

#### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



#### Form 990-PF Department of the Treasury Internal Revenue Service

# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

For calendar year 2012 or tax year beginning , and ending A Employer identification number Name of foundation THE GITTIS KATZ FOUNDATION 25-6912421 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 610-656-7945 119 CHERRY LANE City or town, state, and ZIP code C If exemption application is pending, check here WYNNEWOOD, PA 19096 Initial return of a former public charity G Check all that apply: Initial return D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here i Fair market value of all assets at end of year | J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 720, 406. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements or charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income N/A Contributions, gifts, grants, etc., received 2 Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 2,770 2,770 STATEMENT 16,432. 16,432. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 36,613 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 143,557 36,613. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) <167 11 Other income <167 STATEMENT 55,648 55.648 Total, Add lines 1 through 11 0 0. Compensation of officers, directors, trust 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 4,344 4,344 0. STMT 4 **b** Accounting fees c Other professional fees and Administrative 17 Interest 18 Taxes 19 Depreciation and depletion SCANNED SEP 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 7,166 7,213 0. STMT 5 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 11,510 11,557 Ο. 62,879 879. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 74,389 62,879. 11,557 Add lines 24 and 25 27 Subtract line 26 from line 12: <18,741. a Excess of revenue over expenses and disbursements 44,091 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-) Form **990-PF** (2012) LHA For Paperwork Reduction Act Notice, see instructions.

For	m 99	0-PF (2012) THE GITTIS KATZ FOUNDAT		25-	-6912421 Page 2
Р	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
	l .	Cash - non-interest-bearing		<del></del>	
	l .	Savings and temporary cash investments	118,807.	32,337.	32,337.
	3	Accounts receivable -			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			<u> </u>
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	ľ		
		Less: allowance for doubtful accounts			
ets		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			ļ <u></u>
•		investments - U.S. and state government obligations			
	1	Investments - corporate stock			
		Investments - corporate bonds	,1 =		
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans	C1 F CCC	600 060	600.060
	13	Investments - other STMT 7	615,666.	688,069	688,069.
	14	Land, buildings, and equipment basis	,		
		Less accumulated depreciation			
	15	Other assets (describe ►)			
		<b>7</b> . 1	724 472	700 400	720 406
	16	Total assets (to be completed by all filers)	734,473.	720,406	720,406.
	17	Accounts payable and accrued expenses			-
	18	Grants payable			
Liabilities	19	Deferred revenue			-[
∄	20	Loans from officers, directors, trustees, and other disqualified persons			-
L:a	21 22	Mortgages and other notes payable			-
	22	Other liabilities (describe >)			=
	23	Total liabilities (add lines 17 through 22)	0.	0	
_		Foundations that follow SFAS 117, check here			<b>1</b>
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
au	25	Temporarily restricted			7
Ba	26	Permanently restricted			7
밀		Foundations that do not follow SFAS 117, check here		·	7
딘		and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	0.	0	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0	.]
As	29	Retained earnings, accumulated income, endowment, or other funds	734,473.	720,406	
Š	30	Total net assets or fund balances	734,473.	720,406	•
_	31	Total liabilities and net assets/fund balances	734,473.	720,406	•
Р	art	III Analysis of Changes in Net Assets or Fund B	alances		
_	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30	T	<del>                                     </del>
•		st agree with end-of-year figure reported on prior year's return)	00		734,473.
2		r amount from Part I, line 27a		1 2	1
		r increases not included in line 2 (itemize)	SEE STA		
		lines 1, 2, and 3	SEE SIR		
		eases not included in line 2 (itemize)		5	
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		
					Form <b>990-PF</b> (2012)

