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Form .990-PF

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

OMB No 1545-0052

		t of the Treasury		Treated as a Privat	e Founda	tion	dina =====		20	14
				be able to use a copy of this	· · · · · · · · · · · · · · · · · · ·	<u> </u>	ting requiren	nents.	Open to public	Inspection
		ndar year 2012 or tax year l	peginning		, and er	loing	A F	. '		
Nar	ne of	foundation					A Employer	dentification	number	
_			IDTO A TO TO A				74 -	2521914		
		HUNTSMAN FO				Room/suite				
		nd street (or P O box number if		address)		Hoom/suite	B Telephone		700	
		HUNTSMAN WA	<u>Y</u>					.)584-5		
•		own, state, and ZIP code	TTM 0.41.00				C If exemption	n application is p	ending, check here	
		T LAKE CITY,								<u> </u>
GC	heck		Initial return	Initial return of a fo	ormer public c	narity	ו טן. Foreigr	n organizations	, cneck nere	
		===	Final return	Amended return			2. Foreign	organizations me	eting the 85% test,	. \Box
			Address change	Name change			check h	ere and attach co	mputation	
H C	_		X Section 501(c)(3) ex		•				tus was terminate	.d
<u></u>		ction 4947(a)(1) nonexemp		Other taxable private founda			under sec	tion 50/(b)(1)	(A), check here	- L
		arket value of all assets at er		· ·	X Accru	uai			60-month termina	ation
		Part II, col. (c), line 16)	1 2 1 //Port / ook	ther (specify) mn (d) must be on cash b	hacie I		under sec	tion 50/(0)(1)	(B), check here	
	\$, , , , , , , , , , , , , , , , , , , ,					(d) p	
Pa	ırt l	The total of amounts in colum	nns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net inv inco			usted net ome	(d) Disburse: for charitable p	urposes
		necessarily equal the amounts		Oxpenses per cooks					(cash basis	only)
	1	Contributions, gifts, grants					N/	<u> </u>	 	
	2	Check X if the foundation interest on savings and tempor	is not required to attach Sch. B arv	3,989.		3,989.			STATEME!	TO 1
	3	cash investments		8,712,823.		2,823.				
	4	Dividends and interest from	n securities	0,114,043.	0,/1	4,043.		ā · · ·	STATEME	-
	Ι.	Gross rents						DE	CEIVE	}
	٠ ا	Net rental income or (loss)						1 \ \	() (L) 1 V C L	- 10
e	68	Net gain or (loss) from sale of as Gross sales price for all	ssets not on line 10	- · · · · · · · · · · · · · · · · ·				(0)		200
Revenue	_ ^D	assets on line 6a				0.		NO NO	V 2 1 201	3 3
æ	7	· · · · · · · · · · · · · · · · · ·				0.	<u> </u>			<u> </u>
	8	Net short-term capital gain	٠, ,						NEKI II	7
	40-	Income modifications Gross sales less returns	•						DEIV, O	
	10a									
	ı	Less Cost of goods sold							 	
	l	Gross profit or (loss)	•	-165,034.	1	1,144.			STATEME	מזיזי ז
	111	Other income Total. Add lines 1 through	. 44	8,551,778.		7,956.			DIATEME	.11 3
	12			250,000.	0,12	0.			250	,000.
	13	Other employee colories or	•	230,000.					250	, 000.
	14	Other employee salaries an Pension plans, employee b	•		-				 	
S		Legal fees	STMT 4	33,440.		0.	-		33	,440.
)SI	1		STMT 5	27,125.		0.			27	,125.
хbе		Accounting fees Other professional fees	DIMI	27,123		· ·				, 123.
Operating and Administrative Expens	1	Interest				 			 	
aţį	l l	Taxes	STMT 6	74,757.		287.			· · · · ·	0.
istra	19	Depreciation and depletion		12,,57					 	
i i	20	Occupancy .							 	
Adn	21	Travel, conferences, and m	neetings							
è	22	Printing and publications	-							
gai	23	Other expenses	STMT 7	38,912.		9,143.			38	,690.
ıţi		Total operating and admi-	•							
era	- '	expenses. Add lines 13 th		424,234.	!	9,430.			349	,255.
Ö	25	Contributions, gifts, grants		6,526,275.	<u> </u>				6,526	
		Total expenses and disbu		, , , , , , , , , , ,					-,,	
	-	Add lines 24 and 25	· · · · · · · · · · · · · · · · · · ·	6,950,509.	-	9,430.			6,875	,530.
	27	Subtract line 26 from line	12;							
		Excess of revenue over expense		1,601,269.					1	
		Net investment income (#			8,71	8,526.				
		Adjusted net income (if neg					N/	'A		
2235 12-0		LHA For Paperwork-Re		instructions.					Form 990-F	PF (2012)

