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Department of the Treasury

Internal Revenue Service

DLN: 93491123002413

OMB No 1545-0052

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

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

Open to Public Inspection

For	cale	endar year 2012, or tax ye	ar beginning 01-	01-2012 , and	d end	ling 12-31-	2012			
		undation				A Employer id	entification numbe	er		
Pra	axis Fol	undation				54-2133110				
Num	ber and	d street (or P O box number if mail is not	delivered to street address	s) Room/suite		<b>B</b> Telephone nu	mber (see instruction	าร)		
		n Source 501 Silverside Rd		, , , , , , , , , , , , , , , , , , , ,		(800) 839-1754	ļ.			
		n, state, and ZIP code DE 198091377				<b>C</b> If exemption	application is pendin	g, check here 🕨 🦵		
			<u> </u>							
GC	neck a	all that apply   Initial return   Final return   Address chang	A mended retu	f a former public cha rn	rity	<b>2.</b> Foreign o	ganizations, check hor ganizations meeting e and attach comput	the 85% test,		
<b>H</b> Ch	eck ty	ype of organization		ate foundation						
<u> </u>	ection	1 4947(a)(1) nonexempt charitable	e trust Cother taxa	able private foundation	n					
		<b>_</b>	Accounting method	Cash Acc	rual		ındatıon status was t n 507(b)(1)(A), chec			
		from Part II, col. (c), :\$ 2,010,879	Other (specify) (Part I, column (d) musi	_ t he on cash hasis )			ation is in a 60-mont			
	rt I	Analysis of Revenue an		<u> </u>		under sectio	n 507(b)(1)(B), chec	(d) Disbursements		
		total of amounts in columns (b), (c), necessarily equal the amounts in colu instructions))	and (d) may not	(a) Revenue and expenses per books	(b) N	let investment income	(c) Adjusted net income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , receive	ed (attach schedule)	64,712						
	2	Check F rif the foundation is <b>not</b> rec	quired to attach Sch B							
	3	Interest on savings and tempora	ry cash investments							
	4	Dividends and interest from secu	urities	32,986		32,986				
	5a	Gross rents								
	ь	Net rental income or (loss)								
Reveirue	6a	Net gain or (loss) from sale of as	sets not on line 10	45,101						
	ь	Gross sales price for all assets on line 6a	a508,545							
á	7	Capital gain net income (from Pa	rt IV, line 2)			45,101				
<u> </u>	8	Net short-term capital gain								
	9	Income modifications								
	10a	Gross sales less returns and allowances								
	Ь	Less Cost of goods sold								
	_ c	Gross profit or (loss) (attach sch Other income (attach schedule)								
	11 12	Total. Add lines 1 through 11 .		142,799		78,087				
	13	Compensation of officers, director		1+2,733		70,007				
	14	Other employee salaries and way								
φ	15	Pension plans, employee benefit								
Expenses	16a	Legal fees (attach schedule).								
<u>A</u>	ь	Accounting fees (attach schedul		-						
	c	Other professional fees (attach s	schedule)	<b>%</b> 17,886		17,886				
and Administrative	17	Interest								
¥	18	Taxes (attach schedule) (see instruction	ns)	2,107		808				
=	19	Depreciation (attach schedule) a	and depletion							
듣	20	Occupancy								
7	21	Travel, conferences, and meeting	gs							
	22	Printing and publications								
Operating	23	Other expenses (attach schedule		11,549		58		11,49:		
er at	24	Total operating and administrati	-							
ă		Add lines 13 through 23				18,752		11,49		
_	25	Contributions, gifts, grants paid.		165,071		.c ==:		165,07:		
	26	Total expenses and disbursements.	Add lines 24 and 25	196,613		18,752		176,562		
	27	Subtract line 26 from line 12	and dishursans	E2 044						
	a	Excess of revenue over expenses  Net investment income (if negations)		-53,814		59,335				
	b	Adjusted net income (if negative				37,333				