art IV Capital Gains a	illu Lusses for rax on	Investment	N Income	· · · · · · · · · · · · · · · · · · ·	2		
(a) List and descri 2-story brick war	ibe the kind(s) of property sold (e rehouse; or common stock, 200 s	e.g., real estate,		) How acquired P - Purchase D - Donation	(c) Date a	icquired ay, yr.)	(d) Date sold (mo., day, yr.)
CEE AMMACUED	CIMA MENATRA						
SEE ATTACHED	STATEMENT						
	· · · · · · · · · · · · · · · · · · ·				_		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			nin or (loss) (f) minus (	
143,557.			106,944				36,613.
Complete only for assets showing			<del>-</del>		) Gains (Ci . (k), but n	ol. (h) gain i ot less than	minus 1 -0-) or
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			(from col. (I	
		-		<del> </del>			36,613.
· <u> </u>	( If name also an	ter in Part I, line i	 7				20,013.
Capital gain net income or (net cap Net short-term capital gain or (loss	ortal loss) 👤 If (loss), enter	-0- in Part I, line		2			36,613.
If gain, also enter in Part I, line 8, of the control of the section of the control of the contr		anu (6).	•	}   3		N/A	
	nder Section 4940(e) fo	or Poducod		<del></del>			
					ome		
or optional use by domestic private	foundations subject to the section				ome		
or optional use by domestic private section 4940(d)(2) applies, leave th					ome		
ection 4940(d)(2) applies, leave th	ıs part blank.	n 4940(a) tax on	net investment inco	me.)	ome		Vac <b>V</b> No.
ection 4940(d)(2) applies, leave th s the foundation liable for the secti	is part blank. ion 4942 tax on the distributable a	n 4940(a) tax on amount of any ye	net investment inco	me.)	ome		Yes X No
ection 4940(d)(2) applies, leave th s the foundation liable for the secti <u>res," the foundation does not quality</u> Enter the appropriate amount in e	is part blank. ion 4942 tax on the distributable a fy under section 4940(e). Do not	n 4940(a) tax on amount of any ye complete this pa	net investment inco ear in the base perio	me.)			
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section of the secti	is part blank.  Ion 4942 tax on the distributable a  fy under section 4940(e). Do not ach column for each year; see the	n 4940(a) tax on amount of any ye complete this pa	net investment inco ear in the base perio rt. fore making any ent	me.) d? ies. (c)		Distrib	
ection 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section of the sectio	is part blank.  for 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the fy in)  Adjusted qualifying of	n 4940(a) tax on amount of any ye complete this pate instructions bethering the distributions.	net investment inco ear in the base perio rt. fore making any ent	me.) d? les. (c) haritable-use assets		Distrib col. (b) divi	(d) ution ratio ided by col. (c))
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section of the secti	is part blank.  for 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the fy in)  Adjusted qualifying of	amount of any ye complete this pare instructions bettertibutions	net investment inco ear in the base perio rt. fore making any ent	me.)  ies.  (c) haritable-use assets  769,520		Distrib col. (b) divi	(d) ution ratio ided by col. (c)) • 0 9 3 6 0 3
ection 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section of the sectio	is part blank.  for 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the (b) Adjusted qualifying of	amount of any ye complete this pa e instructions before this before the complete the pa e instructions before the complete this pa e instructions before the complete the comp	net investment inco ear in the base perio rt. fore making any ent	me.)  d?  les.  (c) haritable-use assets  769,520 816,368		Dıstrıb col. (b) divi	(d) ution ratio ided by col. (c)) • 093603 • 061968
ection 4940(d)(2) applies, leave the set of the section 4940(d)(2) applies, leave the set of the section for the section for the foundation does not qualified the appropriate amount in experience (a)  Base period years Calendar year (or tax year beginning 2011)  2010	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the  (b) Adjusted qualifying of	amount of any ye complete this pare instructions bettertibutions	net investment inco ear in the base perio rt. fore making any ent	me.)  ies.  (c) haritable-use assets  769,520		Distrib col. (b) divi	(d) ution ratio ided by col. (c)) .093603 .061968 .025980
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section of the secti	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the  (b) Adjusted qualifying of	amount of any ye complete this pa e instructions before the stributions 72,029. 50,589. 21,670.	net investment inco ear in the base perio rt. fore making any ent	me.)  ies.  (c) haritable-use assets  769,520  816,368  834,094		Dıstrıb col. (b) divi	(d) ution ratio ided by col. (c)) • 093603 • 061968
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the set of the section 4940(d)(2) applies, leave the section 4940(d)(2) applies for the section 4940(d)(2) applies for the section 4940(d)(2) applies for the section 4940(d)(2) applies, leave the section 4940(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the  (b) Adjusted qualifying of	amount of any ye complete this pa e instructions before the stributions 72,029. 50,589. 21,670.	net investment inco ear in the base perio rt. fore making any ent	me.)  ies.  (c) haritable-use assets  769,520  816,368  834,094		Distrib col. (b) divi	(d) ution ratio ided by col. (c))  • 093603  • 061968  • 025980  • 025879
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section of the secti	is part blank.  for 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the  (b) Adjusted qualifying of	amount of any ye complete this pate instructions before the complete this pate in the complete the complete this pate in the complet	net investment inco ear in the base perio rt. fore making any ent Net value of nonc	me.)  des.  (c) haritable-use assets  769,520  816,368  834,094  753,500		Distrib col. (b) divi	(d) ution ratio ided by col. (c))  • 093603  • 061968  • 025980  • 025879
ection 4940(d)(2) applies, leave the set of the foundation liable for the section of the section	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the (b) Ig in)  Adjusted qualifying of	amount of any ye complete this pate instructions before the complete this pate in the complete the complete this pate in the complet	net investment inco ear in the base perio rt. fore making any ent Net value of nonc	me.)  des.  (c) haritable-use assets  769,520  816,368  834,094  753,500	2	Distrib col. (b) divi	(d) ution ratio ided by col. (c))  .093603 .061968 .025980 .025879
ection 4940(d)(2) applies, leave the set of the section for the section for the section for the foundation does not qualified the appropriate amount in experience for the appropriate amount in experience for the section for the appropriate amount in experience for the section for the s	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the (b) Ig in)  Adjusted qualifying of	amount of any ye complete this pate instructions before the complete this pate in the complete the complete this pate in the complet	net investment inco ear in the base perio rt. fore making any ent Net value of nonc	me.)  des.  (c) haritable-use assets  769,520  816,368  834,094  753,500		Distrib col. (b) divi	(d) ution ratio ided by col. (c))  .093603 .061968 .025980 .025879
section 4940(d)(2) applies, leave the set of the section 4940(d)(2) applies, leave the set of the section 4940(d)(2) applies, leave the set of the section 4940(d)(2) applies, leave the section 4940(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the  (b) Adjusted qualifying of  Section 4940(e). Do not ach column for each year; see the  (b) Adjusted qualifying of  Section 4940(e). Do not ach column for each year; see the  (c)  Adjusted qualifying of  Section 4940(e). Do not ach column for each year; see the  (c)	amount of any ye complete this pare instructions before the pare instruction before the par	net investment inco ear in the base perio rt. fore making any ent Net value of nonc	me.)  des.  (c) haritable-use assets  769,520  816,368  834,094  753,500	2	Distrib col. (b) divi	(d) ution ratio uded by col. (c))  • 093603  • 061968  • 025980  • 025879  • 207430  • 051858
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the set of the section o	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the  (b) Adjusted qualifying of  Section 4940(e). Do not ach column for each year; see the  (b) Adjusted qualifying of  Section 4940(e). Do not ach column for each year; see the  (c)  Adjusted qualifying of  Section 4940(e). Do not ach column for each year; see the  (c)	amount of any ye complete this pare instructions before the pare instruction before the par	net investment inco ear in the base perio rt. fore making any ent Net value of nonc	me.)  des.  (c) haritable-use assets  769,520  816,368  834,094  753,500	2 3	Distrib col. (b) divi	(d) ution ratio ided by col. (c))  .093603 .061968 .025980 .025879  .207430 .051858
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the set the foundation liable for the section of the s	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the (b)  Adjusted qualifying of the properties of the following in the properties of the following in the follow	amount of any ye complete this pare instructions before the pare instruction before the par	net investment inco ear in the base perio rt. fore making any ent Net value of nonc	me.)  des.  (c) haritable-use assets  769,520  816,368  834,094  753,500	2 3 4	Distrib col. (b) divi	(d) ution ratio ided by col. (c)) • 093603 • 061968 • 025980
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the set of the foundation liable for the section of th	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the (b)  Adjusted qualifying of the properties of the following in the properties of the following in the follow	amount of any ye complete this pare instructions before the pare instruction before the par	net investment inco ear in the base perio rt. fore making any ent Net value of nonc	me.)  des.  (c) haritable-use assets  769,520  816,368  834,094  753,500	2 3 4 5	Distrib col. (b) divi	(d) ution ratio ided by col. (c))  .093603 .061968 .025980 .025879  .207430 .051858  748,219. 38,801.
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the set of the section 4940(d)(2) applies, leave the set of the foundation does not qualify the foundation does not qualify the foundation does not qualify the foundation applies to the foundation has been in existent the net value of noncharitable fundation has been in existent the foundation has been in existent for the section for the se	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the (b)  Adjusted qualifying of Adjusted qualifying of Part XII, line 4	amount of any yecomplete this pare instructions before this pare instructions before the pare instruction before the	net investment inco ear in the base periort. fore making any ent Net value of nonc	me.)  ries.  (c) haritable-use assets  769,520  816,368  834,094  753,500  years	2 3 4 5 6	Distrib col. (b) divi	(d) ution ratio ided by col. (c))  .093603 .061968 .025980 .025879  .207430 .051858  748,219.  38,801.  441.  39,242.
section 4940(d)(2) applies, leave the set the foundation liable for the section 4940(d)(2) applies, leave the set the foundation does not qualified the appropriate amount in experience and the appropriate amount in experience and a section of the appropriate amount in experience and a section of the appropriate amount in experience and a section of the appropriate amount in experience and a section of the appropriate amount in experience and a section of the section	is part blank.  Ion 4942 tax on the distributable a fy under section 4940(e). Do not ach column for each year; see the (b)  Adjusted qualifying of Adjusted qualifying of Part XII, line 4	amount of any yecomplete this pare instructions before this pare instructions before the pare instruction before the	net investment inco ear in the base periort. fore making any ent Net value of nonc	me.)  ries.  (c) haritable-use assets  769,520  816,368  834,094  753,500  years	2 3 4 5 6 7	Distrib col. (b) divi	(d) ution ratio ided by col. (c))  .093603 .061968 .025980 .025879  .207430 .051858  748,219. 38,801.

