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Form 990-PF

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

2012

Open to Public Inspection

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

For calendar year 2012, or tax year beginning 01-01-2012, and ending 12-31-2012

Name of foundation: TACONIC FOUNDATION INC. A Employer identification number: 26-3530306. B Telephone number: (518) 537-5200. G Check all that apply: Initial return, Final return, Address change. H Check type of organization: Section 501(c)(3) exempt private foundation. I Fair market value of all assets at end of year: \$ 228,536. J Accounting method: Cash.

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12) and Operating and Administrative Expenses (13-26). Total revenue: 126,159. Total expenses: 97,874. Net investment income: 6,159.

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

Part II Balance Sheets		Beginning of year		End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash—non-interest-bearing	37,932	57,899	57,899	
	2 Savings and temporary cash investments				
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)				
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)	140,427 <input checked="" type="checkbox"/>	170,637	170,637	
	c Investments—corporate bonds (attach schedule)				
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)				
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
15 Other assets (describe ▶ _____)					
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	178,359	228,536	228,536		
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ▶ _____)				
	23 Total liabilities (add lines 17 through 22)	0	0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted	178,359	228,536		
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds				
	28 Paid-in or capital surplus, or land, bldg, and equipment fund				
	29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances (see page 17 of the instructions)	178,359	228,536			
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	178,359	228,536			

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	178,359
2	Enter amount from Part I, line 27a	2	28,285
3	Other increases not included in line 2 (itemize) ▶ _____ <input checked="" type="checkbox"/>	3	21,892
4	Add lines 1, 2, and 3	4	228,536
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	228,536

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a	See Additional Data Table			
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a	See Additional Data Table			
b				
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	2,663
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2011	92,398	171,941	0.537382
2010	104,394	133,651	0.781094
2009	99,559	125,341	0.794305
2008	0	34,230	0.000000
2007			
2	Total of line 1, column (d).		2 2.112781
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 foundation has been in existence if less than 5 years		3 0.528195
4	Enter the net value of noncharitable-use assets for 2012 from Part X, line 5.		4 214,792
5	Multiply line 4 by line 3.		5 113,452
6	Enter 1% of net investment income (1% of Part I, line 27b).		6 62
7	Add lines 5 and 6.		7 113,514
8	Enter qualifying distributions from Part XII, line 4.		8 94,105

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	123
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0
3	Add lines 1 and 2.	3	123
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	123
6	Credits/Payments		
a	2012 estimated tax payments and 2011 overpayment credited to 2012	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> 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	9	123
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2013 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? <i>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.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ <u>0</u> (2) On foundation managers <input type="checkbox"/> \$ <u>0</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ <u>0</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
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? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		No
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
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?		No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NY _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation .</i>	Yes	
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)? <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of SAMUEL W PHELAN Telephone no (518) 537-7287 Located at ONE HUDSON CITY CENTRE HUDSON NY ZIP+4 12534			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country	16		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? If "Yes," list the years 20___, 20___, 20___, 20___ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20___, 20___, 20___, 20___		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.</i>)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

<p>5a During the year did the foundation pay or incur any amount to</p> <p>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/></p> <p>c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach the statement required by Regulations section 53.4945–5(d).</p> <p>6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes" to 6b, file Form 8870.</p> <p>7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	5b	
	6b	No
	7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOSEPH W PHELAN ONE HUDSON CITY CENTRE HUDSON, NY 12534	DIRECTOR 1 00	0	0	0
SAMUEL P PHELAN ONE HUDSON CITY CENTRE HUDSON, NY 12534	DIRECTOR 1 00	0	0	0
ELLEN C PHELAN ONE HUDSON CITY CENTRE HUDSON, NY 12534	DIRECTOR 1 00	0	0	0
DAVID LESTER ONE HUDSON CITY CENTRE HUDSON, NY 12534	DIRECTOR 1 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. **0**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 _____	
2 _____	
3 _____	
4 _____	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 _____	
2 _____	
3 All other program-related investments. See page 24 of the instructions _____	

Total. Add lines 1 through 3. **0**

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	163,540
b	Average of monthly cash balances.	1b	54,523
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	218,063
e	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	218,063
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	3,271
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	214,792
6	Minimum investment return. Enter 5% of line 5.	6	10,740

