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## **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

OMB No 1545-0052

Department of the Treasury

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

F	or cal	endar year 2012 or tax year beginning		08	3/29 <b>, 2012</b> ,	and endir	ng		12/3	31, 20 12
_		of foundation						Employer (dentifi	cation numb	er
	THE	FOSS FAMILY FOUNDATION						46-094615	1	
_	Numbe	er and street (or P O box number if mail is not delivered	to stre	et address)	· · ·	Room/suite	В	Telephone numb	er (see instruc	tions)
	C/0	THE AYCO COMPANY L.P NTG						(51	8) 640-	-5000
	25 I	BRITISH AMERICAN BOULEVARD						•	•	
_		town, state, and ZIP code								
	- , -						c	If exemption applica	ition is	
	T.ATI	HAM, NY 12110						pending, check here		
-		ck all that apply: X Initial return		Initial return	of a former r	ublic chari	tv -	_		
u	Cile	Final return	F	Amended ref	-	abile endir	ם ן ני	1 Foreign organizal 2 Foreign organiza		
		Address change	$\vdash$	Name change				85% test, check h	ere and attach	
	Cho	ck type of organization: X Section 501(	c)(3)					computation .		
ï	_	ection 4947(a)(1) nonexempt charitable trust		Other taxable pr		tion	E	. If private foundation		- 1
+				method. X Ca		rual	ᅱ_	under section 507(b		
'								If the foundation is under section 507(b		
	•	ear (from Part II, col. (c), line  S 299,314. (Part I.	colun	specify) nn (d) must be on	cach hacie			under section 307(b	(I)(D) CHECK HE	. P
	/			<u> </u>	Casii basis.)				(d) Disb	ursements
L	ent.	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	• •	Revenue and	(b) Net inve	I	(c)	Adjusted net	for ch	arıtable
		may not necessarily equal the amounts in	•	expenses per books	incon	ne		ıncome		poses
		column (a) (see instructions) )		299,138.	) 2.4.	į., , , i »	٠.٤	· · · · · · · · · · · · · · · · · · ·	(cash b	asis only)
	1	Contributions, gifts, grants, etc., received (attach schedule) .  If the foundation is <b>not</b> required to		299, 130.	£ 1			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	- Falsaka	
0	2	Check ► attach Sch B	, w <sup>1</sup>	*,	<u> </u>	~ · · · · · · · · ·	5 ž ×	<u> </u>	1 (0 A A T ) .	- 10 m
5	3	Interest on savings and temporary cash investments						<del></del>	1 X. W 1 A	(* * * * * * * * * * * * * * * * * * *
<del>1</del> 4	4	Dividends and interest from securities				-			4, 7	- 1 ( · · · · · · · · · · · · · · · · · ·
3 ·	l	Gross rents	3 × **		404	V 842.	30 7 200	Mark to the	5 7h	1 25 km 2 5
,	1	Net rental income or (loss)	, 3	<u> </u>			907 - 57		A Since Deliver	
≋	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	*	S. 1 (1) x 3 x	177 fly 265			200	1 2 2 2 2 2 2	* . W.
ANNESSER		assets on line 6a	4/3		1 2 3 3 3 3			EVED	<b>3</b>	
۱é	7	Capital gain net income (from Part IV, line 2).	1.75	·	V 1 V .		ZEL	3 (M	0	
Z	8	Net short-term capital gain	ેટ પ્રસ્	The state of the s			<del>~</del>	- 5 70 <del>13</del>	\ <del>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>	\$ 3322 F
=	9	Income modifications Gross sales less returns			## The second se	101	<del>lla.</del>	3/2 5 2 2 3	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7 377,5
$\mathbf{O}$		and allowances · · · ·	15 Jan. 1844		20 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10	. Nove		87,1 1000	* _ \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
ď.		Less Cost of goods sold .	15.		Contract Asset		~~	3DEN UT		CARA I
	1	Gross profit or (loss) (attach schedule)			, » » » » » » » · · · · · · · · · · · ·		<u> Uy</u>	30-	* ************************************	
	11	Other income (attach schedule)		299,138.					,,,,,	- ×10
_	12	Total. Add lines 1 through 11		233,130.						
	13	Compensation of officers, directors, trustees, etc								
Se	14	Other employee salaries and wages			-					
žns.	15	Pension plans, employee benefits			<del> </del>		-			
χDE	16 a	Legal fees (attach schedule)					<del></del>			
E E	14 15 16 a b c 17 18 19	Accounting fees (attach schedule)					·	<del> </del>	-	
Ě	C	Other professional fees (attach schedule)	<b></b>	<del></del> -	<b> </b>				1	
itra	17	Interest		<del></del>					<del> </del>	<del></del>
nis	18	Taxes (attach schedule) (see instructions)							-	
Ē	19	Depreciation (attach schedule) and depletion.	ļ							
		Occupancy								
and	21	Travel, conferences, and meetings							<del> </del>	
a	22	Printing and publications	ļ				<del></del>		<del> </del>	
Operating	23	Other expenses (attach schedule)							1	
era	24	Total operating and administrative expenses.		-	]					
å	+	Add lines 13 through 23	<b></b>		1					
J	25	Contributions, gifts, grants paid				·	<i>.</i> ``			
_	26	Total expenses and disbursements Add lines 24 and 25			<b> </b>					
	27	Subtract line 26 from line 12	}	-		,		3		
	a	Excess of revenue over expenses and disbursements		299,138.					ļ	<u> </u>
	Ь	Net investment income (if negative, enter -0-)				0			, , ,	
		Adjusted net income (if negative, enter -0-)							<u> </u>	`