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362,949,131. Form **990-PF** (2012)

Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

4 Add lines 1, 2, and 3

Part IV Capital Gains a	nd Lo	sses for Tax on In	vestmen	t Income						<u> </u>
		nd(s) of property sold (e.g. or common stock, 200 shs			(b)	low acq - Purcha - Donati	uired ase on		acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a REALIZED LOSSES	FRC	M PARTNERSH	IPS			P	7	ARI	OUS	VARIOUS
b										
С										
d										
е					<u>L</u>					
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss s (f) minus	
a										-142,361.
b										
С										
d										
e										
Complete only for assets showing	gaın in c	column (h) and owned by t	he foundation	on 12/31/69					ol. (h) gain	
(i) F.M.V. as of 12/31/69		i) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			col. ((k), but r Losses	not less tha (from col. (n -0-) or (h))
a										-142,361.
b										
c										
d	-									
e										
		∫ If gain, also enter	ın Dart I. line	7	╗					- · · - · · · · · · · · · · · · · · · ·
2 Capital gain net income or (net capi	•	f (loss), enter -0-	in Part I, line)	2				-142,361.
3 Net short-term capital gain or (loss)		, ,	d (6):		٦١					
If gain, also enter in Part I, line 8, co	olumn (c).			-				NT / N	
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	dor C	action 4040(a) for	Poduood	Tay on Not	4	3	ant Inco	· · · · · · · · · · · · · · · · · · ·	N/A	
If section 4940(d)(2) applies, leave this Was the foundation liable for the section If "Yes," the foundation does not qualify	n 4942 t under s	ax on the distributable am ection 4940(e). Do not coi	mplete this pa	ırt.						Yes X No
1 Enter the appropriate amount in ea	ch colun	nn for each year; see the in	structions be	fore making any e	ntries					
(a) Base period years Calendar year (or tax year beginning	ın)	(b) Adjusted qualifying dist	ributions	Net value of no	(c) nchar		se assets		Dıstril (col. (b) dıv	(d) bution ratio yided by col. (c))
2011			4,046.				,928.			.018475
2010			6,469.				,345.		- 4.	.028372
2009		13,04	0,281.	1	44	,944	,222.			.089968
2008		4,77	0,468.	3	40	,009	,433.			.014030
2007		3,41	1,411.	2	85	, 945	,150.			.011930
2 Total of line 1, column (d)								2		.162775
3 Average distribution ratio for the 5-the foundation has been in existence	-		n line 2 by 5,	or by the number	of ye	ars		3		.032555
4 Enter the net value of noncharitable			ine 5					4	30	8,857,717.
5 Multiply line 4 by line 3			-		•			5		0,054,863.
.,	.40/									
6 Enter 1% of net investment income	(1% of F	чагт I, line 27b)						6		87,185.
7 Add lines 5 and 6					•			7	1	0,142,048.
8 Enter qualifying distributions from F	Part XII, I	ine 4						8		6,875,530.
If line 8 is equal to or greater than li See the Part VI instructions.			1b, and comp	lete that part usin	g a 19	% tax rat	e.		_	
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termination of government service, if terminating within 90 days.)