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	10,740
2a	Tax on investment income for 2012 from Part VI, line 5.	2a	123
b	Income tax for 2012 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	123
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	10,617
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	10,617
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	10,617

Part 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	94,105
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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	94,105
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	94,105

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				10,617
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2012				
a From 2007.				
b From 2008.				
c From 2009.				92,910
d From 2010.				97,875
e From 2011.				84,001
f Total of lines 3a through e.	274,786			
4 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ 94,105				
a Applied to 2011, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2012 distributable amount.				10,617
e Remaining amount distributed out of corpus	83,488			
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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	358,274			
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 instructions.			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) (see instructions).	0			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a.	358,274			
10 Analysis of line 9				
a Excess from 2008.				
b Excess from 2009.				92,910
c Excess from 2010.				97,875
d Excess from 2011.				84,001
e Excess from 2012.				83,488

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling.

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a** The name, address, and telephone number of the person to whom applications should be addressed

See Additional Data Table

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

See Additional Data Table

- c** Any submission deadlines

See Additional Data Table

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

See Additional Data Table

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total				3a 94,105
b <i>Approved for future payment</i>				
Total				3b 0

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
CHARLES RIVER LABS INTL	P		
CHARLES RIVER LABS INTL	P		
MYLAN INC	P		
MYLAN INC	P		
COVANCE INC	P		
COVANCE INC	P		
SANOFI ADR	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
935		655	280
1,870		1,364	506
151		59	92
2,367		1,746	621
2,721		2,589	132
2,722		2,597	125
4,074		3,167	907

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) 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	
			280
			506
			92
			621
			132
			125
			907

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

a The name, address, and telephone number of the person to whom applications should be addressed

SAMUEL W PHELAN
ONE HUDSON CITY CENTRE
HUDSON, NY 12534
(518) 537-5200

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

THE TACONIC FOUNDATION WILL REQUIRE FROM ALL RECIPIENTS OF \$5,000 OR MORE TO SUBMIT A STATEMENT IN WRITING STATING THE AMOUNT OF SUCH DISBURSEMENT WILL BE USED ONLY IN FURTHERENCE OF THAT ORGANIZATION'S CHARITABLE PURPOSE AND WILL NOT BE USED FOR ANY PURPOSE THAT WOULD JEOPARDIZE THE TAX EXEMPT STATUS OF THAT ORGANIZATION OR THE TACONIC FOUNDATION

c Any submission deadlines

NONE

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

FOUNDATION WILL ONLY MAKE GRANTS TO QUALIFYING CHARITABLE ORGANIZATIONS DESCRIBED IN IRC SECTION 501 (C)(3), BUT NO GEOGRAPHIC, CHARITABLE FIELDS, OR TYPES OF INSTITUTION RESTRICTIONS

a The name, address, and telephone number of the person to whom applications should be addressed

JOSEPH PHELAN
ONE HUDSON CITY CENTRE
HUDSON, NY 12534
(518) 537-5200

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

THE TACONIC FOUNDATION WILL REQUIRE FROM ALL RECIPIENTS OF \$5,000 OR MORE TO SUBMIT A STATEMENT IN WRITING STATING THE AMOUNT OF SUCH DISBURSEMENT WILL BE USED ONLY IN FURTHERENCE OF THAT ORGANIZATION'S CHARITABLE PURPOSE AND WILL NOT BE USED FOR ANY PURPOSE THAT WOULD JEOPARDIZE THE TAX EXEMPT STATUS OF THAT ORGANIZATION OR THE TACONIC FOUNDATION

c Any submission deadlines

NONE

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

FOUNDATION WILL ONLY MAKE GRANTS TO QUALIFYING CHARITABLE ORGANIZATIONS DESCRIBED IN IRC SECTION 501 (C)(3), BUT NO GEOGRAPHIC, CHARITABLE FIELDS, OR TYPES OF INSTITUTION RESTRICTIONS

a The name, address, and telephone number of the person to whom applications should be addressed