	1 990-PF (2012) THE GITTIS KATZ FOUNDATION		<u>6912</u>			Page 4	
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	or 4948	- see i	nstru	ctio	1S)	
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.		Ì				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)						
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%						
	of Part I, line 27b		ļ			-	
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		ì				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_ 2			_	0.	
3	Add lines 1 and 2	3			4	<u>41.</u>	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	Î .			0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			4	<del>41.</del>	
	Credits/Payments:		1				
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 1, 31	2.					
	Exempt foreign organizations - tax withheld at source						
	E Tax paid with application for extension of time to file (Form 8868)						
	I Backup withholding erroneously withheld 6d						
	Total credits and payments. Add lines 6a through 6d	7			1 3	<u>12.</u>	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	†		<u> </u>	<del></del>	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>▶</b> 9	<del>                                     </del>				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1		Q	71.	
	Enter the amount of line 10 to be: Credited to 2013 estimated tax   871. Refunded		+		- 0	0.	
	art VII-A Statements Regarding Activities		Щ			<u> </u>	
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inter	vano in			Yes	No	
14	any political campaign?	vene m		4-	103	X	
		-10		1a		X	
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition	•		1b			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published by the foundation is accounted with the activities.	iisnea or					
	distributed by the foundation in connection with the activities.			١. ا			
	Did the foundation file Form 1120-POL for this year?			1c		X	
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	^					
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	<u>0.</u>					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation						
_	managers. ▶ \$0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X	
_	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporat	on, or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		- / -	4a		X	
	olf "Yes," has it filed a tax return on Form 990-T for this year?	1	1/A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	τ.	X	
	If "Yes," attach the statement required by General Instruction T.			. 1		ľ	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				•		
	By language in the governing instrument, or						
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the</li> </ul>	state law					
	remain in the governing instrument?			6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	<u> </u>	
	If "Yes," complete Part II, col. (c), and Part XV.						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► NONE		<del></del>				
	Kitha annuar Marita Ira 7 has the foundation for the day of the control of the co						
D	olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	1713477377		ا ا		,,	
_	of each state as required by General Instruction G? If "No," attach explanation SEE STAT		8 1	8b		<u> </u>	
9	3	calendar					
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10 000	DE	(0040)	

Form **990-PF** (2012)

223541

orm 990-PF (2012) THE GITTIS KATZ FOUNDATI	ON		<u> 25-69124</u>	21 Page <u>6</u>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:		-		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y€	s X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,		
any voter registration drive?		☐ Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?		T Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurposes, or f			
the prevention of cruelty to children or animals?	or oddoundrial purposes, or i		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un-	der the exceptions described i		is LALINO	
section 53.4945 or in a current notice regarding disaster assistance (see instru		in negulations	N/A	5 <b>b</b>
Organizations relying on a current notice regarding disaster assistance check h	· ·			-
		unad		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		. —	. —	
expenditure responsibility for the grant?		I/A L Ye	es L. No	
If "Yes," attach the statement required by Regulations section 53.494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		TT	
a personal benefit contract?		Y€	es X No	_
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u>                                     </u>	6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	1	
List all officers, directors, trustees, foundation managers and their	T -	(-) Companyon	(d) Control internation	=
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allowances
MARJORIE KATZ	TRUSTEE			
119 CHERRY LANE				
NYNNEWOOD, PA 19096	0.00	0.	0.	0.
DAVID KATZ	TRUSTEE		-	
119 CHERRY LANE	]			
VYNNEWOOD, PA 19096	0.00	0.	0.	0.
	1			
	1			
	1			
	1			
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1), If none,	enter "NONE."	l	
	(b) Title and average		(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred	account, other allowances
NONE	devoted to position		compensation	allowalices
HONE				
		<del>                                     </del>		<del></del>
	-			
		<del>                                     </del>		
	4			
		<del>                                     </del>		
	4			
		ļ		
	1			
	<u> </u>	<u></u>	<u> </u>	
Total number of other employees paid over \$50,000		<u></u>	<b>▶</b> .	0
			Form	990-PF (2012)

Form 990-PF (2012) THE GITTIS KATZ FOUNDATION	25-6	912421 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Fotal number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<u>▶ </u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical initiation number of organizations and other beneficiaries served, conferences convened, research papers produced,	ormation such as the	Expenses
N/A		
2		<del></del>
8		
Port IV P O		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amaunt
N/A	dilu Z.	Amount
N/A		
		· · · · · · · · · · · · · · · · · · ·
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
		Form <b>990-PF</b> (2012)