Organizations relying on a current notice regarding disaster assistance check here

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.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?____

THE HUNTSMAN FOUNDATION

Part VII-A Statements Regarding Activities (continued)

section 512(b)(13)? If "Yes," attach schedule (see instructions)

N/A

Located at ► 500 HUNTSMAN WAY, SLC,

securities, or other financial account in a foreign country?

1a During the year did the foundation (either directly or indirectly):

for the benefit or use of a disqualified person)?

before the first day of the tax year beginning in 2012?

and enter the amount of tax-exempt interest received or accrued during the year

(1) Engage in the sale or exchange, or leasing of property with a disqualified person?

If "Yes," attach statement (see instructions)

14 The books are in care of ▶ TOM MUIR

Website address

a disqualified person?

X Yes [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.)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

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48

X

N/A

2b

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations	must complete the	s part. Foreign fou	ndations,	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitat	ble, etc., purposes:			
a	Average monthly fair market value of securities			1a	307,924,873.
Ь	Average of monthly cash balances			1b	307,924,873. 5,636,261.
C	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	313,561,134.
е	Reduction claimed for blockage or other factors reported on lines 1a and			-2	
	1c (attach detailed explanation)	1e	0.	1	
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	313,561,134.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	nt, see instructions)		4	4,703,417.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o	on Part V, line 4		5	308,857,717.
6	Minimum investment return. Enter 5% of line 5		•	6	15,442,886.
P	art XI. Distributable Amount (see instructions) (Section 4942(j)(3) art XI. foreign organizations check here		erating foundations ar	nd certain	
1	Minimum investment return from Part X, line 6			1	15,442,886.
2a		28	174,371.		
b	Income tax for 2012. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b		•	2c	174,371.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	15,268,515.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	15,268,515.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Par	rt XIII, line 1		7	15,268,515.
P	art XII- Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	irposes:		-144-1	C 07E E20
8		•		1a	6,875,530.
b	1			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	able, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:			200 m	
a				3a	
	Cash distribution test (attach the required schedule)	15 (300)		3b	6 075 520
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8,			4	6,875,530.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	estment/			^
_	income. Enter 1% of Part I, line 27b			5	6 975 530
6	Adjusted qualifying distributions. Subtract line 5 from line 4	1	and a contract of the contract of	6	6,875,530.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years.	wnen calculating wh	etner the foundation	qualities fo	or the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,	- Co.pcc			
line 7				15,268,515.
2 Undistributed income, if any, as of the end of 2012				, -
a Enter amount for 2011 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2012:		0.		
i i i i i i i i i i i i i i i i i i i				
a From 2007 b From 2008				
c From 2009				
dFrom 2010 1,667,596.				
e From 2011				
f Total of lines 3a through e	1,667,596.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ►\$ 6,875,530.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				6,875,530.
e Remaining amount distributed out of corpus	0.		· · · · · · · · · · · · · · · · · · ·	
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	1,667,596.			1,667,596.
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		-	
b Prior years' undistributed income. Subtract		······································		
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		_		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		•		
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line			•	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				6,725,389.
be distributed in 2013 7 Amounts treated as distributions out of				0,723,303.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012				
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Part XVI-A	Analy	sis of	Income-	Producing	Activities
------------	-------	--------	---------	-----------	-------------------

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a					
b					
C					
đ					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	3,989.	
4 Dividends and interest from securities			14	8,712,823.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	1				
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a PARTNERSHIP INCOME	_		01	6,263.	
b PARTNERSHIP INCOME	525990	-182,441.	01	11,144.	
Ç					
d	_				
e					
12 Subtotal. Add columns (b), (d), and (e)		-182,441.		8,734,219.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	8,551,778.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Lille No. ▼	the foundation's exempt purposes (other than by providing funds for such purposes).	and addomptionment of
	N/A	
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Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