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	A (1)	Balanca Chasta	Attached schedules and amounts in the	Beginning of year	E	End of	f year
į	art II	Balance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1 (	Cash - non-interest-beari	ing				
<b>'</b>	2	Savings and temporary	cash investments				
ļ	3 /	Accounts receivable		and we what you the last last	* * * * * * * * * * * * * * * * * * *	2	128 M
			btful accounts ▶		* * * * * * * * * * * * * * * * * * * *	١ ١	
	4 1	Pladaes receivable	Ditti accounts P	Y make it is a little to	\$ 845 A 1 W		) . "
	4 (	leages receivable	btful accounts ▶	The same of the sa	* * * * * * * * * * * * * * * * * * *		I was the state of
					_	$\dashv$	
						$\dashv$	
			officers, directors, trustees, and other				
			tach schedule) (see instructions)		1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	747	I TO THE STATE OF
			receivable (attach schedule)		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1,200	All the second of the second o
			btful accounts ►		_		
ssets			se			$\longrightarrow$	
SS		•	leferred charges				
∢			e government obligations (attach schedule).		215.4		000 01
	b l	Investments - corporate	e stock (attach schedule) ATCH 1		215,4	91.	299,314
	, C 1	Investments - corporate	e bonds (attach schedule)	N	A		80/4 / N N N N N N N N N N N N N N N N N N
	11	Investments - land, building: and equipment basis	s,			334	Marking of
		Less accumulated deprecia (attach schedule)	ation				
			loans				
	13	Investments - other (atta	ach schedule)				
	14	Land, buildings, and equipment basis	. •	A STATE OF THE STA			
		Less accumulated deprecia (attach schedule)	ation				
	15	Other assets (describe	<b>&gt;</b> )				
			completed by all filers - see the				
			page 1, item I)		215,4	91.	299,314
	17	Accounts payable and a	accrued expenses				
Š							LANGER WAR BE
≝	1		ors, trustees, and other disqualified persons	1			
Liabilities			otes payable (attach schedule)				the solid to the way to the solid
ڐ	1		e ▶)				
		0 11/01 11/02/11/05 (40001101	• •/			$\neg \neg$	
	23	Total liabilities (add line	es 17 through 22)	C	)	o	
_	1		llow SFAS 117, check here ▶				
"	1		24 through 26 and lines 30 and 31.				
ces	ŀ		-				
lan	25			-			S. W. 375 ( 4 1 2 1 2 1
ä	26						
p	20	•					
Assets or Fund Balanc		check bere and com	o not follow SFAS 117, nplete lines 27 through 31. ► X				, , , , , , , , , , , , , , , , , , , ,
ō	27		ncipal, or current funds	1	215,4	91.	, , , , ,
ets	27						
SS	28		or land, bldg , and equipment fund				*
		• •	ulated income, endowment, or other funds		215,4	91.	, , ,
Net	30		d balances (see instructions)		213/1	<u></u>	•
	31		net assets/fund balances (see	1	215,4	0.1	٠
			anges in Not Assets or Fund		213,4	<u> </u>	
			anges in Net Assets or Fund		(		<del>1</del>
1			palances at beginning of year - Part			_	
			d on prior year's return)			1	299,138
		amount from Part I,				2	299,138
						3	299,138
4	Add !	ines 1, 2, and 3	i line 2 (itemize) ▶ ATCH 2		<u>.</u> -	4	
5	Decr	eases not included in	i line 2 (itemize) ► ATCH 2			5	83,64
6	Total	net assets or fund be	alances at end of year (line 4 minus	line 5) - Part II, column (I	b), line 30	6	215,49