Savings and temporary cash investments  $\dots \dots$ 

2

70,195

(c) Fair Market Value

End of year

70,195

(b) Book Value

154,282

	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)					
2		Less allowance for doubtful accounts 🕨					
Asset	8	Inventories for sale or use					
4	9	Prepaid expenses and deferred charges					
	10a	Investments—U S and state government obligations (attach schedule)		<u> </u>			
	b	Investments—corporate stock (attach schedule)		5 %	1,204,888	1,44	40,684
	С	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)		1			
	14	Land, buildings, and equipment basis 🟲					
		Less accumulated depreciation (attach schedule)					
	15	Other assets (describe 🟲)	500,00	0 953	500,000	50	00,000
	16	Total assets (to be completed by all filers—see the					
		ınstructions Also, see page 1, item I)	1,828,89	7	1,775,083	2,01	10,879
	17	Accounts payable and accrued expenses					
	18	Grants payable		-			
abilities	19	Deferred revenue					
	20	Loans from officers, directors, trustees, and other disqualified persons		-			
뵬	21	Mortgages and other notes payable (attach schedule)					
コ	22	Other liabilities (describe 🟲)					
	23	Total liabilities (add lines 17 through 22)			0		
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
ės	24	Unrestricted					
일	25	Temporarily restricted					
Fund Balance	26	Permanently restricted					
<u>=</u>		Foundations that do not follow SFAS 117, check here 🕨 🔽					
Ξ		and complete lines 27 through 31.					
2	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
Assets	29	Retained earnings, accumulated income, endowment, or other funds	1,828,89	7	1,775,083		
	30	Total net assets or fund balances (see page 17 of the					
Š		ınstructions)	1,828,89	7	1,775,083		
	31	Total liabilities and net assets/fund balances (see page 17 of					
		the instructions)	1,828,89	7	1,775,083		
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances					
<u></u>		Total net assets or fund balances at beginning of year—Part II, column	(a) line 30 (must	agroo			
-		with end-of-year figure reported on prior year's return)			. 1	1,828	.897
2		Enter amount from Part I, line 27a			. 2		,814
3		Other increases not included in line 2 (itemize)			3		
4		Add lines 1, 2, and 3			. 4	1,775	,083
5		Decreases not included in line 2 (itemize) ►			5	, -	-
6		Total net assets or fund balances at end of year (line 4 minus line 5)—		line 30	. 6	1,775	,083
					For	m <b>990-PF</b> (2	012)

	e the kınd(s) of property sold (e g , re house, or common stock, 200 shs M	( <b>b</b> ) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1a Publicly-traded Sec	urities				
b					
С					
d					
е				<u> </u>	
(e) Gross sales price	(f) Depreciation allowe (or allowable)	107	t or other basis opense of sale	(e) plus (f	or (loss) ) mınus (g)
a 5	508,545		463,44	4	45,101
b					
С					
d					
е					
Complete only for assets	showing gain in column (h) and owne				(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (1)		less than -0-) <b>or</b> om col (h))
a					45,10
b					
С					
d					
е				<u> </u>	
2 Capital gain net inco	ome or (net capital loss)	If gain, also enter If (loss), enter -0-		2	45,10
3 Net short-term capi	ء tal gaın or (loss) as defined in sectio	ns 1222(5) and (6	,	-	,
	Part I, line 8, column (c) (see instru				
in Part I, line 8				,	
Part V Qualification	Under Section 4940(e) for R	educed Tay on	Not Investme	nt Income	
f "Yes," the foundation does r	he section 4942 tax on the distribute not qualify under section 4940(e) Do	not complete this	part		┌ Yes ┌ No
<b>1</b> Enter the appropriate am	ount in each column for each year, se	ee page 18 of the ir	nstructions before i	making any entries	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncha		<b>(d)</b> Distributioi (col (b) divided	
2011	63,737		1,599,512		000 039848
2010	409,512		1,522,650		000 268947
2009	282,303		1,361,072		000 207412
2008	382,818		1,913,961		000 200013
2007	735,317		2,277,607	<u> </u>	000 322846
2 Total of line 1, colur	nn (d)			2	001 039066
•	n ratio for the 5-year base period—div		e 2 by 5, or by		
the number of years	the foundation has been in existence	e ıf less than 5 yea	rs <u> </u>	3	000 20781
4 Enter the net value	of noncharitable-use assets for 2012	2 from Part X, line 5	5	4	1,472,290
5 Multiply line 4 by lin	ne 3			5	305,96
<b>6</b> Enter 1% of net invo	estment income (1% of Part I, line 2°	7b)		6	59:
<b>7</b> Add lines 5 and 6.				7	306,554
	ributions from Part XII, line 4			8	176,562
	or greater than line 7, check the box		<u> </u>		