4	Did the or	ganization directly or indir	rectly engage in any	of the followin	g with any other organizatio	n described in secti	ιοπ 501(c) of		Yes	No
•					7, relating to political organi		011 30 1(0) 01	ŀ		
		from the reporting founda				24401101				
a			ation to a noncharita	nie eveilibt oi f	janization of,			1a(1)	3	X
	(1) Cash		•					1a(1)		X
_	(2) Other			•				114(2)		
D	Other tran		hla					45/41		X ~
		of assets to a noncharital	· -			•		1b(1)		X
		nases of assets from a nor	· ·	rganization				1b(2)		X
	• •	al of facilities, equipment,						1b(3)		X
	` '	bursement arrangements	•					1b(4)		X
	• •	s or loan guarantees .						1b(5)		
	. ,	rmance of services or me	•	-	•			1b(6)		X
	_	f facilities, equipment, ma	-					16		X
đ		•		_	dule. Column (b) should alw				ets,	
					ed less than fair market value	e in any transaction	or snaring arrange	ment, snow in		
) the value of the goods,				T (4)				
a)L	ne no	(b) Amount involved	<u> </u>	noncharitable	exempt organization	(0) Description	of transfers, transaction	ns, and sharing an	angeme	nts
			N/A							
			<u> </u>							
										
										
							· ·			
					•					
			1							
										
						-				
2 a	Is the four	ndation directly or indirect	tly affiliated with, or i	related to, one	or more tax-exempt organiz	rations described	······			
		501(c) of the Code (other						Yes	X	No
h		omplete the following sch		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		••				
	11 103, 0	(a) Name of org			(b) Type of organization		(c) Description of re	lationship		
		N/A	<u></u>		(-/),		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
		14/21								
-										
_			<u> </u>			· · · · · · · · · · · · · · · · · · ·				
	Under	penalties of perjuty declare	that thave examined the	s return, includin	g accompanying schedules and	statements, and to the	best of my knowledge			
Sig	and h	elief, it is true, correct/any cor	moles Declaration of pr	eparer (other tha	g accompanying schedules and n taxpayer) is based on all inform	ation of which oppored	r has any knowledge		e prepar	er
	re		1	•	1 11/11/12	ILA.	θ	shown below X Yes		¬'
		nature of officer of truscee			Date	Title	mp.	- LAL Yes		J No
	l Oigi			Dranarar's s		Date	Check if	PTIN		
		Print/Type preparer's na	שוווג	Preparer's s	`	Date	self- employed	1 1114		
Da	id.	GYD DON T	ZODDA GU		Julach	10/24/13	Sch- chiployed	D0010E	47E	
Pa			ZORBACH	TXINTUL	re provide	10,24,13	1	P00125		
	eparer	Firm's name ► DEL	OLTTE TAX	LLP	1)		Firm's EIN ► 8	0-10657	12	
US	e Only				·					
		Firm's address ► 22			ARA STREET					_
		SA	N JOSE, C	A 9511	. j _		Phone no. 4	08-704-		
								Form 990	-PF(2012)

