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Form **990-PF**

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

OMB No. 1545-0052

2012

• 0	epartment of the Treasury		Treated as a Pr	ivate Foundation		2012		
	ternal Revenue Service	Note. The foundation	on may be able to use a copy of	of this return to satisfy state r	eporting requirements.	Open to Public Inspection		
F	or calendar year 2012, or	r tax year beginning		, 2012, and en	dina	. 20		
	ame of foundation				A Employer identific	 ′		
	O UNTO OTHERS	S TRUST INC	65-0517915					
	umber and street (or P.O b		vered to street address)	Room/suite	B Telephone number	(see instructions)		
	746 SW 11 ST				(305) 643-09	-		
	ity or town, state, and ZIP				C If exempt, application	is pending, check here		
_	liami FL 33135							
G	Check all that apply	Initial return	-	of a former public charity	D 1. Foreign organiza	ations, check here 🕨 📙		
		Final return	Amended reti		2. Foreign organizations meeting the 85%			
-		Address change			 	d attach computation		
	Check type of organization		c)(3) exempt private foun		E If private foundation terminated under s	n status was ection		
Ļ	Section 4947(a)(1) none		Other taxable privat		507(b)(1)(A), check	there · · · · ·		
	Fair market value of all ass		Accounting method.	Cash	E Wall of the			
G6\	year (from Part II, col (c),		Other (specify)	 	F If the foundation is termination under s	In a 60-month section		
3	\$ Part I Analysis of Reve		rt I, column (d) must be	on cash basis.)	507(b)(1)(B), check			
	The total of amount	nue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements		
₽;	(c), & (d) may not i	necessarily equal the	expenses per	income	income	for charitable purposes		
ev -		(a) (see instructions).)	books			(cash basis only)		
52	1 Contributions, gifts, (attach schedule)	grants, etc., received oundation is not required						
⋖	∠ Check ► to attac							
	=	nd temp. cash investments		26,314	26,314			
	4 Dividends and inte	erest from secunties		167,170	167,170			
Ī.	5 a Gross rents	••••						
	R b Net rental income or (loss)	 						
-	/ ba Net gain/(loss) from s	ale of assets not on line 10	96,979					
	Gross sales price for all assets on line 6a	1,628,784#	1					
-	1 7	ne (from Part IV, line 2)		96,979				
	8 Net short-term ca	pital gaın · · · ·			0			
•	9 Income modification	ons ·····			0			
	10 a Gross sales less rtns. & allowances	0						
	b Less Cost of goods sold							
	C Gross profit or (los	ss) (attach schedule)						
	11 Other income (atta	ach schedule) · · ·						
_	12 Total. Add lines 1		96,979	290,463	193,484			
(Compensation of offi		0					
Ī	14 Other employee s	_						
	15 Pension plans, en	ployee benefits ·						
f	26 Tredal fees (attach			···				
نِسم	b Accounting fees (2	attach schedule) #2	4,750	4,750	4,750			
_¹ [C Other professiona	fees (attach sched#le)	26,264	26,264	26,264			
ì	Altin Interest	₹\···· · ·						
``	18 Taxes (attach sched	dule) (see instructions# 4	1,520	1,520	1,520			
Ĺ	19 Depleciation (attac		_					
<u></u>	1 20 Occupancy · · · ·							
ľ	• 1	es, and meetings · · ·	2,526	2,526	2,526			
	22 Printing and public	cations·····						
?	C 23 Other expenses (a	attach schedule) #5	91,006	91,006	91,006	74,835		
Ė	24 Total operating a	and administrative	_	_				
Ņ	expenses. Add lir	nes 13 through 23	126,066	126,066	126,066	74,835		
	25 Contributions, gifts	s, grants paid· ·				409,750		
	26 Total exp & disburse	ments Add lines 24 and 25	126,066	126,066	126,066	484,585		
	27 Subtract line 26 fro							
	a Excess of revenu and disbursemer		-29,087					
	b Net investment in	ncome (if neg , enter -0-)		164,397				
_	c Adjusted net inco	OME (if neg , enter -0-)			67,418			