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Pa	rt IV Capital Gains	and Losses for Tax on Inv	vestment Income	<b>76</b> 7 (1) - 1		
		d describe the kind(s) of property sold rick warehouse, or common stock, 200		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr )
la						
b				ļ		
Ç				ļ		
d				ļ		
е				<u> </u>		<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
a						
b					<del> </del>	
С				-		
d			-	<del>                                     </del>		
e						<del></del>
	Complete only for assets	showing gain in column (h) and own		(1)	Gains (Col (h) g (k), but not less	ain minus
	(i) F M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	Coi	Losses (from co	
а				<del> </del>		
b			<del> </del>	<del> </del>		
C			-			
d			<del> </del>	-		
е			Parling 7	<del> </del>		
	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		
		n or (loss) as defined in sections 1				
	<u> </u>		structions). If (loss), enter -0- in	.		
		<u> </u>		3		
			educed Tax on Net Investment he section 4940(a) tax on net invest		<del></del>	
Wa		Tod vo tino part blank.	TO AVAILABLE FOR INITIAL		_	Yes No
_				a any antr	200	
	(a)		ar; see the instructions before makin	ig any entr	(d)	
_C	Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution (col (b) divided b	
	2011			<del> </del>		
	2010			1		
	2009					
	2008					
_	2007			<del>                                     </del>		
2	Total of line 1, column (d)	)		2	· · · · · · · · · · · · · · · · · · ·	
J	•		ss than 5 years	3		
4	Enter the net value of nor	ncharitable-use assets for 2012 fi	rom Part X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distributions  If line 8 is equal to or gr	ons from Part XII, line 4	ın Part VI, line 1b, and complete	8 that part	using a 1% ta	x rate See th