NA
ONE HUDSON CITY CENTRE
HUDSON, NY 12534
(518) 537-5200

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

N/A

c Any submission deadlines

NONE

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

N/A

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AALAS FOUNDATION 9190 CRESTWYN HILLS DRIVE MEMPHIS, TN 38125	NONE	PUBLIC CHARITY	GENERAL PURPOSE	7,500
ACLAM FOUNDATION 20 MACKINNEN PLACE EAST LYNE, CT 06333	NONE	PUBLIC CHARITY	GENERAL PURPOSE	4,000
ALZHEIMER'S ASSOCIATION OF NORTHEASTERN NY 4 PINE WEST PLAZA SUITE 405 ALBANY, NY 12205	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
AMERICAN CANCER SOCIETY 260 OSBORNE RD LOUDONVILLE, NY 12211	NONE	PUBLIC CHARITY	RELAY FOR LIFE	3,080
AFSP 55 WEST 13TH STREET 2ND FLOOR NEW YORK, NY 10005	NONE	PUBLIC CHARITY	GENERAL PURPOSE	25
AMERICAN RED CROSS- NORTHEASTERN NY 33 EVERETT ROAD ALBANY, NY 12205	NONE	PUBLIC CHARITY	GENERAL PURPOSE	2,600
BERKSHIRE TACONIC COMMUNITY FOUNDATION 800 N MAIL ST PO BOX 400 SHEFFIELD, MA 01257	NONE	PUBLIC CHARITY	GENERAL PURPOSE	1,700
BIRTH TO FIVE 498 NW 18TH ST RICHMOND, IN 47375	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
BOYS & GIRLS CLUB OF WAYNE COUNTY 1717 S L ST RICHMOND, IN 47375	NONE	PUBLIC CHARITY	GENERAL PURPOSE	750
CAIRO DURHAM CENTRAL SCHOOL 424 MAIN ST CAIRO, NY 12413	NONE	PUBLIC CHARITY	GENERAL PURPOSE	150
CATHOLIC CHARITIES OF COLUMBIA & GREENE COUNTIES 431 E ALLEN ST HUDSON, NY 12534	NONE	PUBLIC CHARITY	JOANNE GRAZIANO MATCH	1,000
CENTER FOR SPECTRUM SERVICES 70 KUKUK LANE KINGSTON, NY 12401	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
CHILDREN'S MIRACLE NETWORK 205 WEST 700 SOUTH SALT LAKE CITY, UT 84101	NONE	PUBLIC CHARITY	JEFF ORTLOFF MATCH	425
CLEMONT VILLAGE GREEN EVENT COMMITTEE 1367 RT 9 TIVOLI, NY 12583	NONE	PUBLIC CHARITY	COMMUNITY EVENTS	350
COARC PO BOX 2 MELLEVILLE, NY 12544	NONE	PUBLIC CHARITY	MEMBERSHIP	1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COLUMBIA COUNTY CHAMBER OF COMMERCE FOUNDATION 1 N FRONT ST HUDSON,NY 12534	NONE	PUBLIC CHARITY	GENERAL PURPOSE	400
COLUMBIA GREENE COMMUNITY FOUNDATION 4400 ROUTE 23 HUDSON,NY 12534	NONE	PUBLIC CHARITY	SCHOLARSHIP	100
COLUMBIA GREENE HOSPITAL FOUNDATION 71 PROSPECT AVE HUDSON,NY 12534	NONE	PUBLIC CHARITY	HOSPITAL BALL	11,500
COLUMBIA GREENE HUMANE SOCIETY 125 HUMANE SOCIETY RD HUDSON,NY 12534	NONE	PUBLIC CHARITY	GENERAL PURPOSE	1,000
COMMUNITY ACTION OF GREENE COUNTY INC 7856 US HIGHWAY 9W CATSKILL,NY 12414	NONE	PUBLIC CHARITY	GENERAL PURPOSE	2,000
CROHN'S AND COLITIS FOUNDATION OF AMERICA 385 PARK AVENUE SOUTH 17TH FLOOR NEW YORK,NY 10016	NONE	PUBLIC CHARITY	GENERAL PURPOSE	110
EPILEPSY FOUNDATION OF NORTHEASTER NY 3 WASHINGTON SQUARE ALBANY,NY 12205	NONE	PUBLIC CHARITY	STROLL FOR EPILEPSY	500
FAMILY RESOURCE CENTER OF COLUMBIA COUNTY PO BOX 319 CHATHARN,NY 12037	NONE	PUBLIC CHARITY	ANNUAL APPEAL	200
FOUNDATION FOR BIOMEDICAL RESEARCH 818 CONNECITICUT AVE NW SUITE 900 WASHINGTON,DC 20006	NONE	PUBLIC CHARITY	ANNUAL APPEAL	1,000
FRIENDS OF CLERMONT 87 CLEMONT AVE GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	ANNUAL	1,000
FRIENDS OF HUDSON AREA LIBRARY ASSOCIATION 400 STATE ST HUDSON,NY 12534	NONE	PUBLIC CHARITY	ELLA BRICE MATCHING DONATION	250
FRIENDS OF ELMENDORPH 7592 RT 9 RED HOOK,NY 12571	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
GERMANTOWN CENTRAL SCHOOL 123 MAIL ST GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	ME'ISSA FUCHS LIFE SCIENCE SCHOLARSHIP	2,410
CUB SCOUT PACK 130 DEN 3 29 TAMARAC COPAKE,NY 12516	NONE	PUBLIC CHARITY	GENERAL PURPOSE	200
GERMANTOWN LIBRARY PO BOX 466 GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	FINAL PLEDGE INSTALLMENT	1,025