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Ps	art II	Attached schedules and amounts in the description column should be for	Beginning of year	End of	year
	end-of-year amounts only (See inst)		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing · · · · · · · · · · · · · · ·	27,030	42,390	42,390
•	2	Savings and temporary cash investments	3,402,528	2,756,935	2,756,935
	3	Accounts receivable ▶			
		Less allowance for doubtful accts.			
	4	Pledges receivable ▶			· · ·
	i	Less: allowance for doubtful accts			
	5	Grants receivable	-		
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) #6.			
Α		receivable (attach schedule)			
S S		Less allowance for doubtful accounts			
E	8	Inventories for sale or use · · · · · · · · · · · · · · · · · · ·			
	9	Prepaid expenses and deferred charges · · · · · · · · · · · ·			
S	1	Investments U.S. and state govt. obligations (attach schedule)	1,520		
	b	Investments corporate stock (attach schedule)			
	11 ^C	Investments corporate bonds (attach schedule) · · · · · · · Investments land, buildings, and equipment basis · · · · · · ▶			
		Less accumulated depreciation (attach schedule)			
	12	Investments mortgage loans · · · · · · · · · · · · · · · · · · ·	250,000	770,009	770,009
	13	Investments other (attach schedule) · · · · · · · · · · · · · · · · · · ·			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule) · · · · · ·			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers see the			
		instructions Also, see page 1, item l)	3,681,078	3,569,334	3,569,334
Ļ	17	Accounts payable and accrued expenses			
Ä	18	Grants payable			
A B	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, and other disqualified persons			
I T	21	Mortgages and other notes payable (attach schedule)			
Ĺ	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
ų F	24	and complete lines 24 through 26 and lines 30 and 31.			
EΝ	24	Unrestricted			
' D	25	Temporarily restricted	3 670 550	3 500 007	
A B	26	Permanently restricted · · · · · · · · · · · · · · · · · · ·	3,679,558	3,566,827	
. ASSETS OR		Foundations that do not follow SFAS 117, ck. here and complete lines 27 through 31.			
ίχ	27	Capital stock, trust principal, or current funds · · · · · ·			
ြင့်	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
Z E	29	Retained earnings, accumulated income, endowment, or other funds · · · · ·	3,679,558	3,566,827	
J	30	Total net assets or fund balances (see instructions)	3,679,558	3,566,827	
	31	Total liabilities and net assets/fund balances (see instructions)	3,679,558	3,566,827	
Pa	rt III	Analysis of Changes in Net Assets or Fund Bal	ances		·
1	Tota	net assets or fund balances at beginning of year Part II, column	n (a), line 30 (must agree v	vith	
	end-	-of-year figure reported on pnor year's return)		<u>1</u>	3,679,558
2		r amount from Part I, line 27a			-29 , 087
3		r increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3		4	3,650,471
5		eases not included in line 2 (itemize) See attachment		5	83,644
6		net assets or fund balances at end of year (line 4 minus line 5)		6	3,566,827

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

6

7

8

1,644

1,644

484,585

Add lines 5 and 6

Enter 1% of net investment income (1% of Part I, line 27b) · · · · ·

Enter qualifying distributions from Part XII, line 4....

Multiply line 4 by line 3......

Ра	rt VI EXCISE TAX Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see inst	ruction	ns)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
h	Date of ruling or determination letter (attach copy of letter if necessary see inst.)		-, -,	
,U	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b			,644
С				
•	of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			0
3	Add lines 1 and 2		1	,644
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) .			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		1	,644
6	Credits/Payments:			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 · · · · · · . 6a			
b	Exempt foreign organizations tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d · · · · · · · · · · · · · · · · · ·			0
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			38
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1	,682
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or	-	Yes	
.	Intervene in any political campaign?	· 16	<u>a </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	11	ຸ	,
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	⊢"		X
	or distributed by the foundation in connection with the activities.			
С	c Did the foundation file Form 1120-POL for this year?			
_	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	` `		X
		0		İ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	-		
	on foundation managers · · · · · ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2	2	X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	3	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	48		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?		b N/ <i>I</i>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? · · · · · · · · · · · · · · · · · · ·	. 5	<u>;</u>	X
_	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			- V
7	conflict with the state law remain in the governing instrument?	- ° 7		X
	Did the foundation have at least \$5,000 in assets at any time during the yr.? If "Yes," complete Part II, col. (c), & Part XV	 '		X
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE	_		
b	if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or	_	_	-
	designate) of each state as required by General Instruction G? If "No," attach explanation	81	<u> </u>	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	<u> </u>	_	-
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete			
10	Part XIV	9	' —	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	. 10		,,
	and addresses · · · · · · _ · · · · · · · · · · · ·			<u> </u>