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

10 X Form **990-PF** (2012)

10

addresses

ATCH 3

	990-FF (2012)		<del>'</del>	age 3
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	-	Х	
	N/A			
14		-500	0	
14	The books are in care of ► THE AYCO COMPANY LP - NTG Telephone no Located at ►25 BRITISH AMERICAN BOULEVARD LATHAM, NY ZIP+4 ► 12110			
45	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\Box$
15			–	
	<u> </u>	_	Yes	No
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority	ا مد ا	163	X
	over a bank, securities, or other financial account in a foreign country?	16	5 34 2 ·	
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of	3.00	, š. ~ ~ 3, <sub>8</sub> , * ^	\$
	the foreign country		(16 ×1)	
Pal	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			•
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	8.2	- 1 m	7.3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		ا ما دی اور ادر شام ا	د کی
	disqualified person?	200	27 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1," High 15"
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1.35	4, 44 . 180	7.19
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	218		1.3
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	3, 3		10 miles
	the benefit or use of a disqualified person)?			36.
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	**************************************	34.7	
	foundation agreed to make a grant to or to employ the official for a period after	10	- \$ \$ e.s.	13/36
	termination of government service, if terminating within 90 days.)	18.	473	الأنتواطية ا والأنتواطية ا
Ŀ	of If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		33.4	5,7°
-	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	-	
	Organizations relying on a current notice regarding disaster assistance check here	7.0	1,11	
,	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			* 2."
Ì	were not corrected before the first day of the tax year beginning in 2012?	1c	. x.,	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	y	Su ten	3 3
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	- 12		1
_	a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and	1	s à	1 5 mg
•		1 75	1	1 3
	te, Fart All) for tax year(s) beginning belofe 2012	ξ.		1
	If "Yes," list the years     And the years	* 13	,	* 3
ı	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	٠.	`	, , ,
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	· `	V."	x
	all years listed, answer "No" and attach statement - see instructions.)	2b	<del>  ,</del>	Α.
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		~ ~	·,
	<b></b>		* * *	
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			٨,
	at any time during the year?		" 4, 1	4
ı	b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or		1 4	/A
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		, "w	20
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		ļ	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		, °	, ,
	foundation had excess business holdings in 2012 )	3b	L	
4 8	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	L	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	}		-
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		X

Pa	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (contir	nued)			
5 a	During the year did the foundation pay or incur any amou	int to		<u> </u>	•			
	(1) Carry on propaganda, or otherwise attempt to influen	nce legislation (section	4945(e))?	Yes	X No	-		
	(2) Influence the outcome of any specific public ele	ction (see section 4	955), or to carry or	n.			ÌÌ	
	directly or indirectly, any voter registration drive?	•	•		X No	. \$1,	. ,	* .*
	(3) Provide a grant to an individual for travel, study, or ot				X No	1 7.	· .	
	(4) Provide a grant to an individual for flaver, study, or off							
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5	-			X No	``.'	3.0	٠, ٠
					NO	J.	2 2	29
	(5) Provide for any purpose other than religious, ch		•		X No		1,00	120
	purposes, or for the prevention of cruelty to children of							
b	If any answer is "Yes" to 5a(1)-(5), did any of the			xceptions de	scribed in	7, 5, 5	-* "E"	5, 15. 12.
	Regulations section 53 4945 or in a current notice regard	-		<i></i>		5b	'n sår	~
	Organizations relying on a current notice regarding disast			•	▶	``;;;;::::		Mari
С	If the answer is "Yes" to question 5a(4), does the				r1			
	because it maintained expenditure responsibility for the g	rant?		. Yes	No	1. 1.		# 1
	If "Yes," attach the statement required by Regulations sec	tion 53.4945-5(d)				1,	1909	, , , , ,
6a	Did the foundation, during the year, receive any fund	•		s			34.	
	on a personal benefit contract?			. Yes	X No	,,,1	ž	., ;
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a p	personal benefit contrac	ct?		6b		X
	If "Yes" to 6b, file Form 8870					1.33.4	25	30 1
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction? .	. Yes	X No	\$3× &4.	5. 7. 8. \ 2. 8. \	الغررها
b	If "Yes," did the foundation receive any proceeds or have				<u> </u>	7b		
Pa	t VIII Information About Officers, Directors	s, Trustees, Found	dation Managers,	Highly Pai	id Emplo	yees,		
1	and Contractors  List all officers, directors, trustees, foundation r	managers and their	compensation (see	instruction	s).			
	(a) Name and address	(b) Title, and average	(c) Compensation (If not paid,	(d) Contribu	itions to	(e) Expens	se accou	ınt,
	(a) Name and address	hours per week devoted to position	enter -0-)	employee ber and deferred co		other al	lowance 	s
ATO	CH 4		C	1	<u>q</u>			0
			-				_	
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on lin	e 1 - see	instructio	ons). If n	one,	enter
ſ	i) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribi	benefit	(e) Expen		
		devoted to position		plans and compens		other al	iowance	S
	NONE							
							_	
		l		1				
			<del></del>					
		····						