1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1	LIGCLIO	113)	
	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		:	1,187
	here Fand enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2			1,187
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			1,187
6	Credits/Payments			
a L	2012 estimated tax payments and 2011 overpayment credited to 2012 <b>6a</b> 1,100 Exempt foreign organizations—tax withheld at source <b>6b</b>			
Ь				
c d	Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld 6d			
u 7	Total credits and payments Add lines 6a through 6d			1,100
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  ref Form 2220 is attached 8			,,,,,,,
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			87
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>10</b>			
11	Enter the amount of line 10 to be Credited to 2013 estimated tax			
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt participate or intervene in any political campaign?	. 1a		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)?	. 1b		No
	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.			
	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation  \$ (2) On foundation managers  \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
2	on foundation managers • \$	,		Na
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. з		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions			
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
D	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(1)(3)		. 63	
_	or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Form	990-PF (2012)		Р	age <b>5</b>
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		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?	13	Yes	
	Website address ▶			
14	The books are in care of ▶co Foundation Source Telephone no ▶(800	) 839-	1754	
	Located at ▶501 Silverside Road Suite 123 Wilmington DE ZIP+4 ▶1980913			
4.5				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here	• •		- 1
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over			
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
real	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)			110
Lu	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundatıon agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) <b>Yes</b> 🔽 <b>No</b>			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
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))			
а	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			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 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?			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$ ) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	ıf the foundation had excess business holdings in 2012.)	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	1	No