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Par	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?	13		
	Website address ► N/A			
14	The books are in care of ▶ See attachment #9 Telephone no. ▶			
	Located at ► ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here			▶ []
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the			
	foreign country ▶			
Parl	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(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 🔯 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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"	1		
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days.)			
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here · · · · · · · · · · · · · · · · · ·			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
_	that were not corrected before the first day of the tax year beginning in 2012?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
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?			
h	If "Yes," list the years · · · • 20, 20, 20, 20, 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
b				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement see instructions)			37
С	to all years listed, answer "No" and attach statement see instructions)	2b		X
·				
0-	20	İ		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation			
.,	or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2012.)	3b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? · · · ·	4a		X
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	<u> </u>		_
-	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012? · · · · · · · · ·	4b		$\frac{1}{X}$
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Par	VII	<u>-B[</u>	Statem	ents	Regarding Acti	vities for Which	Form 4720 May Be	Required (continued	<u>d)</u>	
5 a	Dun	ing th	e year dıd	the fo	undation pay or incu	r any amount to				
	(1)	Carr	y on propa	aganda	a, or otherwise attemp	pt to influence legislatio	n (section 4945(e))? · ·	···· 📙 Yes 🛚 🖽 I	No O	
	(2)	Influ	ence the o	outcom	ne of any specific pub	lic election (see section	4955), or to carry			
									No O	
							ourposes? · · · · · · · · ·	···· Yes 🛚 Yes	No	
	(4)	Prov	nde a gran	nt to an	organization other th	nan a chantable, etc., o	rganization described			
		ın se	ection 509((a)(1), ((2), or (3), or section	4940(d)(2)? (see instru	ctions) · · · · · · · · ·	·· ·· 📙 Yes 🔀 i	No	
	(5)	Prov	ride for any	y purpo	ose other than religio	us, chantable, scientific	, literary, or			
	educational purposes, or for the prevention of cruelty to children or animals?									
þ	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in									
	Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?									
	Orga	anıza	tions relyin	ng on a	a current notice regar	ding disaster assistance	e check here	▶		
C	If the	e ans	wer is "Ye	s" to q	question 5a(4), does t	he foundation claim exe	emption from the tax			
	beca	ause	it maintain	ed exp	penditure responsibili	ty for the grant?		N/A Yes I	No	
	If "Y	'es," a	attach the s	statem	nent required by Regu	lations section 53 4945	–5(d)			
6a	Did	the fo	oundation,	during	g the year, receive an	y funds, directly or indii	rectly, to pay premiums			
	on a	a pers	sonal bene	efit con	tract?			🗌 Yes 🔀 I	No	
b	Did	the fo	oundation,	during	g the year, pay premii	ums, directly or indirect	ly, on a personal benefit	contract?	6b	X
	If "Y	'es" to	o 6b, file Fo	om 88	370			_		
7a	7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No									
<u>b</u>	If "Y	es," c	did the four	ndatio	n receive any procee	ds or have any net inco	ome attributable to the tra	\overline{N}	∄ 7b	
Par	<u>t VI</u>	11	Informa	ition .	About Officers,	Directors, Truste	es, Foundation Ma	nagers, Highly Pa	id Emplo	yees,
			and Cor	ntrac	tors					
1	List	all o	fficers, dir	rector	s, trustees, foundat	ion managers and the	ir compensation (see in	structions).		
		ı	a) Name a	and ad	ldress	(b) Title, and avg hours per week	(c) Compensation	(d) Contributions to	(e) Expense	e account,
		`				devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred comp.	other all	owances
See	a	tta	achmer	nt #	#10					
								•	ļ	
			····							
2					ighest-paid employe	ees (other than those	included on line 1 se	ee instructions).		
	11 110	J116, (enter "NO	/ITE.				(d) Contributions to		
(a) Nar	me ar	nd address	s of ea	ich employee paid	(b) Title, and avg.	(c) Compensation	employee benefit	(e) Expense	e account,
			more tha	an \$50	0,000	hours per week devoted to position	(c) Compensation	plans and deferred	other alk	owances
NON	10					doveted to position		compensation		
NON										
Total	D1:	her -	of other a-	nolesses	es paid over \$50,000	L		<u> </u>	L	<u> </u>
ı Uldi	riurf)	וחבו (n omerem	PIOAGE	CO PAIU UVEI DOU,UUU					

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, High	ly Paid Employees,
3 Five highest-paid independent contractors for professional services (se	ee instructions). If none, enter "NON	 IE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
See attachment #11		
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 releval of organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see	nstructions)	
Describe the two largest program-related investments made by the foundation of		Amount
1	,	
2		

Total. Add lines 1 through 3.

3

All other program-related investments See instructions

▶

<u>Pa</u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations see instructions)	ations,	
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,	,	
	purposes.		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	0
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	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		
6	Minimum investment return. Enter 5% of line 5	6	
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	<u> </u>	·
	foundations and certain foreign organizations check here land do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012 (This does not include the tax from Part VI.)	[
c	Add lines 2a and 2b.	2c	1,644
3	Distributable amount before adjustments Subtract line 2c from line 1	3	<u> </u>
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	0
Pa	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes	l i	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	484,585
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 chantable projects that satisfy the	-	
э a	Suitability test (pnor IRS approval required)	3a	
_	Cash distribution test (attach the required schedule)	3b	
b	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	3D 4	484,585
4		4	404,303
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	1 611
_	Enter 1% of Part I, line 27b (see instructions)		1,644
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	482,941
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	toundatio	n
	qualifies for the section 4940(e) reduction of tax in those years.		

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	XIII Undistributed Income (see	instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012
	line 7				0
2	Undistributed income, if any, as of the end of 2012		 		
а	Enter amount for 2011 only				
_	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2012				
а	From 2007				
b	From 2008]			
С	From 2009]			
d	From 2010]			
е	From 2011	<u>] </u>			
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2012 from Part XII, line 4 \$ 484,585				
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				
	Remaining amount distributed out of corpus	-	· <u></u>		
5	Excess distributions carryover applied to 2012 · · ·		<u> </u>		
•	(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				
	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				
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				
10	Analysis of line 9				
а	Excess from 2008				
	Excess from 2009 .	1			
c	Excess from 2010 .	1			
_	Excess from 2011	1			
	Excess from 2012.	1			