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Form 990-PF (2012)		Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manage and Contractors (continued)	ers, Highly Paid Employe	ees,
3 Five highest-paid independent contractors for professional services (see instruc	tions). If none, enter "NONE.	II
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inforganizations and other beneficiaries served, conferences convened, research papers produced, etc.	ormation such as the number of	Expenses
1 PLEASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY DIREC	CT	
CHARITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SUPPORT	· ,	
BY CONTRIBUTIONS, OTHER CHARITABLE ORGANIZATIONS EXEMPT		
2 UNDER INTERNAL REVENUE CODE SECTION 501(C)(3).		
3		
·		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	!	Amount
1 NONE		
2		
All other program-related investments. See instructions		
3 NONE		
Total. Add lines 1 through 3	<u> </u>	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundations,	<u></u>
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
	purposes:	1.36	
а	Average monthly fair market value of securities	1a	299,314.
h	Average of monthly cash balances		233,021.
c	Fair market value of all other assets (see instructions)	1c	
Ч	Total (add lines 1a, b, and c)	1d	299,314.
	Reduction claimed for blockage or other factors reported on lines 1a and		
·	· · · · · · · · · · · · · · · · · · ·		
2	1c (attach detailed explanation)  Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	299,314.
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	3	233,311.
7		4	4,490.
5	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	294,824.
6	Minimum investment return. Enter 5% of line 5	6	443.
	Int XI. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	0	443.
ĮΓC	foundations and certain foreign organizations check here $\blacktriangleright$ and do not complete this	part)	
1	Minimum investment return from Part X, line 6	1	443.
2a	Tax on investment income for 2012 from Part VI, line 5	× 5 42	
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	443.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		443.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		<del></del>
	line 1	7	443.
.F.6	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1200	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	Serve .	
а	Suitability test (prior IRS approval required)	3a	
þ	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	
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	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years.	lculating whether t	he foundation

Form 990-PF (2012) Page 9

Pa	rt XIII Undistributed Income (see instru	ictions)			
1	Distributable amount for 2012 from Part XI,	(a) Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	( <b>d)</b> 2012
•	line 7	y	1, 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		443.
2 a	Undistributed income, if any, as of the end of 2012  Enter amount for 2011 only				* * * * * * * * * * * * * * * * * * *
h	Total for prior years 20 10 ,20 09 ,20 08			\$ 181 JULY 1975	10 July 10 Jul
3	Excess distributions carryover, if any, to 2012		W. 1972 W. 1972 W. 1973		8 - X 14 - CA 14 4
a	From 2007				
b	From 2008				
С	From 2009				
d	From 2010				
е	From 2011				
f	Total of lines 3a through e		63 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
4	Qualifying distributions for 2012 from Part XII,				
	line 4 ▶ \$			a Markettanin -	
а	Applied to 2011, but not more than line 2a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Mark 10 2	77 347 37 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2012 distributable amount		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		W / Career Care
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same		, w , ½ , 5 , 7 , 7 , 7 , 7 , 7 , 7 , 7 , 7 , 7		_ 3, 4, 5, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,
6	amount must be shown in column (a) ) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2011 Subtract line 4a from line 2a. Taxable amount - see instructions				
f	Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				443.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2013.		*		
	Subtract lines 7 and 8 from line 6a	(		William Control	^
10	Analysis of line 9		1	·	
а	Excess from 2008				· · ·
b	Excess from 2009				
C	Excess from 2010				
d					, , ,
е	Excess from 2012	+ 12 th 12 th 1	1 * * * * * * * * * * * * * * * * * * *	1 - 3 -	

The name, address, and telephone number or e-mail of the person to whom applications should be addressed:

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

Any submission deadlines:

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

Part XV S	upplementary Information (	continued)			
3 Grants a	nd Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
	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
	d address (home or business)	or substantial contributor	recipient	contribution	
a Paid durin	g the year				
	j				
				15	
		l			
Total	<u> </u>		<u> </u>	▶ 3a	
<b>b</b> Approved	f for future payment				
				<u> </u>	
Total .				▶ 3b	