5a	t VII-B	Statements Rega	rding Activities for	Which Form 4720	May Be Required (cor	ntinued)	
Ja	During the	year did the foundation	n pay or incur any amoun	t to			
	(1) Carry	on propaganda, or other	wise attempt to influenc	e legislation (section 49	45(e)) <sup>?</sup>	✓ No	
	(2) Influe	nce the outcome of any	specific public election (	(see section 4955), or to	carry		
	on, dır	ectly or indirectly, any	voter registration drive?		<b> </b> Yes	✓ No	
	(3) Provid	le a grant to an individu	al for travel, study, or otl	ner sımılar purposes?	☐ Yes	✓ No	
	(4) Provid	le a grant to an organiza	tion other than a charita	ble, etc , organization de	scribed		
	ın sec	tıon 509(a)(1), (2), or (	3), or section 4940(d)(2	)? (see instructions)	<b>┌</b> Yes	✓ No	
	(5) Provid	le for any purpose other	than religious, charitabl	e, scientific, literary, or			
	educa	tional purposes, or for t	he prevention of cruelty	to children or animals?.		✓ No	
b	If any ans	werıs "Yes" to 5a(1)-(!	5), dıd <b>any</b> of the transac	tions fail to qualify unde	r the exceptions described i	ın	
	Regulation	ns section 53 4945 or i	n a current notice regard	ling disaster assistance	(see instructions)?	5b	
	O rganızat	ions relying on a curren	t notice regarding disast	er assistance check her	e	. [	
c	If the ans	wer is "Yes" to question	5a(4), does the foundat	on claim exemption from	ı the		
	tax becau	se it maintained expend	liture responsibility for tl	ne grant?	<b>┌</b> Yes	┌ No │	
	If "Yes," a	ttach the statement requ	red by Regulations sectio	n 53.4945-5(d).			
6a	Did the fo	undation, during the yea	r, receive any funds, dire	ectly or indirectly, to pay	premiums on		
	a persona	l benefit contract?				☐ No	
b	Did the fo	undation, during the yea	r, pay premiums, directl	y or indirectly, on a perso	onal benefit contract?	6b	No
	If "Yes" to	6b, file Form 8870.					
7a	At any tim	ne during the tax year, w	as the foundation a part	y to a prohibited tax shel	ter transaction?	✓ No	
b					e to the transaction?	7ь	
		Information About	Officers, Director	s, Trustees, Founda	ntion Managers, Highl	y Paid Emp	loyees,
		and Contractors					
_1_	List all off	icers, directors, trustees		and their compensation (			
	(a) Nar	me and address	(b) Title, and average	(c) Compensation (If not paid enter	(d) Contributions to	(e) Expens	•
	<b>(a)</b> Nar	me and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensatio	otherall	•
Rober	(a) Nar		hours per week	(If not paid, enter	employee benefit plans and deferred compensatio	otherall	•
Foun	t Edward Spil dation Sou	ka rce 501 Silverside Rd	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensatio	otherall	•
Foun Wilm	t Edward Spil dation Sou ington, DE	ka rce 501 Silverside Rd 19809	hours per week devoted to position Pres / Dir / Sec 001 00	(If not paid, enter -0-)	employee benefit plans and deferred compensatio	n other allo	owances
Foun Wilm	t Edward Spil dation Sou ington, DE	ka rce 501 Silverside Rd 19809	hours per week devoted to position Pres / Dir / Sec 001 00	(If not paid, enter -0-)	employee benefit plans and deferred compensatio	n other allo	owances
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b>	ka rce 501 Silverside Rd 19809 ion of five highest-paid	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver	(If not paid, enter -0-)  0  those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none,  (d) Contributions to	enter "NONE."	owances
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none,  (d) Contributions to	n other allo	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none,  (d) Contributions to employee benefit	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,
Foun Wilm 2	t Edward Spil dation Sou ington, DE <b>Compensat</b> Name and	ka rce 501 Silverside Rd 19809 <b>ion of five highest-paid</b> address of each employ	hours per week devoted to position Pres / Dir / Sec 001 00  employees (other than (b) Title, and aver hours per week	those included on line 1-	employee benefit plans and deferred compensatio  -see instructions). If none, (d) Contributions to employee benefit plans and deferred	enter "NONE."  (e) Expens	e account,

Part VIII Information About Officers, Directors, True and Contractors (continued)	stees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	_	
Total number of others receiving over \$50,000 for professional service	es	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include organizations and other beneficiaries served, conferences convened, research papers is		Expenses
1		
2		
2		
3		
4		
Part IX-B Summary of Program-Related Investment	te (cas instructions)	
Part IX-B Summary of Program-Related Investment  Describe the two largest program-related investments made by the foundation dur		A mount
1	ing the tax year on lines I and 2	Amount
1		
2		
All other program-related investments See page 24 of the instruct	ions	
3		
		1
		1
	T	l
<b>Total.</b> Add lines 1 through 3		

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	1,387,028
b	A verage of monthly cash balances	1b	107,683
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	1,494,711
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,494,711
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions) 📆	4	22,421
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,472,290
6	Minimum investment return. Enter 5% of line 5	6	73,615
Pa	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private oper certain foreign organizations check here ►  and do not complete this part.)	atıng	foundations and
1	Minimum investment return from Part X, line 6	1	73,615
2a	Tax on investment income for 2012 from Part VI, line 5 2a 1,187		
b	Income tax for 2012 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	1,187
3	Distributable amount before adjustments Subtract line 2c from line 1	3	72,428
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	72,428
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,		
	line 1	7	72,428
Par	Qualifying Distributions (see instructions)		·
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	176,562
ь	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	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	176,562
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	Ė	1.0,502
-	income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	176,562
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether		·