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GERMANTOWN STUDENT EDUCATION FOUNDATION PO BOX 533 GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	MATCHING CONTRIBUTIONS	50
GIRL SCOUT TROOP 1638 49 KILBAR RD HUDSON,NY 12534	NONE	PUBLIC CHARITY	LOCAL EVENT	100
GOLAY CENTER 1007 E MAIN ST CAMBRIDGE CITY,IN 47327	NONE	PUBLIC CHARITY	ANNUAL APPEAL	750
HABITAT FOR HUMANITY 829 ROUTE 66 HUDSON,NY 12534	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
HAGERSTOWN LITTLE LEAGUE 285 MILL STREET HAGERSTOWN,IN 47346	NONE	PUBLIC CHARITY	ANNUAL APPEAL	200
HEALTHCARE CONSORTIUM 325 COLUMBIA ST HUDSON,NY 12534	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100
HEIFER INTERNATIONAL P O BOX 727 LITTLE ROCK,AR 72203	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
HOPE HOUSE FUNDING PO BOX 38165 ALBANY,NY 12206	NONE	PUBLIC CHARITY	ANNUAL APPEAL	150
HUDSON CITY SCHOOL DISTRICT 215 HARRY HOWARD AVE HUDSON,NY 12534	NONE	PUBLIC CHARITY	SCIENCE SCHOLARSHIP AWARD	1,500
HABITAT FOR HUMANITY OF VENTURA COUNTY 121 S RICE AVE OXNARD,CA 93036	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
HARTWICK COLLEGE 1 HARDWICK DR ONEONTA,NY 13820	NONE	PUBLIC CHARITY	GENERAL PURPOSE	50
HUDSON OPERA HOUSE 327 WARREN STREET HUDSON,NY 12534	NONE	PUBLIC CHARITY	SPONSOR WINTER WALK	10,950
GERMANTOWN LIONS CLUB PO BOX 351 MAPLE AVENUE GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	GENERAL PURPOSE	1,000
GERMANTOWN SPORTSMAN ASSOCIATION PO BOX 241 MAIN STREET GERMANTOWN,NY 12526	NONE	PUBLIC CHARITY	GENERAL PURPOSE	125
KINDERHOOK RUNNERS INC PO BOX 100 KINDERHOOK,NY 12106	NONE	PUBLIC CHARITY	OK 5K	150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
IS 183 ART SCHOOL 13 WILLARD HILL ROAD STOCKBRIDGE, MA 01262	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
LASALLE INSTITUTE 174 WILLIAMS RD TROY, NY 12180	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
MAKE-A-WISH TOURNAMENT ONE MUSTANG DRIVE COHOES, NY 12047	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
MARCH OF DIMES FOUNDATION 1275 MAMRONECK AVENUE WHITE PLAINS, NY 10605	NONE	PUBLIC CHARITY	GENERAL PURPOSE	50
MELODIES CENTER FOR CHILDHOOD CANCER & BLOOD DISORDERS 43 NEW SCOTLAND AVENUE ALBANY, NY 12208	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
NORTHERN COLUMBIA LITTLE LEAGUE PO BOX 264 KINDERHOOK, NY 12106	NONE	PUBLIC CHARITY	GENERAL PURPOSE	200
NYSARC INC COLUMBIA COUNTY CHAPTER BOX 2 MELLENVILLE, NY 12544	NONE	PUBLIC CHARITY	GENERAL PURPOSE	180
OSWEGO LITTLE LEAGUE 7405 STATE RTE 104 OSWEGO, NY 13126	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
OUT OF PITS INC PO BOX 2311 ALBANY, NY 12220	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
PROJECT LINUS 414 WOLVERLEY LANE ALLEN, TX 75002	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
PARALYZED VETERANS OF AMERICA 7 MILL BROOK ROAD WILTON, NH 03086	NONE	PUBLIC CHARITY	GENERAL PURPOSE	25
REFORMED CHURCH OF GERMANTOWN ENDOWMENT FUND 20 CHURCH AVENUE PO BOX 115 GERMANTOWN, NY 12526	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
RICHMOND HIGH SCHOOL 360 HUB ETCHSON PARKWAY RICHMOND, IN 47974	NONE	PUBLIC CHARITY	TACONIC SCIENCE AWARD	1,000
REGIONAL FOOD BANK OF NORTHEASTERN NEW YORK 965 ALBANY SHAKER RD LATHAM, NY 12110	NONE	PUBLIC CHARITY	GENERAL PURPOSE	3,470
