797, Part I					10
11	Long-term capital loss carryover. Enter	r the amount, if	any, from line	9 14 of the 2011	Capital Loss	
12	Net long-term gain or (loss). Combine	lines 6a through		(f) Enter here and		11 (
	column (3) on the back	<u> </u>		• •	<u></u> 1	12
For P	aperwork Reduction Act Notice, see the Inst	ructions for Form 10	041.		Sche	dule D (Form 1041) 2012

Sched	ule D (Form 1041) 2012						Page 2
Par			1 ' ' .	neficiaries'	(2) Es		(3) Total
	Caution: Read the instructions before completing this	part.	(see	e instr)	or tru	ıst's	(3) Total
	Net short-term gain or (loss)	. 13					66,084.
	Net long-term gain or (loss):						
а	Total for year	14a					
	Unrecaptured section 1250 gain (see line 18 of the wrksht),						
С	28% rate gam						
	Total net gain or (loss). Combine lines 13 and 14a	15					66,084.
note gains, neces	If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 go to Part V, and do no t complete Part IV If line 15, column (3), is a sary	net loss	rm 990-T, , complete	Part I, line 4. Part IV and	a) If lines I the Capit	14a ai al Los	nd 15, column (2), are ne s Carryover Worksheet, a
Par	IV Capital Loss Limitation						
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, The loss on line 15, column (3) or b \$3,000 If the loss on line 15, column (3), is more than \$3,000, or if Form 1041,					16	(
Note	If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, arryover Worksheet in the instructions to figure your capital loss carryover	page 1	I, line 22	(or Form 990	-T, line 34,). IS a	loss, complete the Capita
Par		<u> </u>					
	1041 filers. Complete this part only if both lines 14a and 15 in co		2) 050 00				d in Doct Law Doct Ham
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo			ins, or an ar	nount is e	entere	d in Part I of Part II and
	on: Skip this part and complete the Schedule D Tax Worksheet in the						
	her line 14b, col (2) or line 14c, col (2) is more than zero, or						
• Bo	th Form 1041, line 2b(1), and Form 4952, line 4g are more than zero						
-orm	990-T trusts. Complete this part only if both lines 14a and 15	are gai	ns, or qu	alified divid	ends are	includ	ded in income in Part
of Fo	rm 990-T, and Form 990-T, line 34, is more than zero. Skip this par er line 14b, col. (2) or line 14c, col. (2) is more than zero	t and c	omplete t	he Schedu l	e D Tax V	Vorks	sheet in the instructions
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line	34)	17				
8	Enter the smaller of line 14a or 15 in column (2)						
	but not less than zero						
	Enter the estate's or trust's qualified dividends						
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T) 19						
20	Add lines 18 and 19						
	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g, otherwise, enter -0 ▶ 21						
22	Subtract line 21 from line 20 If zero or less, enter -0		. 22				
23	Subtract line 22 from line 17 If zero or less, enter -0-		23				
				-			
24	Enter the smaller of the amount on line 17 or \$2,400		24				
	Is the amount on line 23 equal to or more than the amount on line 2						
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" bo	x.					
	No. Enter the amount from line 23		25				
26	Subtract line 25 from line 24		26				
	Are the amounts on lines 22 and 26 the same?						
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or l.	ine 22	27				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
	,		·				
29	Subtract line 28 from line 27		29				
0	Multiply line 29 by 15% (15)					30	
31	Figure the tax on the amount on line 23. Use the 2012 Tax Rai	te Sche	edule for	Estates and	d Trusts		
	(see the Schedule Ginstructions in the instructions for Form 1041)					31	
	··						
32	Add lines 30 and 31				[32	
13	Figure the tax on the amount on line 17. Use the 2012 Tax Rai	te Sch	edule for	Estates and	d Trusts		
	(see the Schedule Ginstructions in the instructions for Form 1041).					33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33	here a	nd on Fo	rm 1041, S	chedule		
	G, line 1a (or Form 990-T, line 36)	<u></u>	<u></u>	<u> </u>	<u> </u>	34	

Schedule D (Form 1041) 2012

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

Attach to Schedule D to list additional transactions for lines 1a and 6a. Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041,

Employer identification number

22-3574994

THE APOTEX FOUNDATION, INC. Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example 100 sh 7% preferred of *Z* Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1a GOLDMAN SACHS PREF	10/19/2011	01/18/2012	250,072.	250,000.	72.
U.S. BANKCORP PREF	01/18/2012	01/24/2012	251,689.	250,000.	1,689.
KKR FINANCIAL	11/07/2011	03/01/2012	315,290.	300,000.	15,290.
AREGON N.V.	01/24/2012	04/04/2012	130,145.	125,000.	5,145.
AREGON N.V.	01/24/2012	04/05/2012	130,191.	125,000.	5,191.
RAYMOND INC. FINANCIAL	02/29/2012	04/04/2012	84,784.	83,300.	1,484.
RAYMOND INC. FINANCIAL	02/29/2012	04/05/2012	27,308.	26,875.	433.
RAYMOND INC. FINANCIAL	02/29/2012	04/09/2012	78,270.	77,325.	945.
FACEBOOK INC	05/17/2012	05/18/2012	192,102.	178,600.	13,502.
RAYMOND JAMES	02/29/2012	05/10/2012	115,320.	112,500.	2,820.
AMERICAN CAP AGENCY	03/29/2012	05/01/2012	126,951.	125,000.	1,951.
CENTURY LINK	08/05/2011	06/04/2012	112,302.	102,492.	9,810.
PENNSYLVANIA REIT	04/13/2012	06/04/2012	126,264.	125,000.	1,264.
CHARLES SCHWAB CORP.	05/30/2012	08/16/2012	256,488.	250,000.	6,488.
			-		
		-			-
	į				
	-				
					