the section 4940(e) reduction of tax in those years

	olidistributed fricollie (see liisti	uctions)			
		(a) Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	(d) 2012
1	Distributable amount for 2012 from Part XI, line 7	Сограз	rears prior to 2011	2011	72,428
					72,120
	Undistributed income, if any, as of the end of 2012 Enter amount for 2011 only				
	Total for prior years 20				
3	Excess distributions carryover, if any, to 2012 From 2007 628,629				
	From 2008				
	From 2009	=			
	From 2010				
	From 2011	†			
	Total of lines 3a through e	1,470,318			
	Qualifying distributions for 2012 from Part	, ,			
•	XII, line 4 <b>&gt;</b> \$ 176,562				
а	Applied to 2011, but not more than line 2a				
	Applied to undistributed income of prior years				
_	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2012 distributable amount				72,428
е	Remaining amount distributed out of corpus	104,134			
5	Excess distributions carryover applied to 2012				
	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,574,452			
b	Prior years' undistributed income Subtract line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed Subtract line 6c from line 6b Taxable amount				
a	—see instructions				
e	Undistributed income for 2011 Subtract line				
_	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2012 Subtract				
	lines 4d and 5 from line 1 This amount must				(
7	be distributed in 2013				
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see				
	instructions)				
8	Excess distributions carryover from 2007 not	628,629			
_	applied on line 5 or line 7 (see instructions)	523,023			
9	Excess distributions carryover to 2013.  Subtract lines 7 and 8 from line 6a	945,823			
10		<u> </u>			
	Excess from 2008 287,748	3			
	Excess from 2009				
	Excess from 2010	-			
	Excess from 2011	1			
	Excess from 2012 104,134	Ī			

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

c Any submission deadlines

factors

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor			
			<u> </u> 	165,07
<b>b</b> Approved for future payment				
	1			_

	-PF (2012)					Page <b>1</b> 2
	<b>71-A</b> Analysis of Income-Productions amounts unless otherwise indicated		siness income	Excluded by section	1 512 513 or 514	(e)
-	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemp function income (See
a b c d e f g Fees 2 Memb 3 Interest 4 Divide 5 Net re a Debt b Not c 6 Net ren 7 Other 8 Gain or 9 Net in 10 Gross	m service revenue  s and contracts from government agencies ership dues and assessments		A mount	14	32,986 45,101	instructions )
c d e 12 Subtot 13 Total. (See	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify  T-B Relationship of Activities to  Explain below how each activity for wh the accomplishment of the foundation's instructions )	calculations)  o the Accom  ich income is re	<b>plishment of E</b> ported in column (	Exempt Purpos  (e) of Part XVI-A c	ontributed importa	78,087

Part XVII	Information Reg Noncharitable E				sactio	ns and Relati	onships With			
1 Did the organ	nızatıon dırectly or ındırectly e	engage in an	y of the follow	ring with any other org	ganization	described in section			Yes	No
501(c) of the	e Code (other than section 50	)1(c)(3) orga	anızatıons) or ı	n section 527, relating	to politica	al organizations?				
<b>a</b> Transfers	from the reporting found	ation to a	noncharitat	ole exempt organiz	ation of					
<b>(1)</b> Cash.								1a(1)		No
<b>(2)</b> Other	assets							1a(2)		No
<b>b</b> Other tran	sactions									
(1) Sales	of assets to a noncharit	table exem	npt organiza	tion				1b(1)		No
<b>(2)</b> Purch	(2) Purchases of assets from a noncharitable exempt organization									No
(3) Renta	l of facilities, equipment	, or other	assets					1b(3)		No
<b>(4)</b> Reimb	oursement arrangements	5						1b(4)		No
<b>(5)</b> Loans	or loan guarantees							1b(5)		No
(6) Perform	mance of services or me	mbership	or fundraisi	ng solicitations.				1b(6)		No
<b>c</b> Sharing of	facilities, equipment, ma	aılıng lısts	, other asse	ets, or paid employ	/ees			1c		No
of the good	wer to any of the above is ds, other assets, or serv isaction or sharing arran (b) Amount involved	rices giver ngement, s	n by the repo how in colu	orting foundation	If the fou of the goo	indation receive ods, other assets	d less than fair mark	et value ed	<b>!</b>	nts
(a) Line No	(B) / thount involved	(c) Hame of	Попенанавіс	exempt organization	(4)	Description of transi	rers, transactions, and site	aring aria	rigerrier	105
-										
-										
-					1					
described	ndation directly or indired in section 501(c) of the omplete the following sc	Code (oth						.F <sub>Y</sub>	es F	No
	(a) Name of organization			(b) Type of organize	ation		(c) Description of relati	onship		
Sign the base	er penalties of perjury, I pest of my knowledge and d on all information of wh ***** Gignature of officer or tru	d belief, it hich prepa	ıs true, corı	rect, and complete	Declar		other than taxpaye  May the with the		s this ret	urn ow
	<u>-</u>		_		<del></del>	Date	p-	ΓΙΝ		_
Do:d	Print/Type preparer's n	ffrey D Haskell  Preparer's Signatur  Jeffrey D Haskell		-		2013-05-01	Check if self- employed ▶			
Paid Preparer	Fırm's name ►	F	oundation S	ource			Firm's EIN ▶			
Use Only		d	ne Hollow L	ane Suite 212						
	Fırm's address ▶	L	Lake Success, NY 11042 Phone no (800)8					39-175	4	