	1990-PF (2012)						Page 10
_	t XIV Private Operating Found						
1a	If the foundation has received a ruling or			- 1			
	foundation, and the ruling is effective for						
	Check box to indicate whether the found	ation is a private ope	erating foundation d	escribed in sec	tion	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 yea	ars		(e) Total
	investment return from Part X for each year listed	(a) 2012	(b) 2011	(c) 2010)	(d) 2009	(e) Total
þ	85% of line 2a						
С	Qualifying distributions from Part XII, line 4 for each year listed						
d	Amounts included in line 2c not used directly for active conduct exempt act.						
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c						
3	Complete 3a, b, or c for the alternative test relied upon.						
а	"Assets" alternative test enter. (1) Value of all assets						
	(2) Value of assets qualifying under						
b	section 4942(j)(3)(B)(i)						
C	"Support" alternative test enter						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a) (5)), or royalties)			į			
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3) (B)(iii)						
	(3) Largest amount of support from an exempt organization	- -					
Dar	(4) Gross investment income t XV Supplementary Informat	ion (Complete t	his part only if	the founds	tion b	nd &E 000 or i	nore in escate
rai	at any time during the y			uie iouilua	auon n	1G \$5,000 OI I	nore in assets
1	Information Regarding Foundation Ma		uctions.)			<u> </u>	
a	List any managers of the foundation who	_	ore than 2% of the to	ntal contribution	ne receive	d by the foundate	on hefore the
_	close of any tax year (but only if they hav					a by the loundation	on before the
	None			500011 507 (4)(2)	, ,		
b	List any managers of the foundation who	own 10% or more of	f the stock of a com	oration (or an e	egually lar	ge portion of the	ownership
_	of a partnership or other entity) of which				equally la	ge portion of the t	OWIGISHIP
	None	iounidadon nas a	or greater like				
2	Information Regarding Contribution, G	irant Gift Loan Sc	holarship etc. Pro	Mrame.			
_	Check here ► If the foundation only requests for funds. If the foundation make	makes contributions	to preselected cha	ntable organiza			
	complete items 2a, b, c, and d	G, G, 2.00. (J		
а	The name, address, and telephone numb	per or e-mail of the p	erson to whom app	lications should	d be addr	essed:	
b	The form in which applications should be	submitted and infor	mation and material	s they should ir	nclude:		

JVA

c Any submission deadlines.

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

DO UNTO OTHERS TRUST INC 65-0517915 Page 11 Part XV. Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year Approved for future payment

..... . ▶ 3b

Total ·

Page **12**

Part XVI-	A Analysis of Income-Produ	ucing Activi	ities			
Enter gross as	mounts unless otherwise indicated	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exempt
-		Business	Amount	Excl	Amount	function income (See instructions.)
1 Program	service revenue	code		code		
a						
b						
c					·	
d						
е						
f					·	
9 Fees 8	contracts from government agencies					
2 Members	hip dues and assessments					
3 Interest on	savings and temporary cash investments					
4 Dividends	and interest from securities					
5 Net rental	income or (loss) from real estate				, .	i.
a Debt-f	inanced property					
b Not de	bt-financed property					
6 Net rental II	ncome or (loss) from personal property· · · ·				ı	
7 Other inve	estment income					
8 Gain or (los	s) from sales of assets other than inventory					
9 Net incom	ne or (loss) from special events					
10 Gross pro	ofit or (loss) from sales of inventory .					-0.11
11 Other reve	enue a					
b						
c						
d						
е						
12 Subtotal	Add columns (b), (d), and (e)		0		0	0
13 Total. Ad	d line 12, columns (b), (d), and (e)				13	0
(See workshe	et in line 13 instructions to verify calcula	tions)				
Part XVI-	B Relationship of Activities	to the Acco	omplishment of Ex	cempt F	Purposes	
Line No. ▼	Explain below how each activity for w accomplishment of the foundation's e	vhich income is	reported in column (e)	of Part X\	/I-A contributed importa	•
1						

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Pa	rt XVII	Information Exempt Org		ansfers To and	Transact	tions an	d Relatio	nships V	Vith Non	charita	able	
1	Did the	organization directly	or indirectly engage	ge in any of the follo	wing with ar	ny other org	ganization de	escribed in	section	A Property	Yes	No
	501(c) (of the Code (other th	nan section 501(c)(3) organizations) or	ın section 52	7, relating	to political o	rganizations	?		1	£
а	Transfe	rs from the reporting	foundation to a n	onchantable exempt	organization	n of:						
	(1) Ca	sh								1a(1)		X
	(2) Oth	ner assets · · ·							[1a(2)		Χ
þ	Other tr	ansactions:										
	(1) Sa	les of assets to a no	nchantable exemp	t organization · ·					[1b(1)		Χ
	(2) Pu	rchases of assets fro	om a nonchantable	exempt organization	n				[1b(2)		Χ
	(3) Re	ntal of facilities, equi	pment, or other as	sets						1b(3)		Χ
	(4) Re	ımbursement arrang	ements							1b(4)		Χ
	(5) Lo	ans or loan guarante	es · · · · ·							1b(5)		X
	(6) Pe	rformance of service	s or membership o	or fundraising solicita	ations · ·				[1b(6)		Χ
C				ther assets, or paid					[1c		Χ
(a) Lı	goods, or shari	other assets, or serv	rices given by the row in column (d) t	nplete the following seporting foundation he value of the good	If the found ds, other ass	ation recei ets, or serv	ved less that rices receive	n fair marke d.	t value ın a	ny transa	action	
	section		other than section	with, or related to, o 501(c)(3)) or in sect		ax-exemp	t organizatio	ns describe	d ın	Yes	<u></u>	No
) Name of organiza		(b) Type of	organization			c) Descript	on of relati	onship		
	ų			examined this return, inc							dge an	d
Sigr	bel	ief, it is true, correct, an	d complete. Declaration	on of preparer (other tha	an taxpayer) is	based on all	information of	which prepar	er has any kn	owledge	uii	_
Here		Alecc Signature of officer	ea)/- or trustee	Colorcio	4/1/	PRES. Title	IDENT		May the IRS with the pre (see instruct	parer sho	wn bel	
		Print/Type prepare	er's name	Preparer's signatu	7e /	D	ate /	Chec	k if	PTIN		
Paic		ROSENT	Bolins	1/19-15	h_		4/11/13	self-	employed	<u> 2000</u>	766	<u>94</u>
_	oarer	Firm's name ► HF	RB TAX GRO	OUP INC				Firm's EIN				
Use	Only	Firm's address ▶ 1		CAYNE BLVD				Phone no.				