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2012

22-3574994

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

	NET	INVESTMENT	INCOME	33,482.	33,482.
REVENUE			PER BOOKS	33,482.	33,482.
					TOTAL
			DESCRIPTION	INTEREST EARNED	

PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PE,

NET INVESTMENT	TWCOME	407,859.	407,859.
REVENUE AND EXPENSES	FEN BOOKS	. 7 4 6 , 1 4 0 .	298,190.
MOTHETEDAGE	DESCRIPTION.	DIVIDEND INCOME FROM PASSIVE INVESTMENTS	TOTAL

ATTACHMENT 2 PAGE 23

- OTHER INCOME

PART I

FORM 990PF,

DESCRIPTION OTHER INCOME FROM PASSIVE INVESTMENTS

REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME -96,596. -96,596.

TOTALS

FORM 990PE, PART I - OTHER PROFESSIONAL FEES

MENT CHARITABLE ME PURPOSES	INVESTMENT INCOME	AND EXPENSES PER BOOKS		DESCRIPTION PEFS
------------------------------	-------------------	------------------------------	--	------------------

6,658.

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER BOOKS

DESCRIPTION

1,445.

INCOME TAXES

1,440.

TOTALS

1,445.

PART I - OTHER EXPENSES FORM 990PF,

REVENUE AND EXPENSES PER BOOKS

77,261.

TOTALS

DESCRIPTION - FROM K-1

ATTACHMENT 6 PAGE 27

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

ENDING BOOK VALUE

ENDING FMV

STOCK

7,923,201.

7,923,201.

7,923,201.

TOTALS

7,923,201.

ATTACHMENT 7 PAGE 28

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION

PASS THRU INVESTMENTS PTP PASS THRU INVESTMENTS

TOTALS

ENDING BOOK VALUE

ENDING FMV

7,041,112.

7,041,112.

7,041,112.

7,041,112.

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

PRIOR PERIOD ADJUSTMENT

15,341.

TOTAL

15,341.

THE APOTEX FOUNDATION, INC.

FORM 990PF, PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

DIRECT PUBLIC SUPPORT

NAME AND ADDRESS

DATE

APOTEX CORPORATION 150 SIGNET DRIVE M9L 1T9

06/15/2012

2,000,000.

TOTAL CONTRIBUTION AMOUNTS

2,000,000.

ΔΤΤΔ	CHMENT	11

FORM 990PF, PART VII-A, LINE 14 - LOCATION OF BOOKS

150 SIGNET DR TORONTO ONTARIO CANADA

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Gross sale	Kind of Property		Description			or	Date acquired	Date sold
price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis	Excess of FMV over	D	Gain	
expenses of sale	allowable	basis	as of 12/31/69	as of 12/31/69	adı basıs	H	or (loss)	
		GOLDMAN SACE		IES		P	10/19/2011	01/18/2012
250,072.		250,000.					72.	
;		U.S. BANKCOF		IES		P	01/18/2012	01/24/2012
251,689.		250,000.					1,689.	
		KKR FINANCIA PROPERTY TYPE		IES		P	11/07/2011	03/01/2012
315,290.		300,000.					15,290.	
		AREGON N.V.	PE: SECURIT	TES		Р	01/24/2012	04/04/2012
130,145.		125,000.	DI DIGGINIT	110			5,145.	
		AREGON N.V.	DF: SECURIT	TES		P	01/24/2012	04/05/2012
130,191.		125,000.	. DECORTI	110			5,191.	
		RAYMOND INC.				₽	02/29/2012	04/04/2012
84,784.		83,300.	re. SECORII	IES			1,484.	
		RAYMOND INC.				P	02/29/2012	04/05/2012
27,308.		26,875.					433.	
		RAYMOND INC.				Р	02/29/2012	04/09/2012
78,270.		77,325.					945.	
		FACEBOOK INC		IES		Р	05/17/2012	05/18/2012
192,102.		178,600.					13,502.	
		RAYMOND JAME		IES		Р	02/29/2012	05/10/2012
115,320.		112,500.					2,820.	
		AMERICAN CAE		TFS		P	03/29/2012	05/01/2012
126,951.		125,000.	.b. bbcokii	100			1,951.	
		CENTURY LINK		TPC		Р	08/05/2011	06/04/2012
112,302.		102,492.	. J. JECURII	100			9,810.	