RIVERKEEPERS INC 20 SECOR RD OSSINING, NY 10562	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SALVATION ARMY PO BOX 746 HUDSON, NY 12534	NONE	PUBLIC CHARITY	SOUP KITCHEN	500
SOUTHERN COLUMBIA LITTLE LEAGUE PO BOX 324 GERMANTOWN, NY 12626	NONE	PUBLIC CHARITY	TEAM SPONSOR AND FENCE SIGN	600
SANTA TO THE SEA 3701 ORANGE DRIVE OXNARD, CA 93036	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	NONE	PUBLIC CHARITY	GENERAL PURPOSE	290
SUSAN G KOMEN 3-DAY 205 N MICHIGAN AVENUE SUITE 2630 CHICAGO, IL 60601	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100
TECH VALLEY HIGH SCHOOL 9 UNIVERSITY PLACE RENSSELAER, NY 12144	NONE	PUBLIC CHARITY	PROJECT APPEAL	750
THE COMMUNITY HOSPICE OF COLUMBIAGREENE 47 LIBERTY ST CATSKILL, NY 12414	NONE	PUBLIC CHARITY	GALA APPEAL	500
THE COLLEGE OF SAINT ROSE 432 WESTERN AVE ALBANY, NY 12214	NONE	PUBLIC CHARITY	GENERAL PURPOSE	50
THE OLANA PARTNERSHIP PO BOX 199 HUDSON, NY 12534	NONE	PUBLIC CHARITY	BUSINESS PARTNERSHHP	1,200
THE VALERIE FUND 2101 MILLBURN AVENUE MAPLEWOOD, NJ 07040	NONE	PUBLIC CHARITY	APPEAL	110
THE HOLE IN THE WALL GANG FUND 555 LONG WHARF DRIVE NEW HAVEN, CT 06511	NONE	PUBLIC CHARITY	GENERAL PURPOSE	150
TOYS FOR TOTS PO BOX 3456 SCHENECTADY, NY 12303	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
TROY DAMIEN CENTER 392 2ND STREET TROY, NY 12180	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
US COMMITTEE FOR REFUGEE & IMMIGRATION 2231 CRYSTAL DRIVE SUITE 350 ARLINGTON, VA 22202	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
USCRI ALBANY 10 RUSSELL ROAD ALBANY, NY 12204	NONE	PUBLIC CHARITY	GENERAL PURPOSE	150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VENTURA COUNTY OFFICE EDUCATION 5189 VERDUGO WAY CAMARILLO, CA 93012	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
WAKE FOREST UNIVERITY HEALTH SCIENCES MEDICAL CENTER BLVD WINSTON SALEM, NC 27101	NONE	PUBLIC CHARITY	GENERAL PURPOSE	6,150
WAMC 339 CENTRAL AVE ALBANY, NY 12206	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100
XERODERMA PIGMENTOSUM SOCIETY INC 437 SNYDERTOWN RD CRARYVILLE, NY 12521	NONE	PUBLIC CHARITY	GENERAL PURPOSE	1,000
YOUNG LIFE R125 PO BOX 520 COLORADO SPRINGS, CO 80901	NONE	PUBLIC CHARITY	GENERAL PURPOSE	25
ALBANY MEDICAL CENTER FOUNDATION 43 NEW SCOTLAND AVENUE ALBANY, NY 12208	NONE	PUBLIC CHARITY	GENERAL PURPOSE	5,000
ANIMAL FARM FOUNDATION PO BOX 624 BANGALL, NY 12506	NONE	PUBLIC CHARITY	GENERAL PURPOSE	50
ANIMAL KIND INC 721 WARREN ST HUDSON, NY 12534	NONE	PUBLIC CHARITY	GENERAL PURPOSE	275
ARMENIAN EYECARE PROJECT 729 W 16TH ST A4 NEWPORT BEACH, CA 92662	NONE	PUBLIC CHARITY	GENERAL PURPOSE	173
ASLAP 9190 CRESTWYN HILLS DRIVE MEMPHIS, TN 38125	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
AUTISM SPEAKS FOUNDATION 1 E 33RD ST NEW YORK, NY 10018	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
CAPITAL REGION CANCER SYMPOSIUM 63 STATE STREET ALBANY, NY 12207	NONE	PUBLIC CHARITY	GENERAL PURPOSE	450
CASA PACIFICA CENTER FOR CHILDREN AND FAMILIES 1722 S LEWIS RD CAMARILLO, CA 93012	NONE	PUBLIC CHARITY	GENERAL PURPOSE	700
CHATHAM PUBLIC LIBRARY 11 WOODBRIDGE AVE CHATHAM, NY 12037	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100
CLERMONT FIRE COMPANY RTE 9 GERMANTOWN, NY 12526	NONE	PUBLIC CHARITY	GENERAL PURPOSE	50