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

Department of the Treasury Internal Revenue Service Nàme of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2012

_		' '						
DO UNTO OTHER	S TRUST INC	65-0517915						
Organization type (check	one):							
Filers of:	Section:							
Form 990 or 990-EZ	☑ 501(c)(3) (enter number) organization							
	4947(a)(1) nonexempt chantable trust not treated as a p	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization							
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	filing Form 990, 990-EZ, or 990-PF that received, dunng the year, \$ outor Complete Parts I and II.	\$5,000 or more (in money or property)						
•	nutor Complete Parts Fand II.							
Special Rules								
under sections 509(a	(3) organization filing Form 990 or 990-EZ that met the 33 1/3% sup a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, du 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-	uring the year, a contribution of the greater						
during the year, tota	(7), (8), or (10) organization filing Form 990 or 990-EZ that received I contributions of more than \$1,000 for use exclusively for religious, all purposes, or the prevention of cruelty to children or animals. Con	charitable, scientific,						
the year, contribution to more than \$1,000 religious, charitable,	(7), (8), or (10) organization filing Form 990 or 990-EZ that received ns for use exclusively for religious, chantable, etc., purposes, but the . If this box is checked, enter here the total contributions that were rec., purpose. Do not complete any of the parts unless the General Series General Series of the contributions, chantable, etc., contributions of \$5,000 or more during the series of the contributions of \$5,000 or more during the series of the contributions.	ese contributions did not total received during the year for an exclusively ral Rule applies to this organization because						
or 990-PF), but it must ans	nat is not covered by the General Rule and/or the Special Rules doe swer "No" on Part IV, line 2 of its Form 990, or check the box on line tit does not meet the filing requirements of Schedule B (Form 990, 9	e H of its Form 990-EZ or on Part I, line 2, of its						

Name of organization

DO UNTO OTHERS TRUST INC

Employer identification number 65-0517915

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 1		- - -	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
2	SEE ATTACHED LIST	- - - -	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

DO UNTO OTHERS TRUST

List of Recipients

Americares 88 Hamilton Avenue Stamford, CT 06907-0921

American Red Cross 335 SW 27th. Avenue Miami, Fl 33135

American Cancer Society 2180 SW 12th. Avenue Miami, FL 33129

Archdiocese of Miami 9401 Biscayne Boulevard Miami, FL 33138

American Society for the Prevention Of Cruelty to Animals P.O. Box 97288 Washington DC 20077-714

Camillus House P.O. Box 11829 Miami, FL 33101-1829

Center Jewish Culture 800 Douglas Road Coral Gables, FL 33134

Classical South FL. 330 SW Second St. FTL. FL

Easter Seals 1275 Mamaroneck Ave. White Plains NY 10605 Ebenezer Baptist Church 454 SW 42nd. Avenue Miami, FL 33145

Cleveland Orchestra 200 South Biscayne Boulevard Suite 3300 Miami, FL 33131

Dian Fossey G.F. 800 Cherokee Avenue SE Atlanta, GA 30315

Easter Seals 1475 NW 14th. Avenue Miami, FL 33125

Ebenezer Baptist Church 4111 SW Fourth Street Miami, FL 33134

Fairchild Tropical Garden 10901 Old Cutler Road Coral Gables, FL 33156

Florida Grand Opera 8390 NW 23rd. Street Miami, FL 33122

Free Will Baptist B C 3606 West End Avenue Nashville, TN 37205-2498

Horse Protection Association Of Florida . 20690 NW 130th. Avenue Micanopy, FL 32667

Humane Society of Greater Miami 16101 West Dixie Highway North Miami Beach, FL 33160-4309 Humane Society of U S 2100 L Street, NW Washington DC 20037

Ismile Inc. 300 Noerh Poinciana Blvd. Miami Springs, FL 33155-4429

Kiwanis of Little Havana 1400 SW First Street Miami, FL 33135

Kendall Hammocks Optimist Baseball 501 © (4) 11340 SW 156 Avenue Miami, FL 33196

The Learning Experience 5651 SW 82nd. Avenue Miami, FL 33143

Liga Contra el Cancer 2180 SW 12th. Avenue/ Miami, FL 33129

Miami City Ballet 2200 Liberty Avenue Miami Beach, FL 3313

Miami Children's Hospital 3100 SW 62nd. Avenue Miami, FL 33155

National Wildlife Federation 111000 wildlife Center Drive Reston, VA 20190

New World Symphony 541 Lincoln Road Miami Beach, FL 33139

Octavio Feline Foundation P.O. Box 440738 Miami, FL 33144 Seraphic Fire 1900 Coral Way #301 Miami, FL 33169