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FORM 990-PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME*	PURPOSE	AMOUNT
Utah State University / Armenian Scholar c/o Office of the President 1400 Old Main Hill Logan, UT 84322-1400	GENERAL SUPPORT	\$161,949
Utah State University/ Kimball Fund 2400 Old Main H1 Logan, UT 84322	GENERAL SUPPORT	\$8,579
Westminster College Scholoarship 1840 South 1300 East Salt Lake City, UT 84105	GENERAL SUPPORT	\$12,091
Snow College/KHH Library Full-screen150 E College Ave Ephraim, UT 84627	GENERAL SUPPORT	\$250,000
American Education Services Scholarship P O Box 2461 Harrisburg, PA 17105-2461	GENERAL SUPPORT	\$95,000
US Department of Education Scholarship 400 Maryland Ave, SW Washington, DC, 20202	GENERAL SUPPORT	\$48,000
J Reuben Clark Law School Scholarship 341 E Campus Dr Provo, UT 84602	GENERAL SUPPORT	\$200
Miami Int'L Univer Of Art & Design/ZITO 1501 Biscayne Boulevard, Suite 100 Miami , FL 33132	GENERAL SUPPORT	\$ 12,327
IDA Crown Jewish Academy 28282 W Pratt Blvd Chicago, IL 60645	GENERAL SUPPORT	\$1,000
University Of Pennsylvania Scholarship 250 University Avenue California, PA 15419	GENERAL SUPPORT	\$37,875
BYU GBH Alumni & Visit CTR Brigham Young University 246 Snow Building, Rexburg, ID 83460-1210	GENERAL SUPPORT	\$300,000
BYU Melvin J Ballard Center Brigham Young University 246 Snow Building, Rexburg, ID 83460-1210	GENERAL SUPPORT	\$200,000
BYU JMH Int'L Student Fellowship 246 Snow Building, Rexburg, ID 83460-1210	GENERAL SUPPORT	\$23,025
Sigma Chi Foundation 1714 Hinman Avenue Evanston, IL 60201	GENERAL SUPPORT	\$100,000
Utah Symphony 123 West South Temple Salt Lake City, UT 84101	GENERAL SUPPORT	\$150,000
Cause For Hope Foundation Inc 132 Pierpont Ave Ste 250 South Jordan, UT 84095	GENERAL SUPPORT	\$25,000
YWCA 375 South 3rd Street San Jose, CA 95112	GENERAL SUPPORT	\$50,000

FORM 990-PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME*	<u>PURPOSE</u>	AMOUNT
Teton Valley Health Care Foundation 120 East Howard Avenue Dnggs, ID 83422	GENERAL SUPPORT	\$100,000
Dixie State College Kimball Fund 225 South 700 East St. George, UT 84770	GENERAL SUPPORT	\$3,148
Utah Valley University - Kimball Fund 800 W University Pkwy, Msc 111 Orem, UT 84058	GENERAL SUPPORT	\$5,941
Idaho State University Kimball Fund 920 South 8th Avenue, Stop D8219 Pocatello, ID 83209-8219	GENERAL SUPPORT	\$1,639
Assistance for Surviving Children Department of Affairs, Washington, DC 20420	GENERAL SUPPORT	\$10,000
Church of Jesus Christ of Latter-day Saints 50 East North Temple Salt Lake City, UT 84150	GENERAL SUPPORT	\$250,000
This Is The Place Foundation 2601 East Sunnyside Avenue Salt Lake City, UT 84108	GENERAL SUPPORT	\$50,000
University of Arkansas College of Nursing University of Arkansas for Medical Services 4301 West Markham Street, #716 Little Rock, AR 72205	GENERAL SUPPORT	\$15,000
Paige Peterson Consulting 419 Judy Rd Fremont, Nebraska, 68025	GENERAL SUPPORT	\$50,000
Idaho State University Foundation Campus Box 8265 Pocatello, ID 83209	GENERAL SUPPORT	\$100,000
Sons of Utah Pioneers 3261 East Louise Avenue Salt Lake City, UT 84109	GENERAL SUPPORT	\$5,000
Utah Valley State College 800 West University Parkway Room AD-218 Orem, UT 84058	GENERAL SUPPORT	\$183,000
Utah State University / JMH Business School c/o Office of the President 1400 Old Main Hill Logan, UT 84322-1400	GENERAL SUPPORT	\$2,500,000
Dr Patrick T Harker Professorship The Wharton School University of Pennsylvania 100 College Hall, Philadelphia, PA 19104-6380	GENERAL SUPPORT	\$400,000
The Wharton School Fund University of Pennsylvania 100 College Hall, Philadelphia, PA 19104-6380	GENERAL SUPPORT	\$25,000
University of Utah Basketball Program Jon M Huntsman Center, 1825 E South Campus Dr Salt Lake City, UT 84112	GENERAL SUPPORT	\$100,000