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION 6 TOWER PL ALBANY, NY 12203	NONE	PUBLIC CHARITY	GENERAL PURPOSE	627
CONNECTICUT PUBLIC BROADCASTING INC 1049 ASYLUM AVE HARTFORD, CT 06105	NONE	PUBLIC CHARITY	GENERAL PURPOSE	50
CRANE SOCCER CLUB 483 COUNTY ROUTE 46 STUYVESANT, NY 12173	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
SCIENTISTS CENTER FOR ANIMAL WELFARE 2660 NE HWY 20 SUITE 610-115 BEND, OR 97701	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
SPECIAL OLYMPICS NEW YORK INC 500 BALLTOWN RD SCHENECTADY, NY 12304	NONE	PUBLIC CHARITY	GENERAL PURPOSE	30
ST BALDRICK'S FOUNDATION 1333 SOUTH MAYFLOWER AVENUE SUITE 400 MONROVIA, CA 91016	NONE	PUBLIC CHARITY	GENERAL PURPOSE	100
TE RYU DOJO 3143 ROUTE 9 SUITE 4 VALATIE, NY 12184	NONE	PUBLIC CHARITY	GENERAL PURPOSE	750
THE FAST BREAK FUND ONE MUSTANG DRIVE COHOES, NY 12047	NONE	PUBLIC CHARITY	GENERAL PURPOSE	250
TWIN RIVER COUNCIL BSA 253 WASHINGTON AVE EXT ALBANY, NY 12205	NONE	PUBLIC CHARITY	GENERAL PURPOSE	150
ICC PTA PO BOX 130 VALATIE, NY 12184	NONE	PUBLIC CHARITY	GENERAL PURPOSE	500
Total			▶ 3a	94,105

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

Schedule of Contributors

OMB No 1545-0047

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

2012

Department of the Treasury
Internal Revenue Service

Name of the organization
TACONIC FOUNDATION INC

Employer identification number
26-3530306

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 foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
TACONIC FOUNDATION INC

Employer identification number
26-3530306

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TACONIC FARMS INC ONE HUDSON CITY CENTRE HUDSON, NY 12534	\$ 120,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization
TACONIC FOUNDATION INC

Employer identification number
26-3530306

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization
TACONIC FOUNDATION INC

Employer identification number
26-3530306

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 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 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 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
_____ _____ _____	_____ _____ _____

TY 2012 Accounting Fees Schedule

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,542	0		0

**TY 2012 Investments Corporate
Stock Schedule**

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	170,637	170,637

TY 2012 Other Expenses Schedule

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS	26	0		0

TY 2012 Other Increases Schedule

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	21,892

TY 2012 Taxes Schedule

Name: TACONIC FOUNDATION INC

EIN: 26-3530306

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NYS FILING FEE	50	0		0
FEDERAL TAX	100	0		0
FOREIGN TAX	51	0		0