Ρ	art X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	606,668.
b	Average of monthly cash balances	1b	152,945.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	759,613.
е	Reduction claimed for blockage or other factors reported on lines 1a and		······
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	759,613.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11,394.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	748,219.
6	Minimum investment return. Enter 5% of line 5	6	37,411.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	37,411.
2a	Tax on investment income for 2012 from Part VI, line 5		<del></del>
b	Income tax for 2012. (This does not include the tax from Part VI.)	]	
C	Add lines 2a and 2b	2c	441.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	36,970.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	36,970.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	36,970.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	62,879.
þ	•	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	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	62,879.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	441.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	62,438.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies fo	r the section

Form **990-PF** (2012)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7				<u>36,970.</u>
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2012:		0.		
a From 2007				
<b>b</b> From 2008				
c From 2009				
d From 2010				
e From 2011 9, 475.				
f Total of lines 3a through e	9,475.			
4 Qualifying distributions for 2012 from	3,1730			
Part XII, line 4: ► \$ 62,879.				
a Applied to 2011, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)	ļ	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				36,970.
e Remaining amount distributed out of corpus	25,909.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	35,384.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				·
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	_			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.	25 22 1			
Subtract lines 7 and 8 from line 6a	35,384.			
10 Analysis of line 9:				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011 9, 475.	ļ			
e Excess from 2012 25,909.				Form <b>990-PF</b> (2012)

Form 990-PF (2012) THE GIT	TIS KATZ FO	UNDATION			6912421 Page 10
Part XIV   Private Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective for			▶	· · · · · · · · · · · · · · · · · · ·	<del></del>
<b>b</b> Check box to indicate whether the found		g foundation described in		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed					İ
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					-
alternative test relied upon:  a "Assets" alternative test - enter:					
(1) Value of all assets					
( )				-	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter		·			
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					<del>-</del>
(3) Largest amount of support from					
an exempt organization (4) Gross investment income	-			-	
Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or	more in accets
at any time during t				παα φο,σσσ στ	more in assets
1 Information Regarding Foundation					
a List any managers of the foundation wh	•	than 2% of the total conti	ibutions received by the	foundation before the	e close of any tay
year (but only if they have contributed in	nore than \$5,000). (See s	ection 507(d)(2).)	ibations received by the	Todridation boloro th	b close of any tax
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (	or an equally large portion	on of the ownership o	of a partnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.		,	
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here <b>X</b> if the foundation of				of accept unsolicited	requests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations u	nder other conditions, co	implete items 2a, b, c	c, and d.
a The name, address, and telephone num					<del></del>
2	or or o man or the perce	to whom approactions o	modia bo addi cocca.		
b The form in which applications should t	oe submitted and informat	tion and materials they sh	nould include:	<del></del>	
c Any submission deadlines:			<del></del>		<del></del>
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors;	
		•	•		
	<u> </u>	····			
223601 12-05-12					Form.990-PF_(20.12)

KATZFDN1

223611 12-05-12

Part XVI-A Analysis of Income-Producing Activities	Part XVI-A	of Income-Producing Activitie
--	------------	-------------------------------

r gross amounts unless otherwise indicated.	Unrelated b	usiness income		section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
rogram service revenue:	code		code	Amount	Tunction income
	<del>                                     </del>				
Fees and contracts from government agencies					
embership dues and assessments					
nterest on savings and temporary cash				0 770	
nvestments Invidends and interest from securities			14	2,770. 16,432.	
et rental income or (loss) from real estate:	. ~ .	- r -	14		
Debt-financed property	, ,	•			a + 1,
Not debt-financed property				-	
et rental income or (loss) from personal				-	
roperty					
ther investment income			14	<167.>	
ain or (loss) from sales of assets other				26 642	
nan inventory			18	36,613.	
et income or (loss) from special events ross profit or (loss) from sales of inventory					
ther revenue:					
	-			55.540	
Subtotal. Add columns (b), (d), and (e)		(	0.	55,648.	55,64
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.)				13	55,64
					<del>.</del>
art XVI-B Relationship of Activities	to the Accon	nplishment of	Exempt Po	ırposes	
e No. Explain below how each activity for which inc	ome is reported in (	column (e) of Part XV	'I-A contributed	importantly to the accomm	lishment of
▼ the foundation's exempt purposes (other than				, ,	

▼	the foundation's exempt purposes (other than by providing funds for such purposes).	
-+		
1 .	Form	990-DE

orm 990-PF (2		ITTIS KAT				25-691		Page 13
Part XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	ships With Noncha	ritable	
1 Did the org	ganization directly or indir	ectly engage in any	of the following	ng with any other organiza	tion described in sec	ction 501(c) of	Ye	s No
the Code (	other than section 501(c)	(3) organizations) o	r in section 52	27, relating to political org	anizations?			
a Transfers	from the reporting founda	ation to a noncharita	ble exempt or	ganization of:				
(1) Cash							1a(1)	_ X
(2) Other	assets						1a(2)	X
<b>b</b> Other trans	sactions:							
(1) Sales	of assets to a noncharital	ble exempt organiza	tion				1b(1)	X
(2) Purch	ases of assets from a nor	ncharitable exempt o	organization				1b(2)	X
(3) Renta	l of facilities, equipment, (	or other assets					1b(3)	X
(4) Reimt	oursement arrangements						1b(4)	X
(5) Loans	or loan guarantees						1b(5)	X
(6) Perfor	mance of services or me	mbership or fundrai	sing solicitatio	ons			1b(6)	X
c Sharing of	facilities, equipment, mai	iling lists, other asse	ets, or paid em	nployees			1c	X
d If the answ	er to any of the above is	"Yes," complete the	following sch	edule. Column (b) should	always show the fair	market value of the goods,	other assets,	
						n or sharing arrangement,		
column (d	) the value of the goods, (	other assets, or serv	rices received.	•				
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable	e exempt organization	(d) Description	on of transfers, transactions, and	sharing arrange	ments
			N/A					
						-		
_								
		_	·		·			
					:			
in section	501(c) of the Code (other	r than section 501(c		e or more tax-exempt orga tion 527?	nızatıons described		Yes [	X No
<u>и</u> и тех, со	mplete the following scho (a) Name of org			(b) Type of organization	1	(c) Description of relations	hin	
·	N/A	James and the second		(b) Type of organization	'	(c) Description of relations	inp	
<del></del>	N/A							
					-			
	<del>-</del>	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del> </del>				
	•	<del></del>				<del></del>		
Under	penalties of perjury. I declare	that I have examined th	ıs return, ıncludu	I пg accompanying schedules a	d statements and to th	e best of my knowledge		
Sign Here	lief, it is true, correct, and con	mplete Declaration of pr	reparer (other tha	an taxpayer) is based on all info	ermation of which prepar	er has any knowledge ret	ay the IRS discu- lurn with the pre- own below (see X Yes	parer
Sign	ature of officer or trustee		I D-0	Date Date	Title	Chapte F=1 .t Invent		
	Print/Type preparer's na	1111E	Preparer's	signature	Date	Check X If PTIN		
Paid	ELLIOT BRA	UNSTEIN	4		1/12/13	self- employed	017429	2
Preparer Use Only	Firm's name ► BRA	UNSTEIN 8	COMPA	MY, LLC	<del>-/</del>	Firm's EIN ► 30 – 0		
	Fırm's address ▶ 'TW	O PENN CE	MTER,	SUITE 840		_		
		ILADELPH		19102		Phone no. 215-	972-70	22