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Schedule B		Schedule of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		► Attach to Form 990, 990-EZ, or 990-PF		2012
Name of the organization	ion		Employer id	dentification number
Plaxis Foundation			54-21331:	10
Organization type (ch	eck one)			
Filers of:	Section:			
Form 990 or 990-EZ	<b>5</b> 01(c)(	) (enter number) organization		
	<b>4947(a)(1)</b>	) nonexempt charitable trust <b>not</b> treated as a pri	vate foundation	
	F 527 politica	al organization		
Form 990-PF	<b>5</b> 01(c)(3)	exempt private foundation		
	<b>4947(a)(1)</b>	) nonexempt charitable trust treated as a private	foundation	
	<b>5</b> 01(c)(3)	taxable private foundation		
property) from a	tion filing Form 990, 99 any one contributor Ca	90-EZ, or 990-PF that received, during the year, somplete Parts I and II	\$5,000 or more (in money or	
Special Rules				
under sections	509(a)(1) and 170(b)(	ılıng Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% sup 1)(A)(vı) and received from any one contributor, amount on (ı) Form 990, Part VIII, line 1h, or (ıı) F	, during the year, a contribut	
during the year,	total contributions of	rganization filing Form 990 or 990-EZ that receive more than \$1,000 for use <i>exclusively</i> for religiou oses, or the prevention of cruelty to children or a	ıs, charıtable,	•
during the year, not total to more the year for an applies to this o	contributions for use than \$1,000 If this boexclusively religious, organization because it	rganization filing Form 990 or 990-EZ that receive exclusively for religious, charitable, etc., purpose is checked, enter here the total contributions to charitable, etc., purpose. Do not complete any of received nonexclusively religious, charitable, etc.	es, but these contributions of that were received during the parts unless the <b>Gener</b> c, contributions of \$5,000 o	did ral Rule
990-EZ, or 990-PF), but	ıt <b>must</b> answer "No"	by the General Rule and/or the Special Rules do on Part IV, line 2 of its Form 990, or check the bo D-PF, to certify that it does not meet the filing req	ox on line H of its	

Name of organization Praxis Foundation

Employer identification number

54-2133110

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	, 51.	1133110
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	Spilka Robert Edward  135 Jonathan Drive  Stamford, CT 06903	\$64,712	Person Payroll Noncash (Complete Part II if there is
(a)	(b)	(c)	a noncash contribution ) (d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )

Name of organization Praxis Foundation Employer identification number

54-2133110

a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate)	(d)
		(see instructions)	Date received
_1	NATL OILWELL VARCO NOV,800 sh	\$64,712	2012-09-24
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

lame of c	organization			Employer identification number
idxis i ouiic	aaton			54-2133110
Part III	that total more than \$1,000 for the year organizations completing Part III, enter contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	ar. Complete colu the total of <i>exclu</i> ear (Enter this inf	mns (a) through (e) and t sively religious, charitable ormation once See instruc	he following line entry , etc ,
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, a		Transfer of gift Relations	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c	:) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	•	Transfer of gift Relations	ship of transferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(0	:) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a		Transfer of gift Relations	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c	:) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a		Transfer of gift Relations	ship of transferor to transferee