Page 12

rt XVI-A Analysis of Income-Product gross amounts unless otherwise indicated	·— ··· · · · · · · · · · · · · · · · ·	ated business income	Excluded by	y section 512, 513, or 514	(e)
-	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
Program service revenue			Encidencial social		(See instructions)
a b					
		<u> </u>			
c					
e					—·—
g Fees and contracts from government agencies					
Membership dues and assessments		7-		, ,,,,,,	
Interest on savings and temporary cash investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate:	mai Ta	ことは、一般におりた。		Figures and Affect	
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property .					
Other investment income					
Gain or (loss) from sales of assets other than inventor	/				
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory . $$ .					
Other revenue a					
b					
c					
			1		
d					
	culations)			13	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated XVI-B Relationship of Activitie  ne No. Explain below how each activities.	culations) s to the Ac	complishment of E	xempt Purp	ooses  of Part XVI-A contrib	uted importantly to t
e Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify callert XVI-B Relationship of Activities ne No. Explain below how each activities	culations) s to the Ac	complishment of E	xempt Purp	ooses  of Part XVI-A contrib	uted importantly to t
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated XVI-B Relationship of Activitie  ne No. Explain below how each activities.	culations) s to the Ac	complishment of E	xempt Purp	ooses  of Part XVI-A contrib	uted importantly to t
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated XVI-B Relationship of Activitie  ne No. Explain below how each activities.	culations) s to the Ac	complishment of E	xempt Purp	ooses  of Part XVI-A contrib	uted importantly to t
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activitie  ne No. Explain below how each activities	culations) s to the Ac	complishment of E	xempt Purp	ooses  of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activitie  ne No. Explain below how each activities	culations) s to the Ac	complishment of E	xempt Purp	ooses  of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activitie  ne No. Explain below how each activities	culations) s to the Ac	complishment of E	xempt Purp	ooses  of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activitie  ne No. Explain below how each activities	culations) s to the Ac	complishment of E	xempt Purp	ooses  of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activitie  ne No. Explain below how each activities	culations) s to the Ac	complishment of E	xempt Purp	ooses  of Part XVI-A contrib	uted importantly to t

Part	XVII	Information R	egarding Tr	ansfers To an		ions an	nd Relationships With Nor	nchari		ge 13
		Exempt Orgai			. f. t. p f. all a					
							ny other organization described section 527, relating to political		Yes	No
		rations?	de (other than	section 50 r(c)(3	o) organization	15) 01 111 3	section 327, relating to political	1.0	»,\	
	_	ers from the reportir	a foundation to	a noncharitable	evemnt organ	nization of	f•	- 23 27	K 76	. , .
		•	-		• -			1a(1)	. · · · ·	x
								1a(2)		X
		ransactions:								
	-		ncharitable exe	mpt organization						ľ x ¯
										X
								1b(3)		X
								1b(4)		X
								1b(5)		X
(	( <b>6</b> ) Per	formance of service	s or members	hip or fundraising	solicitations .			1b(6)		X
										<u> </u>
							Column (b) should always sho			
							. If the foundation received less			
			1				of the goods, other assets, or			_
(a) Lin	e no	(b) Amount involved	(c) Name of	noncharitable exempt	t organization	· · ·	scription of transfers, transactions, and sh	aring arra	ngeme	nts
		N/A				N/A				
		<del></del>		<del> </del>		<del> </del>				
			<del> </del>	<del></del>			<del>_</del>			
						1				
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	~		<u> </u>		· · ·	<del>                                     </del>				
			<u> </u>			<del>                                     </del>	<del></del>			
	-+						_			
			<del></del>			1				**********
		•	•				ore tax-exempt organizations			
		ped in section 501(c	•	other than section	n 501(c)(3)) or	'in sectio	on 527?	Y	es LX	No [
<u>b</u>	<u>If "Yes</u>	," complete the follo		43.7			(a) Daniel de la contraction d			
		(a) Name of organization	ın	(D) Type	of organization		(c) Description of relation	nsnip		
								-		
	Under	r penalties of perjury, I deci	are that I have exan	nined this return, includ	ling accompanying s	chedules and	d statements, and to the best of my knowles any knowledge	dge and I	belief, it	is true
Sign	correc	ct and complete Declaration of	preparer (other than	taxpayer) is based on all	information of which	preparer has				
Here		$\langle -1 \rangle$ -	<del></del>	17/2	20//3			RS discus preparer		retum below
		nature of officer or trustee	,	Date		Title	(see instructi		Yes	No
		U	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		•					
Paid		Print/Type preparer's	name	Preparer's sig	ſ <u>-</u>		Date Check If	PTIN		
		DAVID OPPEDIS		ward y	Oppelisan	~ე	7/23/13 self-employed			29_
Prep	arer	Firm's name ► TE	HE AYCO CO	MPANY, LP <b>√</b>	<u> </u>		Firm's EIN ▶ 33-	11874	32	