223622 12-05-12 Form **990-PF** (2012)

	sses for Tax on Investment Income			/EXTENSION :		
(a) List and 2-story br	describe the kind(s) of property sold lick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a FIDELITY ACCT#	218871 (SEE ATTA	CHED SCHEDULE)		P	VARIOUS	12/31/12
b FIDELITY ACCT#	218871 (SEE ATTA	CHED SCHEDULE)		P	VARIOUS	12/31/12
	TITY (POWERSHARE		FUND	P	VARIOUS	12/31/12
	TITY (POWERSHARE		FUND	P	VARIOUS	12/31/12
e FLOWTHROUGH EN				P	VARIOUS	12/31/12
f CAPITAL GAINS		, , , , , , , , , , , , , , , , , , , ,			111111111111111111111111111111111111111	
g					-	
h						
						-
1						
k				1		
1						
n						
0						<u> </u>
·	(f) Depreciation allowed	(g) Cost or other basis	T -	/h	Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		(n) 1 (e)	lus (f) minus (g)	
a 35,073.	(0) 1,	34,802	+	(0) F		271.
		71,948				
		/1,948	•			6,957.
		104				31.
d 27 400		194	+			<194.>
e 27,490.		* .				<u>27,490.</u>
f 2,058.			+	<del></del>	. =	2,058.
<u>g</u>						
<u>h</u>						
1			<b></b>			
<del>!</del>			<b>-</b>	<del></del>		
k			-			
1			-			
<u>m</u>			-			
n		<u> </u>				
0		the fee also as 40 (04 (00				
Complete only for assets snowin	ng gain in column (h) and owned by		4		sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		but r	of col. (h) gain ove ot less than "-0-")	i col. (k),
a						271.
b						6,957.
С						31.
d						<194.>
е						27,490.
f						2,058.
g						
h					-	
1					<del>-</del>	
						· · · · · · · · · · · · · · · · · · ·
k						<del></del>
<u></u>				<u> </u>		<del></del> -
m						
n			1			
						·
0		<u> </u>		· · · · · · · · · · · · · · · · · · ·		
2 Capital gain net income or (net ca	apital loss) { If gain, also enter -(	r in Part I, line 7 )-" in Part I, line 7	2			36,613.
3 Net short-term capital gain or (los				1		
If gain, also enter in Part I, line 8,	, column (c).	<b>}</b>		!		
If (loss), enter "-0-" in Part I, line	8	<u></u>	3	<u> </u>	N/A	

Part XV Supplementary Information				
3 Grants and Contributions Paid During the You		<u> </u>	<b>-</b>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
THE SHIPLEY SCHOOL 814 YARROW STREET BRYN MAWR, PA 19010	NONE	PUBLIC CHARITY	EDUCATION	48,500,
NATIONAL MS SOCIETY 30 S 17TH STREET, SUITE 800 PHILADELPHIA, PA 19103	NONE	PUBLIC CHARITY	MEDICAL RESEARCH	50.
YOUTH RENEWAL FUND 250 WEST 57TH STREET, SUITE 632 NEW YORK, NY 10107	NONE	PUBLIC CHARITY	COMMUNITY	250.
Total from continuation sheets				48 800.

FORM 990-PF INTEREST ON SAVI	INGS AND I	EMPORARY C	ASH I	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
HGE PARTNERS NUMBER ONE PARTN POWERSHARES DB COMMODITY INDE		IG FUND		_	2,70	5 <b>4.</b> 6.
TOTAL TO FORM 990-PF, PART I,	LINE 3,	COLUMN A		=	2,7	70.
FORM 990-PF DIVIDEND	OS AND INT	EREST FROM	SECU	RITIES	STATEMENT	2
SOURCE	GRO	SS AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	)
FIDELITY INVESTMENTS ACCT#159 FIDELITY INVESTMENTS ACCT#218 POWERSHARES DB COMMODITY INDE	3871	11,882. 6,232. 376.		1,391. 291. 376.	10,49 5,9	
TOTAL TO FM 990-PF, PART I, I	Ln 4	18,490.		2,058.	16,4	32.
FORM 990-PF	ОТНЕБ	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOK		(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
HGE PARTNERS NUMBER ONE PARTN	NERSHIP		167.>	<167	•>	_
TOTAL TO FORM 990-PF, PART I,	T.TNF 11		1.60	<167		
	, DINE II		167.>	<107	• <i>&gt;</i> =	-
		TING FEES	====	<107	STATEMENT	4
FORM 990-PF  DESCRIPTION		TING FEES (B) NET INV	EST-	(C) ADJUSTED NET INCOM	STATEMENT (D) CHARITA	BLE
FORM 990-PF	ACCOUN (A) EXPENSES	(B) S NET INV	EST-	(C) ADJUSTED	STATEMENT (D) CHARITA	BLE