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

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient		
<b>a</b> Paid during the year				
AMERICAN FRIENDS OF LIVNOT ULEHIBANOT PO BOX 811715 BOCA RATON,FL 33481	N/A	509a1	General Unrestricted	25,000
BI CULTURAL DAY SCHOOL 2186 HIGH RIDGE RD STAMFORD,CT 06903	N/A	509a1	General Unrestricted	360
BROOKLYN ACADEMY OF MUSIC INC 30 LAFAYETTE AVE BROOKLYN,NY 11217	N/A	509a1	General Unrestricted	8,500
CHABAD LUBAVITCH CENTER 784 EASTERN PKWY BROOKLYN,NY 11213	N/A	509a1	General Unrestricted	7,200
CLAL-THE NTL JEWISH CTR - LRNING & LDRSHIP 440 PARK AVE S FL 4 NEW YORK,NY 10016	N/A	509a1	General Unrestricted	1,000
COLUMBUS FOUNDATION 1234 E BROAD ST COLUMBUS,OH 43205	N/A	509a1	Ezra and Skipper Singer Fund	1,000
CONGREGATION RODEF SHALOM 450 S KEARNEY ST DENVER,CO 80224	N/A	509a1	General Unrestricted	360
FACING HISTORY & OURSELVES NATIONAL FDN 14 E 4TH ST STE 3003 NEW YORK, NY 10012	N/A	509a1	General Unrestricted	360
HEBREW CONGREGATION OF AGUDATH SHOLOM 301 STRAWBERRY HILL AVE STAMFORD,CT 06902	N/A	509a1	General Unrestricted	1,350
JEWISH EDUCATION IN MEDIA INC PO BOX 180 BRONX,NY 10471	N/A	509a2	PJ Library	5,000
JEWISH FAMILY SERVICE OF STAMFORD INC 733 SUMMER ST 6TH FL STAMFORD,CT 06901	N/A	509a1	General Unrestricted	500
MERKOS LINYONEI CHINUCH INC 770 HIGH RIDGE RD STAMFORD,CT 06905	N/A	509a1	General Unrestricted	60,000
MERKOS LINYONEI CHINUCH INC 770 HIGH RIDGE RD STAMFORD,CT 06905	N/A	509a1	Adult Education	1,800
MERKOS LINYONEI CHINUCH INC 770 HIGH RIDGE RD STAMFORD,CT 06905	N/A	509a1	Chabad House	180
MERKOS LINYONEI CHINUCH INC 770 HIGH RIDGE RD STAMFORD,CT 06905	N/A	509a1	Friendship Circle	1,980

#### 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	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MERKOS LINYONEI CHINUCH INC 770 HIGH RIDGE RD STAMFORD,CT 06905	N/A	509a1	JLI/New Canaan	3,600
SOLOMON SCHECHTER SCHOOL OF WESTCHESTER INC 555 W HARTSDALE AVE HARTSDALE,NY 10530	N/A	509a1	Sef Fund	12,500
UNITED JEWISH FEDERATION OF STAMFORD 1035 NEWFIELD AVE STAMFORD,CT 06905	N/A	509a1	General Unrestricted	34,031
WESTCHESTER JEWISH COMMUNITY SERVICES INC 845 N BROADWAY STE 2 WHITE PLAINS, NY 10603	N/A	509a1	General Unrestricted	350
Total				165,071

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### TY 2012 Gain/Loss from Sale of Other Assets Schedule

Name: Praxis Foundation

**EIN:** 54-2133110

**Software ID:** 12000057

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
Publicly-traded Securities					508,545	463,444			45,101	