The Salvation Army PO Box 330607 Miami, FL 33233

Toccoa Falls College P.O. Box 800809 Toccoa Falls, GA 30598

University of Miami/ Sylvester P.O. Box 016960 Miami, FL 33101-6960

USO P.O. Box 96860 Washington DC 20077-7677

Zoological Society of Florida 12400 SW 152nd. Street Miami, FL 33177

Women's Fund 2650 SW 27th. Avenue Miami, FL 33135

WPBT 2 P.O. Box 610002 Miami, FL 33261-9972

World Wildlife Fund PO Box 97180 Washington DC 20090 Darahors Detri

Do Unto Others Transaction Detail By Account January through December 2012

03/02/13 Accrual Basis

12:28 PM

Туре	Date	Num	Name	Memo	ij	Split	Amount	Balance
American Society for the Prevention of Cr Check 12/21/2012 1	ne Prevention of 12/21/2012	f Cr 1720	American Society fo			Bank of Ameri	2,000 00	5,000 00
Total American Society for the Prevention of	or the Prevention	n of Cr					9'000 00	5,000 00
Camillus House Check Check	6/5/2012 10/27/2012	1681 1703	Camillus House Camillus House			Bank of Ameri Bank of Ameri	10,000 00 500 500 500	10,000 00 10,500 00
Total Camillus House							10,500 00	10,500 00
Classical S FL Check Check Check	2/4/2012 6/5/2012 11/23/2012	1647 1682 1708	Classical S FL Classical S FL Classical S FL			Bank of Ameri Bank of Ameri Bank of Ameri	1,500 00 10,000 00 1,500 00	1,500 00 11,500 00 13,000 00
Total Classical S FL							13,000 00	13,000 00
Cleveland Orchestra Check Check	3/29/2012 5/30/2012	1662 1680	Cleveland Orchestra Cleveland Orchestra			Bank of Ameri Bank of Ameri	25,000 00 10,000 00	25,000 00 35,000 00
Total Cleveland Orchestra	īa						35,000 00	35,000 00
Diane Fossey Check	12/21/2012	1716	Diane Fossey			Bank of Amerr	2,000 00	2,000 00
Total Diane Fossey							2,000 00	2,000 00
Easter Seals Check	11/23/2012	1709	Easter Seals			Bank of Amerr	2,000 00	2,000 00
Total Easter Seals							2,000 00	2,000 00
Ebenezer Baptist Church Check Check Check	ch 2/21/2012 5/15/2012 12/23/2012	1650 1670 1722	Ebenezer Baptist C Ebenezer Baptist C Ebenezer Baptist C			Bank of Ameri Bank of Ameri Bank of Ameri	3,000 00 1,000 00 10,000 00	3,000 00 4,000 00 14,000 00
Total Ebenezer Baptist Church	Shurch						14,000 00	14,000 00
Fiorida Grand Opera Check Check	3/28/2012 8/6/2012	1661 1696	Florida Grand Opera Florida Grand Opera	per letter fro		Bank of Ameri Bank of Ameri	15,000 00 4,500 00	15,000 00 19,500 00
Total Florida Grand Opera	īg						19,500 00	19,500 00
Free Will Baptist BC/Welch College Check 5/4/2012 Check 12/21/2012	elch College 5/4/2012 12/21/2012	1668 1714	Free Will Baptist B Free Will Baptist B			Bank of Ameri Bank of Ameri	25,000 00 59,000 00	25,000 00 84,000 00
Total Free Will Baptist BC/Welch College	C/Welch College	a -					84,000 00	84,000 00

Do Unto Others Transaction Detail By Account January through December 2012

03/02/13 Accrual Basis

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Туре	Date	Num	Name	Memo	ਹ	Split	Amount	Balance
Horse Proctection Association of Florida Check 6/15/2012 1 Check 12/21/2012 1	ociation of Flori 6/15/2012 12/21/2012	da 1691 1718	Horse Proctection A Horse Proctection A			Bank of Ameri Bank of Ameri	3,000 00	3,000 00
Total Horse Proctection Association of Florida	Association of FI	orıda					00 000'9	00 000'9
Humane Society of Greater Miami Check Credit Card Charge 12/28/201	eater Miami 11/29/2012 12/28/2012	1713	Humane Society of Humane Society of			Bank of Ameri Credit Card-A	00 00 1,000 00	0 00 1,000 00
Total Humane Society of Greater Miami	of Greater Miami						1,000 00	1,000 00
Humane Society U.S. Check Check Check Credit Card Charge	2/1/2012 6/5/2012 6/15/2012 11/7/2012	1645 1686 1690	Humane Society U S Humane Society U S Humane Society U S Humane Society U S			Bank of Ameri Bank of Ameri Bank of Ameri Credit Card-A	2,000 00 1,000 00 7,500 00 0 00	2,000 00 3,000 00 10,500 00 10,500 00
Total Humane Society U	S						10,500 00	10,500 00
I Smile Check	4/8/2012	1664	l Smile			Bank of Ameri	500 00	500 00
KHO Baseball Check	5/11/2012	1669	KHO Baseball			Bank of Ameri	1,000 00	1,000 00
Total KHO Baseball							1,000 00	1,000 00
Kiwanis Check Check Check	6/5/2012 7/15/2012 11/2/2012	1683 1693 1705	Kwanis Kiwanis Kiwanis			Bank of Ameri Bank of Ameri Bank of Ameri	10,000 00 5,000 00 1,000 00	10,000 00 15,000 00 16,000 00
Total Kiwanis							16,000 00	16,000 00
Learning Experience Credit Card Charge	1/15/2012 2/3/2012 3/1/2012 4/3/2012 5/1/2012 6/1/2012 7/2/2012 9/4/2012 9/6/2012 10/15/2012 11/2/2012		Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience Learning Experience			Credit Card-A Credit Card- Citi Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-A Credit Card-Citi	740 00 790 00 760 00 790 00 790 00 757 50 20 00 20 00 790 00 737 50	740 00 1,530 00 2,290 00 3,080 00 3,870 00 4,660 00 5,717 50 5,777 50 6,482 50 7,272 50 8,062 50 8,800 00
Total Learning Experience	eg.						8,800 00	8,800 00