FORM 990-PF	OTHER E	XPENSES			STATEME	NT ——	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM	CHAR	D) ITAI POSI	
INVESTMENT MANAGEMENT FEES FOREIGN TAXES PAID	7,087. 79.	7,	134. 79.				0.
TO FORM 990-PF, PG 1, LN 23	7,166.	7,	213.				0.
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FU	ND BA	LANCES	STATEME	NT	6
DESCRIPTION					AMOU	NТ	
UNREALIZED GAINS/(LOSSES) NON TAXABLE INVESTMENT INCOME	E RECORDED O	n books				4,43	39. 35.
TOTAL TO FORM 990-PF, PART II	II, LINE 3					4,6	74.
FORM 990-PF	OTHER INV	ESTMENTS			STATEME	NT	7
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MA VALU		r
HGE PARTNERS INVESTMENT FIDELITY ACCT#218871 FIDELITY ACCT#159530		COST COST COST		0. 377,557. 310,512.		77,5!	
TOTAL TO FORM 990-PF, PART II	, LINE 13			688,069.	68	8,00	69 <b>.</b>
FORM 990-PF EXPLANATION CO	ONCERNING PA	RT VTT-A	LINE	. 8B	STATEME		8

#### EXPLANATION

NOT REQUIRED.

### Form **8868** (Rev January 2013)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No 1545-1709

• If you a	re filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			ightharpoons
	tre filing for an Additional (Not Automatic) 3-Month Ext			this form).		
	omplete Part II unless you have already been granted a				rm 8868.	
	c filing (e-file). You can electronically file Form 8868 if y					orporation
	o file Form 990-T), or an additional (not automatic) 3-mor					•
	file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in pap	-	*			
	urs gov/efile and click on e-file for Chanties & Nonprofits		dee mandenonay, For more details t	או ווופ פופנ	attorne ming or th	is tom,
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded).		
	ation required to file Form 990-T and requesting an auton					
Part I only			and the second of the second o	complete		
All other o	, corporations (including 1120-C filers), partnerships, REM ome tax returns	ICs, and ti	rusts must use Form 7004 to reques	t an exten	sion of time	
Type or	Name of exempt organization or other filer, see instru-	ctions		Employer	identification nu	umber (EIN) or
print						
	THE GITTIS KATZ FOUNDATION				25-6912	421
File by the due date for	Number, street, and room or suite no. If a P.O. box, se	ee instruc	tions.	Social se	curity number (S	
filing your	119 CHERRY LANE				·	•
return See instructions	City, town or post office, state, and ZIP code. For a fo	reign add	ress, see instructions			
	WYNNEWOOD, PA 19096					
					<u> </u>	
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 1
Applicati	on	Return	Application			Return
ls For		Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
	(Individual)	03	Form 4720			09
Form 990		04	Form 5227			10
	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870		<del></del>	12
1 01111 030	DAVID KATZ		1 0/11/ 00/0			12
• The bo	books are in the care of   119 CHERRY LANS	≂ - ระ	VMMFWOOD DA 19096			
	none No ► 610-656-7945		FAX No ▶ 610-656-79	15		
		a in tha Lin		43	<del></del>	<b>.</b> $\Box$
	organization does not have an office or place of business		•	lf Al fa		السسا
. 1	is for a Group Return, enter the organization's four digit	1			-	•
box 🕨	If it is for part of the group, check this box		ich a list with the names and EINs o		ers the extension	n is for
1   re	quest an automatic 3-month (6 months for a corporation	•	•		<b>-</b>	
		t organiza	tion return for the organization name	ed above	The extension	
	or the organization's return for.					
<b>▶</b> [	X calendar year 2012 or					
<b>▶</b> l	tax year beginning	, an	d ending		<u> </u>	
2 If th	ne tax year entered in line 1 is for less than 12 months, c	neck reas	on· Initial return	Fınal retur	n	
L	☐ Change in accounting period					
	/ F 000 DI 000 DE 000 T 1700		<del></del>		r <del></del>	<del></del>
	nis application is for Form 990-BL, 990-PF, 990 T, 4720, o	or 6069, e	nter the tentative tax, less any			^
	nrefundable credits. See instructions.	<del></del>		3a_	\$	0.
	nis application is for Form 990 PF, 990-T, 4720, or 6069,	-				_
	imated tax payments made. Include any prior year overp			3b	\$	0.
	ance due. Subtract line 3b from line 3a. Include your pa				1	_
	using EFTPS (Electronic Federal Tax Payment System)			3c_	\$	0.
	If you are going to make an electronic fund withdrawal v			orm 8879-		
LHA F	or Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form <b>886</b> 8	(Rev 1 2013)