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis PENNSYLVANI	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over	D	acquired Gain or	
expenses of sale	allowed/ allowable	basis PENNSYLVANI <i>I</i>		as of 12/31/69	FMV over	П	Or.	
126,264.					adı basıs	ш	(loss)	
126,264.						P	04/13/2012	06/04/2012
		PROPERTY TYPE 125,000.	PE: SECURIT	IES			1,264.	
		CHARLES SCHW		TRO		Р	05/30/2012	08/16/2012
256,488.		PROPERTY TYPE 250,000.	PE: SECURIT	IES		ļ i	6,488.	
rotal gain(los	ss)		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • •		66,084.	
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Form 8868

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury File a separate application for each return. Internal Revenue Service • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part II or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or THE APOTEX FOUNDATION, INC. print C/O APOTEX HOLDINGS, INC. 22-3574994 File by the Number, street, and room or suite no. If a P.O. box see instructions Social security number (SSN) due date for 150 SIGNET DRIVE filing your return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions TORONTO ON CANADA Application Return **Application** Return ls For Code Is For Code Form 990 or Form 990-EZ Form 990-T (corporation) 01 07 Form 990-BL Form 1041-A 08 Form 4720- (individual) Form 4720 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) Form 6069 05 11 Form 990-T (trust other than above) Form 8870 • The books are in the care of ▶ SHERMFIN, INC. C/O APOTEX Telephone No ▶ 416 749-9300 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time $08/15\,$, 20 $13\,$, to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X | calendar year 2012 or , 20 and ending tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason | Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 13,500. 3a \$ If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3,000. 3b|\$ Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS

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

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

Form 8868 (Rev 1-2013)

10,500.

(Electronic Federal Tax Payment System) See instructions

Form 8868 (Re	ev 1-2013)					Page 2
 If you are 	e filing for an Additional (Not Automatic) 3-M	onth Exter	sion, complete only Part II a	nd check this box		
	complete Part II if you have already been gra					
 If you are 	e filing for an Automatic 3-Month Extension,					
Part II	Additional (Not Automatic) 3-Month E	xtension o	of Time. Only file the originate	al (no copies ne	eded).	
				r filer's identifying		
_	Name of exempt organization or other filer, see in	nstructions	E.	mployer identification	on number (E	EIN) or
Type or						
print	C/O APOTEX HOLDINGS, INC. 22-357					
File by the	te for 150 SIGNET DRIVE City, town or post office, state, and ZIP code For a foreign address, see instructions					
due date for filing your						
retum See						
Enter the D	<u> </u>	- f (fil-			-	TOTAL
Application	eturn code for the return that this application			return)	<u> </u>	
Application Is For		Return Code	Application Is For			Return
	r Form 000 F7		is roi			Code
Form 990-B	r Form 990-EZ	01 02	Form 1041-A			
Form 4720		03	Form 4720			08
Form 990-Pi		04	Form 5227	·····		10
	(sec 401(a) or 408(a) trust)	05	Form 6069			11
	(trust other than above)	06	Form 8870			12
	not complete Part II if you were not already			on on a previous	v filed For	
	is are in the care of > SHERMFIN, INC.				, , , , , , , , , , , , , , , , , , ,	0000.
	e No ▶ 416 749-9300		AX No. ▶			
	anization does not have an office or place of	_	·	hox	 ;	
● If this is fo	or a Group Return, enter the organization's for	ur dinit Gro	up Exemption Number (GEN)			···
for the whol	e group, check this box	f it is for na	et of the group, check this hou		and att	
	names and EINs of all members the extension		it of the group, effect the box	`	and all	aciia
	est an additional 3-month extension of time ur		11/	15 , 20 13		
-	lendar year 2012, or other tax year beginn		, 20 , and e			20 4 .
	ax year entered in line 5 is for less than 12 m			_ 		
	Change in accounting period					
	n detail why you need the extension ADDIT	IONAL T	IME IS REQUIRED TO	GATHER THE		
INFOR	RMATION NECESSARY TO FILE A CON	MPLETE A	AND ACCURATE RETURN.			
						· · · · · · · · · · · · · · · · · · ·
						
8a If this	application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the tentate	ve tax, less any		
nonref	undable credits. See instructions				8a \$	13,500.
b If this	application is for Form 990-PF, 990-T,	4720, or	6069, enter any refunda	ble credits and		
estima	ited tax payments made. Include any pri	or year o	verpayment allowed as a	credit and any		
amount paid previously with Form 8868						13,500.
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS						
(Electr	onic Federal Tax Payment System) See instru	ctions			8c \$	
	Signature and Verifica	ation mus	st be completed for Par	t II only.		
	s of perjury, I declare that I have examined this form,		ompanying schedules and statement	s, and to the best of	my knowled	ige and belief.
it is true, correct	t, and complete, and that I am authorized to prepare this for	rm				
	/ ///		02== 2=			6 .12
Signature 🕨 🖊	`		THE DRESIDENT	Date D	Form 8868	14,2013
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