ALBANY, NY

Use Only Firm's address ▶ PO BOX 15014

12212-5014 Phone no 518-640-5000

#### Schedule B

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

Name of the organization	INDA TI ON	Employer identification number				
THE FOSS FAMILY FO	UNDATION	46-0946151				
Organization type (check o	ne):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	private foundation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a priva	rate foundation				
	501(c)(3) taxable private foundation					
	on filing Form 990, 990-EZ, or 990-PF that received, during the yea by one contributor Complete Parts I and II.	ar, \$5,000 or more (in money or				
Special Rules						
under sections 50	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % 09(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, and II.	r, during the year, a contribution of				
during the year, t	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 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III					
during the year, of not total to more year for an <i>exclus</i> applies to this org	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 <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year					
990-EZ, or 990-PF), but it n	at is not covered by the General Rule and/or the Special Rules doe nust answer "No" on Part IV, line 2 of its Form 990, or check the bo 0-PF, to certify that it does not meet the filing requirements of Schee	ox on line H of its Form 990-EZ or on				

JSA

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

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

Name of organization THE FOSS FAMILY FOUNDATION

Employer identification number 46-0946151

(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
1 _	ERIC J. FOSS  C/O THE AYCO COMPANY L.P.  LATHAM, NY 12110		Person X Payroll X Noncash X  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2 _	ERIC J. FOSS  C/O THE AYCO COMPANY L.P.  LATHAM, NY 12110		Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

 Payroll Noncash
(Complete Part II if there is a noncash contribution)

Person

Person Payroll Noncash

Person Payroll Noncash

(Complete Part II if there is a noncash contribution.)

(d) Type of contribution

(Complete Part II if there is a noncash contribution)

(d)

Type of contribution

(a)

No.

(a)

No.

(b)

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

(c)
Total contributions

(c)

**Total contributions** 

Name of organization THE FOSS FAMILY FOUNDATION

Employer identification number 46-0946151

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
1_	VARIOUS PUBLICLY TRADED SECURITIES		
		\$\$.	_12/21/2012
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
22_	VARIOUS PUBLICLY TRADED SECURITIES		
		\$\$.	_12/24/2012
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	