Form 8868 (Rev. 1-2013)					Pag
<ul> <li>If you are filing for an Additional (Not Automatic) 3-Month E</li> </ul>					, , , <b>▶</b> [X]
Note. Only complete Part II if you have already been granted an	automatic	3-month extension on a previously	filed Form	8868.	
<ul> <li>If you are filing for an Automatic 3-Month Extension, comple</li> </ul>					
Part II Additional (Not Automatic) 3-Month I	Extensio	n of Time. Only file the origi	nal (no c	opies i	needed).
		Enter filer'	s identifyir	g numt	er, see instructio
Type or Name of exempt organization or other filer, see instr	uctions				cation number (EIN
print			" -,		<b>,</b>
File by the THE GITTIS KATZ FOUNDATION			Į	25-	6912421
Number, street, and room or suite no. If a P.O. box.	see instruc	tions	Social se		umber (SSN)
return See 119 CHERRY LANE	<b>-</b>			•••···	2
City, town or post office, state, and ZIP code. For a	foreign add	Ireas see instructions			
WYNNEWOOD, PA 19096					
				<del></del>	
Enter the Return code for the return that this application is for (fi	le a senara	te application for each return)			[0]
and the fiction edge for the feter that the application is for the	io a sopaia	to application to each return)	•• ••••		
Application	Return	Application			Retu
is For	Code	Is For			Cod
Form 990 or Form 990-EZ	01	10.01			
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already grante			viously file	d Eorm	
		natio o incital extension on a pre	VIOUSIY IIIC	u i oi iii	0000.
DAVID KATZ					
DAVID KATZ  ■ The books are in the care of ▶ 119 CHERRY LAN	ie – w	YNNEWOOD, PA 19096	;		
<ul> <li>The books are in the care of ► 119 CHERRY LAN</li> </ul>	IE - W				
<ul> <li>The books are in the care of ► 119 CHERRY LAN</li> <li>Telephone No. ► 610-656-7945</li> </ul>		FAX No. ► 610-656-79	45		_
<ul> <li>The books are in the care of ► 119 CHERRY LAN</li> <li>Telephone No. ► 610-656-7945</li> <li>If the organization does not have an office or place of business</li> </ul>	ss in the Ur	FAX No. $\triangleright$ 610-656-75 inted States, check this box	45		ole grain check t
<ul> <li>The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945</li> <li>If the organization does not have an office or place of business</li> <li>If this is for a Group Return, enter the organization's four digress</li> </ul>	ss in the Ur	FAX No. ► 610-656-79 nrted States, check this box	45	r the wh	ole group, check ti
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business If this is for a Group Return, enter the organization's four digribox ▶ . If it is for part of the group, check this box ▶	ss in the Ur t Group Exe	FAX No. > 610-656-79  Inted States, check this box	45	r the wh	ole group, check ti
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business of this is for a Group Return, enter the organization's four dignitions ▶	ss in the Ur t Group Exe	FAX No. > 610-656-79  Inted States, check this box	of all memb	r the wh	ole group, check ti
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business  If this is for a Group Return, enter the organization's four digitable to the language of the group, check this box ▶   I request an additional 3-month extension of time until  For calendar year 2012, or other tax year beginning	ss in the Ur t Group Exe and atta NOVEM	FAX No. > 610-656-79  mited States, check this box	of all memb	r the wh ers the	ole group, check ti
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business  If this is for a Group Return, enter the organization's four dignitions ▶	ss in the Ur t Group Exe and atta NOVEM	FAX No. > 610-656-79  mited States, check this box	of all memb	r the wh ers the	ole group, check ti
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business  If this is for a Group Return, enter the organization's four dignitions ▶	ss in the Ur t Group Exe and atta NOVEM	FAX No. > 610-656-79  mited States, check this box	of all memb	r the wh ers the	ole group, check ti
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business  If this is for a Group Return, enter the organization's four dignitions ▶	ss in the Ur t Group Exe and atta NOVEM check reas	FAX No. > 610-656-79  Inted States, check this box	J45  If this is to of all memb	r the wh ers the o	ole group, check ti extension is for.
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business If this is for a Group Return, enter the organization's four dignitions If it is for part of the group, check this box ▶  I request an additional 3-month extension of time until For calendar year 2012, or other tax year beginning If the tax year entered in line 5 is for less than 12 months,  Change in accounting period  State in detail why you need the extension  ADDITIONAL TIME IS NEEDED TO	ss in the Ur t Group Exe and atta NOVEM check reas	FAX No.   610-656-79  Inted States, check this box	J45  If this is to of all memb	r the wh ers the o	ole group, check ti extension is for.
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business  If this is for a Group Return, enter the organization's four dignitions ▶	ss in the Ur t Group Exe and atta NOVEM check reas	FAX No.   610-656-79  Inted States, check this box	J45  If this is to of all memb	r the wh ers the o	ole group, check ti extension is for.
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business of this is for a Group Return, enter the organization's four dignitions ▶	ss in the Ur t Group Exe and atta NOVEM check reas FILE RECE	FAX No.  610-656-79  Inted States, check this box	J45  If this is to of all memb	r the wh ers the o	ole group, check ti extension is for.
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business of this is for a Group Return, enter the organization's four dignitions ▶ If it is for part of the group, check this box ▶  I request an additional 3-month extension of time until 5. For calendar year 2012, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  Replication of the tax year entered in line 5 is for less than 12 months, Change in accounting period  Replication of the tax year entered in line 5 is for less than 12 months, Change in accounting period  Replication of the tax year entered in line 5 is for less than 12 months, Change in accounting period  Replication of the tax year entered in line 5 is for less than 12 months, Change in accounting period  Replication of the tax year entered in line 5 is for less than 12 months, Change in accounting period  Replication of the tax year entered in line 5 is for less than 12 months, Change in accounting period  Replication of the tax year entered in line 5 is for less than 12 months, Change in accounting period  Replication of the tax year entered in line 5 is for less than 12 months, Change in accounting period  Replication of the tax year entered in line 5 is for less than 12 months, Change in accounting period	ss in the Ur t Group Exe and atta NOVEM check reas FILE RECE	FAX No.  610-656-79  Inted States, check this box	of all memb	r the wh ers the o	ole group, check to extension is for.
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business of the organization does not have an office or place of business of this is for a Group Return, enter the organization's four dignification. If it is for part of the group, check this box ▶ 1  I request an additional 3-month extension of time until 5  For calendar year 2012, or other tax year beginning 1  If the tax year entered in line 5 is for less than 12 months, 1  Change in accounting period 1  State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO CERTAIN DOCUMENTS NEEDED WERE 1  Ba If this application is for Form 990-BL, 990-PF, 990-T, 4720, nonrefundable credits. See instructions.	ss in the Ur t Group Exe and atta NOVEM check reas FILE RECE or 6069, e	FAX No. ► 610-656-79  mited States, check this box	J45  If this is to of all memb	the whers the esturn	ole group, check ti extension is for.
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business of this is for a Group Return, enter the organization's four dignification. If it is for part of the group, check this box ▶ 1 request an additional 3-month extension of time until 5 For calendar year 2012, or other tax year beginning 16 If the tax year entered in line 5 is for less than 12 months, 16 Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO CERTAIN DOCUMENTS NEEDED WERE 15 this application is for Form 990-BL, 990-PF, 990-T, 4720, nonrefundable credits. See instructions.	ss in the Ur t Group Exe and atta NOVEM  check reas  FILE RECE , or 6069, e	FAX No. > 610-656-79  Inted States, check this box	of all memb	the whers the esturn	ole group, check to extension is for.