Do Unto Others
Transaction Detail By Account
January through December 2012

03/02/13 Accrual Basis

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Туре	Date	Num	Name	Memo	5	Split	Amount	Balance
Liga Contra Cancer Check Check Check	3/20/2012 3/28/2012 6/5/2012	1657 1659 1684	Liga Contra Cancer Liga Contra Cancer Liga Contra Cancer	walk proceeds		Bank of Amer Bank of Ameri Bank of Ameri	2,300 00 10,000 00 10,000 00	2,300 00 12,300 00 22,300 00
Total Liga Contra Cancer	_						22,300 00	22,300 00
Miami Childrens Hospital Check	tal 2/7/2012	1648	Miami Childrens Ho			Bank of Ameri	90,000 00	20,000 00
Total Miami Childrens Hospital	ospital						20'000 00	50,000 00
Miami City Ballet Check	3/5/2012	1652	Miami City Ballet			Bank of Amen	20,000 00	20,000 00
Total Miami City Ballet							20,000 00	20,000 00
National Wildlife Federation Check 6/5/2 Check 12/2	ation 6/5/2012 12/21/2012	1685 1715	National Wildlife Fe National Wildlife Fe			Bank of Ameri Bank of Ameri	2,500 00 20,000 00	2,500 00 22,500 00
Total National Wildlife Federation	ederation						22,500 00	22,500 00
New World Symphony Check	5/30/2012	1676	New World Sympho			Bank of Ameri	10,000 00	10,000 00
Total New World Symphony	ony						10,000 00	10,000 00
Octavio Feline Check	5/26/2012	1675	Octavio Feline	foundation		Bank of Ameri	150 00	150 00
Total Octavio Feline							150 00	150 00
Seraphic Fire Check Credit Card Charge Check	4/14/2012 9/5/2012 12/21/2012	1666	Seraphic Fire Seraphic Fire Seraphic Fire			Bank of Amer Credit Card-A Bank of Ameri	1,000 00 1,000 00 1,000 00	1,000 00 2,000 00 3,000 00
Total Seraphic Fire							3,000 00	3,000 00
Toccoa Check	7/15/2012	1692	Toccoa			Bank of Amen	24,000 00	24,000 00
Total Toccoa							24,000 00	24,000 00
USO Check	12/21/2012	1719	OSN			Bank of Amen	3,000 00	3,000 00
WPBT			1					
Cneck Total WPBT	2102/81/11	90/1				bank of Ameri	00 000'5	5,000 00

Do Unto Others
Transaction Detail By Account
January through December 2012

03/02/13 Accrual Basis

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;			
Sandar Jamoagn Zocomes			
3			
,			

Туре	Date	Num	Name	Memo	5	Memo CIr Split	Amount	Balance
Zoological Society Check	11/23/2012	1707	Zoological Society			Bank of Amen	21,000 00	Į.
Total Zoological Society							21,000 00	21,000 00
OTAL							409,750.00	409,750.00

TOTAL

12_EOPFGR91L

990 SCHEDULE OF GAIN/LOSS FROM SALE OF ASSETS OTHER THAN INVENTORY (Not Included In Part IV)

	•		Date Sold		Accumulated Depreciation	
		rification Number 15			Gain or (Loss)	
	and ending	Employer Identification Number 65-0517915	How Acquired		Sales Expense	
	-				Basis	
qe 1, Line 6	eriod beginning		Acquisition Date		Gross Sale Price	
Attachment 1: page 1 - 990-PF Part I, Page	blic For Calendar year 2012, or tax y	Name of Organization DO UNTO OTHERS TRUST INC	Name of Security or Description of Property	Other Noninventory Assets:	To Whom Sold	Totals:

990 SCHEDULE OF ACCOUNTING FEES

Attachment 2: page 1 - 990-PF Page 1, Part I, Line 16b
Open to Public Inspection For calendar year 2012, or tax period beginning , and ending Name of Organization Employer Identification Number DO UNTO OTHERS TRUST INC 65-0517915 Net Investment Adjusted Disbursements for **Accounting Category Amount** Net Income Chanty Income 4,750 4,750 4,750 ACCOUNTING FEES 4,750 4,750 Total: 4,750

990 SCHEDULE OF OTHER PROFESSIONAL FEES

'Attachment 3: page 1 - 990-PF Page 1, Part I, Line 16c Open to Public Inspection For calendar year 2012, or tax period beginning , and ending Name of Organization Employer Identification Number DO UNTO OTHERS TRUST INC 65-0517915 Net Investment Disbursements for Adjusted Category Amount Income Net Income Chanty 26,264 26,264 26,264 INVESTMENT ADVISORY FEE 26,264 26,264 26,264