FORM 990-PF. PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME*	PURPOSE	AMOUNT
USU JMH Business School Expansion	GENERAL SUPPORT	\$1,000,000
c/o Office of the President		
1400 Old Main Hill		
Logan, UT 84322-1400		
USU JMH Pres Chair in Leadership	GENERAL SUPPORT	\$75,000
c/o Office of the President		
1400 Old Main Hill		
Logan, UT 84322-1400		
USU-JMH Pres Chair Econ, Finance	GENERAL SUPPORT	\$150,000
0900 Old Main Hill		
Logan, UT 84322-0900		
SJS Med Fund	GENERAL SUPPORT	\$25,000
PO Box 350333		
Westminster, CO 80035 0333		
Randy Berry Memonal	GENERAL SUPPORT	\$2,500
2145 Shendan Road		
Evanston, IL 60208-3118		
		\$6,526,275

\$6,526,275

All entries receiving contributions and grants are qualified organizations under IRC Section 501(c)(3) and public charities described in Section 509(a)

FORM 990-PF INTEREST ON SAVI	NGS AND TEN	MPORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
CONTANGO GOLDMAN SACHS ZIONS BANK			•	42 3,55	8. 26. 55.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	OLUMN A		3,98	39.
FORM 990-PF DIVIDEND	S AND INTE	REST FROM SE	CURITIES	STATEMENT	2
SOURCE	GROS	CZ S AMOUNT	APITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT)
CONTANGO MMI HUNTSMAN CORPORATION	8	23. ,712,800.	0.	8,712,80	23.
TOTAL TO FM 990-PF, PART I, I	N 4 8	,712,823.	0.	8,712,82	23.
FORM 990-PF	OTHER :	INCOME		STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
		I LIK DOOKD			
PARTNERSHIP INCOME PARTNERSHIP INCOME	_	6,263 -171,297		•	
	LINE 11	6,263	11,144	•	
PARTNERSHIP INCOME		6,263 -171,297	11,144	•	4
PARTNERSHIP INCOME TOTAL TO FORM 990-PF, PART I,		6,263 -171,297 -165,034	11,144 11,144 (C) ADJUSTED	STATEMENT (D) CHARITAE	4 3LE
PARTNERSHIP INCOME TOTAL TO FORM 990-PF, PART I, FORM 990-PF	LEGAI (A) EXPENSES	6,263 -171,297 -165,034 L FEES (B) NET INVEST	11,144 11,144 (C) ADJUSTED	STATEMENT (D) CHARITAE	4 3LE