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of business If this is for a Group Return, enter the organization's four dignitions If it is for part of the group, check this box ▶  I request an additional 3-month extension of time until For calendar year 2012, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, Change in accounting period  The state in detail why you need the extension ADDITIONAL TIME IS NEEDED TO CERTAIN DOCUMENTS NEEDED WERE  Ba If this application is for Form 990-BL, 990-FF, 990-T, 4720, nonrefundable credits See instructions.  If this application is for Form 990-PF, 990-T, 4720, or 6069 tax payments made. Include any prior year overpayment as	ss in the Ur t Group Exe and atta NOVEM  check reas  FILE RECE , or 6069, e	FAX No. > 610-656-79  Inted States, check this box	of all members  Final r  CURATE	the whers the esturn  TAX	ole group, check to extension is for.  RETURN A
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of busines If this is for a Group Return, enter the organization's four dignitions If it is for part of the group, check this box ▶  I request an additional 3-month extension of time until For calendar year 2012, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, Change in accounting period  State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO CERTAIN DOCUMENTS NEEDED WERE  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069 tax payments made. Include any prior year overpayment a previously with Form 8868.	ss in the Ur t Group Exe and atta NOVEM check reas FILE RECE , or 6069, e	FAX No. > 610-656-79  Inted States, check this box	of all memb	the whers the esturn	ole group, check to extension is for.
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of busines If this is for a Group Return, enter the organization's four dignition of the group, check this box ▶  I request an additional 3-month extension of time until For calendar year 2012, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  If the tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting period  The tax year entered in line 5 is for less than 12 months, Change in accounting the tax year entered in line 5 is for less than 12 months.  The tax year entered in line 5 is for less than 12 months.  The tax year entered in line 5 is for less than 12 months.  The tax year entered in line 5 is for less than 12 months.  The tax year entered in line 5 is for less than 12 months.  The tax year entered in line 5 is for less than 12 months.  The tax year entered in line 5 is for less than 12 months.  The tax year entered in line 5 is for less t	ss in the Ur t Group Exe and atta NOVEM check reas FILE RECE , or 6069, e	FAX No. > 610-656-79  Inted States, check this box	of all membring Final r  CURATE  8a	the whers the esturn  TAX	ole group, check to extension is for.  RETURN A  44
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of busines If this is for a Group Return, enter the organization's four dignition ▶ If it is for part of the group, check this box ▶  I request an additional 3-month extension of time until For calendar year 2012, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, Change in accounting period  State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO CERTAIN DOCUMENTS NEEDED WERE  Ba If this application is for Form 990-BL, 990-PF, 990-T, 4720, nonrefundable credits See instructions.  If this application is for Form 990-PF, 990-T, 4720, or 6069 tax payments made. Include any prior year overpayment a previously with Form 8868.  C Balance due. Subtract line 8b from line 8a. Include your payment See instructions.	ss in the Ur t Group Exe and atta NOVEM  check reas  FILE RECE , or 6069, e  d, enter any augment wit ructions.	FAX No. > 610-656-79  Inted States, check this box	of this is for this is for the second of all members of the second of th	the whers the eturn  TAX	ole group, check to extension is for.  RETURN A
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of busines If this is for a Group Return, enter the organization's four dignitions If this is for a Group Return, enter the organization's four dignitions If this is for a Group Return, enter the organization's four dignitions  If this is for a Group Return, enter the organization's four dignitions  If this is for a Group Return, enter the organization's four dignitions  If the group, check this box ▶  I request an additional 3-month extension of time until  For calendar year 2012, or other tax year beginning  If the tax year entered in line 5 is for less than 12 months,  Change in accounting period  7 State in detail why you need the extension  ADDITIONAL TIME IS NEEDED TO  CERTAIN DOCUMENTS NEEDED WERE  8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069  tax payments made. Include any prior year overpayment a previously with Form 8868.  c Balance due. Subtract line 8b from line 8a. Include your perior general tax Payment System). See inst  Signature and Verifica  Under penalties of perjury, I declare that I have examined this form, include your perior that I have examined this form, include your penalties of perjury, I declare that I have examined this form, include your penalties of perjury, I declare that I have examined this form, include your penalties of perjury, I declare that I have examined this form.	ss in the Ur t Group Exe and atta NOVEM check reas FILE RECE , or 6069, e d, enter any allowed as a cayment with ructions. tion must	FAX No.  610-656-79  Inted States, check this box	of all members of all	the whers the eturn  TAX  \$	ole group, check to extension is for.  RETURN A  44
<ul> <li>The books are in the care of ► 119 CHERRY LAN Telephone No. ► 610-656-7945</li> <li>If the organization does not have an office or place of busines of this is for a Group Return, enter the organization's four digitions ► If it is for part of the group, check this box ►</li> <li>I request an additional 3-month extension of time until 5. For calendar year 2012, or other tax year beginning 6. If the tax year entered in line 5 is for less than 12 months,</li></ul>	ss in the Ur t Group Exe and atta NOVEM check reas FILE RECE , or 6069, e d, enter any allowed as a cayment with ructions. tion must	FAX No.  610-656-79  Inted States, check this box	of all members of all	the whers the eturn  TAX  \$	ole group, check to extension is for.  RETURN A  44
The books are in the care of ▶ 119 CHERRY LAN Telephone No. ▶ 610-656-7945  If the organization does not have an office or place of busines If this is for a Group Return, enter the organization's four dignitions If this is for a Group Return, enter the organization's four dignitions If this is for a Group Return, enter the organization's four dignitions  If this is for a Group Return, enter the organization's four dignitions  If this is for a Group Return, enter the organization's four dignitions  If the group, check this box ▶  I request an additional 3-month extension of time until  For calendar year 2012, or other tax year beginning  If the tax year entered in line 5 is for less than 12 months,  Change in accounting period  7 State in detail why you need the extension  ADDITIONAL TIME IS NEEDED TO  CERTAIN DOCUMENTS NEEDED WERE  8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069  tax payments made. Include any prior year overpayment a previously with Form 8868.  c Balance due. Subtract line 8b from line 8a. Include your perior general tax Payment System). See inst  Signature and Verifica  Under penalties of perjury, I declare that I have examined this form, include your perior that I have examined this form, include your penalties of perjury, I declare that I have examined this form, include your penalties of perjury, I declare that I have examined this form, include your penalties of perjury, I declare that I have examined this form.	ss in the Ur t Group Exe and atta NOVEM check reas FILE RECE , or 6069, e d, enter any allowed as a cayment with ructions. tion must	FAX No.  610-656-79  Inted States, check this box	of all members of all	the whers the esturn  TAX  \$ \$  f my known	ole group, check to extension is for.  RETURN A  44