990 SCHEDULE OF TAXES PAID

Attachment 4: page 1 - 990- PF Page 1, Part I, Line 18
Open to Public Inspection For calendar year 2012, or tax penod beginning , and ending Name of Organization Employer Identification Number DO UNTO OTHERS TRUST INC 65-0517915 Adjusted Disbursements for Net Investment Category Amount Income Net Income Charity 1,520 1,520 1,520 TAXES 1,520 1,520 Total: 1,520

990 OTHER EXPENSES SCHEDULE

Attachment 5: page 2 990-PF Page 1, Part I, Line 23 Open to Public

Inspection For calendar year 2012, or tax penod beginning Name of Organization

DO UNTO OTHERS TRUST INC

Employer Identification Number

65-0517915

, and ending

DO UNTO OTHERS TRUST INC	Revenue and	Net Investment		Disbursements for
Description of Activity	Expenses	_Income	Net Income	Chanty
OTUP	5,528	5,528	5,528	Ondity
COMPUTER EXP	260	260	260	
NSURANCE	2,691	2,691	2,691	
PERMITS	295	295	295	
	162	162	162	
ICENSES				
OUES SUBSCRIPTIONS	5,693	5,693	5,693	
OFFICE EXP	95	95	95	0.00
EALS AND ENT	8,009	8,009	8,009	8,00
MEALS AND ENT CHARITY	66,826	66,826	66,826	66,82
PERATIONS	1,447	1,447	1,447	
Total:	91,006	91,006	91,006	74,83

990 SCHEDULE OF OTHER DECREASES

	7: page 1 - 990- PF Page 2, Part III,		
Inspection		, and ending	
Name of Organization			er Identification Number
DO ONTO OT	HERS TRUST INC	<u>U-cal</u>	517915
CHANDE IN	Description of Decrease		Total Amount
CHANDE IN	ASSET VALUES		83,644
			1
		Total:	83,644

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

<u>Att</u>	achment	8: pag	e 1 -	- 990-PF Page	3, Part IV	I, line 1		
Ope	en to Public							
Insp	pection	For calendar	year 2012	or tax period beginning		, and ending	g	
Name	of Organization						Employer Identific	cation Number
DO	UNTO OTH	HERS TR	UST I	INC			65-051791	5
				(s) of Property Sold (e.g , R	Real Estate.	(b) How Acquired	(c) Date Acquired	(d) Date Sold
	B .			or Common Stock, 200 shs.		P Purchase D Donation	(mo., day, yr.)	(mo., day, yr)
1	SCHWAB	, <u>Direct 114</u>	0.10000, 0	TOTAL OLD MILE		D Donation	01-01-2008	
-	DOMATIB						01 01 2000	12 91 2012
İ								
	(a) Cross Sal	no Proc	(f) Dor	araciatan Allawad	(g) Cost or Oth	nor Pooro	(h) Gain or	: (loog)
	(e) Gross Sal	es ruce		preciation Allowed				
1	1	,628,784	10)	allowable)	Plus Expens	1,531,805	(e) Plus (f)	96,979
1	1	, 020, 704				1,331,003		30,313
					,			
	1							
<u> </u>			L		1	10/0:/22		N O-2- A#
				in in column (h) and owned			(I) Gains (Col. (h	
	(i) F.M V as of	12/31/69	Ü)	Adjusted Basis	(k) Excess if	i i		Less Than -0-) or
			l	as of 12/31/69	Over Col	(j), if Any	Losses (fro	
1								96,979
	İ		!					
1			•					
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1						1		
1								
1								
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1					1			
1								
1								
1								
1								

990 BOOKS ARE IN CARE OF

<u>Attachm</u>	ent 9 - 990-PF Page 5, Part VII	-A, Line 14
Open to Pub	plic	
Inspection	For calendar year 2012, or tax period beginning	, and ending
Name of Organ	nization	Employer Identification Number
DO UNTO	OTHERS TRUST INC	65-0517915
Part VII-A - L		
Individual Nam or Business Nam	ne	ALICIA CELORIO
Street Address	3	2746 SW 11 ST
U.S. Address		
Zıp co or Foreign Addres	de <u>33135</u> Cny <u>Miami</u>	State <u>FL</u>
City .		
Provin	ce or State	
Countr	ry	· ····· <u> </u>
Postal	code	
Phone	Number	(305) 643-0966
Fax Nu	umber	

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 10: page 1 - 990-PF Page 6, Part VIII Open to Public Inspection , and ending For calendar year 2012, or tax period beginning Name of Organization **Employer Identification Number** DO UNTO OTHERS TRUST INC 65-0517915 (E) Expense Account (A) Name and Address (B) Title and Average (C) Compensation (If (D) Cont to Employee Hrs. per Week not paid, enter 0) Ben. Plans & Def Comp & Other Allowances FLALICIA CELORIO PRESIDENT 2746 SW 11 ST Miami, FL 33135

990 COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS FOR PROFESSIONAL SERVICES

Open to Public	Į.		
Inspection Name of Organization	For calendar year 2012, or tax period beginning	, and ending	entification Number
	OTHERS TRUST INC	65-0517	
	mpensation of the Five Highest Paid Independent Contractors for		71.)
(a) Name and	address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		(-) -) po a . ca	(o) component
,			