# **TY 2012 General Explanation Attachment**

**Name:** Praxis Foundation

**EIN:** 54-2133110

**Software ID:** 12000057

# **TY 2012 Investments Corporate Stock Schedule**

Name: Praxis Foundation

**EIN:** 54-2133110

**Software ID:** 12000057

Name of Stock	End of Year Book Value	End of Year Fair Market Value
1150 shares of ALLSTATE CORP	38,547	46,196
850 shares of AMER INTERNATIONAL GROUP INC	29,626	30,005
700 shares of AMERICAN EXPRESS CO	40,164	40,236
500 shares of ANADARKO PETROLEUM CORP	21,795	37,155
225 shares of BLACKROCK INC	34,856	46,510
600 shares of BOEING CO	39,120	45,216
500 shares of CAMERON INTERNATIONAL CORP	22,293	28,230
800 shares of CENTURY LINK INC	32,462	31,296
750 shares of CRESCENT POINT ENERGY	30,208	28,365
1000 shares of EMC CORP-MASS	15,450	25,300
400 shares of FRANKLIN RES INC	40,789	50,280
75 shares of GOOGLE INC CL A	37,674	53,054
700 shares of HONEYWELL INTERNATIONAL INC.	29,807	44,429
1250 shares of INTEL CORP	32,479	25,775
1200 shares of INVESCO PLC	28,135	31,308
700 shares of JOHNSON JOHNSON	41,096	49,070
900 shares of KUBOTA CP	40,039	51,858
1500 shares of LINEAR TECHNOLOGY CORP	50,498	51,450
1000 shares of MICROCHIP TECHNOLOGY INC.	33,051	32,590
1350 shares of MICROSOFT CORPORATION	40,474	36,058
1200 shares of NATL OILWELL VARCO	89,462	82,019
2400 shares of NEW YORK COMNTY BANCORP INC.	31,491	31,440
500 shares of NOVARTIS AG ADR	29,215	31,650
300 shares of OCCIDENTAL PETROLEUM CORP	27,638	22,983
150 shares of PHILIP MORRIS INTL	6,381	12,546
550 shares of POTASH CORPORATION OF SASKATCHEWAN INC	24,666	22,380
1000 shares of RANGE RESOURCES CORP DEL	41,242	62,830
700 shares of ROCHE HOLDING LTD ADR	30,178	35,350
850 shares of SANOFI-AVENTIS SPONSORED ADR	29,441	40,273
550 shares of SCHLUMBERGER LTD	37,948	38,114

Name of Stock	End of Year Book Value	End of Year Fair Market Value
550 shares of SOCIEDAD QUIMICA Y MINERA DE CHILE S.A. CHILE	18,655	31,702
850 shares of SOUTHWESTERN ENERGY	26,610	28,399
405 shares of SPDR GOLD TR GOLD SHS	26,167	65,617
400 shares of TRAVELERS COMPANIES INC THE	26,672	28,728
4433 shares of TREASURY WINE ESTATES ADR	16,887	21,633
1350 shares of UNILEVER N V N Y	32,624	51,705
175 shares of VALMONT INDUSTRIES INC	13,904	23,896
900 shares of WEYERHAEUSER CO	17,144	25,038

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#### **TY 2012 Other Assets Schedule**

Name: Praxis Foundation

**EIN:** 54-2133110

**Software ID:** 12000057

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
Program Related Investment	500,000	500,000	500,000

# **TY 2012 Other Expenses Schedule**

Name: Praxis Foundation

**EIN:** 54-2133110

**Software ID:** 12000057

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	11,466			11,466
Bank Charges	58	58		
State or Local Filing Fees	25			25

#### **TY 2012 Other Professional Fees Schedule**

Name: Praxis Foundation

**EIN:** 54-2133110

**Software ID:** 12000057

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment Management Services	17,886	17,886		

### **TY 2012 Taxes Schedule**

Name: Praxis Foundation

**EIN:** 54-2133110

**Software ID:** 12000057

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Estimated Tax for 2012	1,100			
Foreign Tax Paid	808	808		
IRS Excise Tax Payment with 1st ext 990-PF	199			