Name of organization THE FOSS FAMILY FOUNDATION

Employer identification number 46-0946151

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.) >\$

	Jse duplicate copies of Part III if addition		
(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	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(-),pool or g		(4, 2224)
Part I			
Part I	(2) 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Part I			
Part I		(e) Transfer of gift	
Part I	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
Part I		(e) Transfer of gift	
Part I		(e) Transfer of gift	
Part I		(e) Transfer of gift	
(a) No. from Part I		(e) Transfer of gift	
(a) No.	Transferee's name, address, and	(e) Transfer of gift  ZIP + 4	Relationship of transferor to transferee
(a) No.	Transferee's name, address, and	(e) Transfer of gift  ZIP + 4	Relationship of transferor to transferee
(a) No.	Transferee's name, address, and	(e) Transfer of gift  ZIP + 4  (c) Use of gift	Relationship of transferor to transferee
(a) No.	Transferee's name, address, and	(e) Transfer of gift  ZIP + 4	Relationship of transferor to transferee
(a) No.	Transferee's name, address, and	(e) Transfer of gift  ZIP + 4  (c) Use of gift  (e) Transfer of gift	Relationship of transferor to transferee
(a) No.	Transferee's name, address, and  (b) Purpose of gift	(e) Transfer of gift  ZIP + 4  (c) Use of gift  (e) Transfer of gift	Relationship of transferor to transferee  (d) Description of how gift is held
(a) No.	Transferee's name, address, and  (b) Purpose of gift	(e) Transfer of gift  ZIP + 4  (c) Use of gift  (e) Transfer of gift	Relationship of transferor to transferee  (d) Description of how gift is held

DESCRIPTION

ENDING BOOK VALUE

299,314. ENDING FMV

GS #632-9

215,491. 215,491.

299,314.

ATTACHMENT 2

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

<u>DESCRIPTION</u> <u>AMOUNT</u>

APPRECIATION/DEPRECIATION OVER

83,647.

DONOR'S COST

TOTAL

83,647.

20001422F1

	1	. 1
CONTRIBUTORS	DIRECT	SUPPORT
- NEW SUBSTANTIAL		DATE
S E Z		
1		
2		
, LINE IO		
VII-A,		
, PAKT VII-A		AND ADDRESS
Į.		AD
M SOUPE,		AND
됩		Æ

DATE ERIC J. FOSS C/O THE AYCO COMPANY L.P. LATHAM, NY 12110 NAME AND ADDRESS

12/21/2012

254,291.

254,291.

ATTACHMENT 3

ATTACHMENT 4

Ç

AND TRUSTEES
DIRECTORS,
LIST OF OFFICERS,
IST OF
- I
PART VIII
PART
990PF,
FORM 9

£ .	0	0
EXPENSE ACCT AND OTHER ALLOWANCES		
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0
COMPENSATION	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 1.00	GRAND TOTALS
NAME AND ADDRESS	ERIC J. FOSS C/O THE AYCO COMPANY L.P NTG 25 BRITISH AMERICAN BOULEVARD LATHAM, NY 12110	

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## Form 8868

(Rev January 2013)

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

OMB No 1545-1709

Department of the Treasury File a separate application for each return. Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs.gov/efile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print THE FOSS FAMILY FOUNDATION 46-0946151 File by the Number, street, and room or suite no. If a PO box, see instructions. Social security number (SSN) due date for C/O THE AYCO COMPANY L.P. - NTG filing your return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions LATHAM, NY 12110 4 Enter the Return code for the return that this application is for (file a separate application for each return) . . . . . . . . . . . . **Application** Return Return **Application** is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 02 Form 1041-A 08 Form 990-BL 03 Form 4720 09 Form 4720- (individual) Form 5227 Form 990-PF 04 10 Form 6069 11 Form 990-T (sec 401(a) or 408(a) trust) 05 12 Form 990-T (trust other than above) 06 Form 8870 The books are in the care of ▶ THE AYCO COMPANY LP - NTG

7	elephone No. ► 518 640-5000 FAX No. ►			
• l:	the organization does not have an office or place of business in the United States, check this box		▶	
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		If this is	
or	the whole group, check this box ▶ 🔃 . If it is for part of the group, check this box ▶ 🗌		and attach	
	st with the names and EINs of all members the extension is for.			
1	I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time			
	until08/15 , 20 13 , to file the exempt organization return for the organization named at	ove	e. The extensio	n IS
	for the organization's return for:			
	▶ calendar year 20 or			
	$\blacksquare$ tax year beginning 08/29, 2012, and ending 12/31,	20_	12	
2	If the tax year entered in line 1 is for less than 12 months, check reason. X Initial return Final return	า		
	Change in accounting period			
За	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions.	За	\$	0
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			
	estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
С	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS			
	(Electronic Federal Tax Payment System) See instructions	3с	\$	0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2013)