(A)	FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 5			
TO FORM 990-PF, PG 1, LN 16B	DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITABL		
FORM 990-PF TAXES STATEMENT 6 (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABLE PER BOOKS MENT INCOME NET INCOME PURPOSES FEDERAL INCOME TAX EXPENSE 0. 287. 0. TO FORM 990-PF, PG 1, LN 18 74,757. 287. 0. FORM 990-PF OTHER EXPENSES NET INVEST- ADJUSTED CHARITABLE PER BOOKS MENT INCOME NET INCOME PURPOSES LICENSES AND FEES NET INVEST- NET INCOME NET INCOME PURPOSES LICENSES AND FEES 10. 0. 10. LICENSES AND FEES 10. 0. 10. OFFICES LIABILITY INSURANCE 8,813. 0. 10. OFFICE EXPENSE 141. 0. 10. PAYROLL TAX EXPENSE 141. 0. 141. OFFICE EXPENSE 141. 0. 141. OFFICE EXPENSE 141. 0. 17,277. ADVISOR FEES - CONTANGO 222. 222. 0. 0. PORTFOLIO DEDUCTIONS FROM PARTNERSHIPS 0. 8,921. 0. BANK FEES 120. 0. 1,879.	ACCOUNTING FEES	27,125.	0.		27,125		
CA CB NET INVEST- NET INCOME CHARITABLE PURPOSES	TO FORM 990-PF, PG 1, LN 16B	27,125.	0.		27,125		
EXPENSES NET INVEST- ADJUSTED CHARITABLE	FORM 990-PF	TAX	ES	S	TATEMENT		
### TO FORM 990-PF, PG 1, LN 18	DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITABL		
Ca		•					
(A)	TO FORM 990-PF, PG 1, LN 18	74,757.	287.		0		
DESCRIPTION EXPENSES PER BOOKS NET INVEST- NET INCOME ADJUSTED PURPOSES LICENSES AND FEES 10. 0. 10. OFFICERS LIABILITY INSURANCE 10,450. 0. 10,450. UMBRELLA INSURANCE 8,813. 0. 8,813. OFFICE EXPENSE 141. 0. 141. PAYROLL TAX EXPENSE 17,277. 0. 17,277. ADVISOR FEES - CONTANGO 222. 222. 0. PORTFOLIO DEDUCTIONS FROM PARTNERSHIPS 0. 8,921. 0. BANK FEES 120. 0. 120. OTHER PAYROLL FEES 1,879. 0. 1,879.	FORM 990-PF	OTHER E	XPENSES	S	PATEMENT		
PARTNERSHIPS 0. 8,921. 0. BANK FEES 120. 0. 120. OTHER PAYROLL FEES 1,879. 0. 1,879.	LICENSES AND FEES OFFICERS LIABILITY INSURANCE UMBRELLA INSURANCE OFFICE EXPENSE PAYROLL TAX EXPENSE ADVISOR FEES - CONTANGO	10. 10,450. 8,813. 141. 17,277.	NET INVEST- MENT INCOME 0. 0. 0. 0. 0.	ADJUSTED	CHARITABL PURPOSES 10 10,450 8,813 141 17,277		
TO FORM 990-PF, PG 1, LN 23 38,912. 9,143. 38,690.	PARTNERSHIPS BANK FEES	120.	0.		120		
	TO FORM 990-PF, PG 1, LN 23	38,912.	9,143.		38,690		

FORM 990-PF OTHER INCREASES IN N	IET ASSETS OR FU	JND BALANCES	STATEMENT	8
DESCRIPTION			AMOUNT	
UNREALIZED GAIN PRIOR PERIOD ADJUSTMENT			128,513,8	00.
TOTAL TO FORM 990-PF, PART III, LI	INE 3		128,513,8	40.
FORM 990-PF CO	DRPORATE STOCK		STATEMENT	9
DESCRIPTION		BOOK VALUE	FAIR MARKE	r
HUNTSMAN CORPORATION		346,333,800.	346,333,8	00.
TOTAL TO FORM 990-PF, PART II, LIN	NE 10B	346,333,800.	346,333,80	00.
FORM 990-PF OTH	HER INVESTMENTS		STATEMENT	10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE	r
GS CAPITAL PARTNERS III, LP GS PEP TECHNOLOGY FUND FOUNDATION ENTERPRISES LLC ARDEN REAL ESTATE PARTNERS, LP	FMV FMV FMV FMV	18,941. 275,391. 10,499,213. 2,759,888.	18,9 275,3 10,499,2 2,759,8	91. 13.
TOTAL TO FORM 990-PF, PART II, LIN	NE 13	13,553,433.	13,553,4	33.

	PART VIII - LIST OF OFFICERS, DIRECTORS STAT TRUSTEES AND FOUNDATION MANAGERS					
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE		
JON M. HUNTSMAN 500 HUNTSMAN WAY SALT LAKE CITY, UT 8410	PRESIDENT 1.00	0.	0.	0.		
KAREN H. HUNTSMAN 500 HUNTSMAN WAY SALT LAKE CITY, UT 8410	VICE PRESIDENT 1.00	/TTEE	0.	0.		
CHRISTENA DURHAM 500 HUNTSMAN WAY SALT LAKE CITY, UT 8410	VICE PRESIDENT 1.00	/TTEE	0.	0.		
DAVID H. HUNTSMAN 500 HUNTSMAN WAY SALT LAKE CITY, UT 8410		/TTEE 125,000.	0.	0.		
PAUL C. HUNTSMAN 500 HUNTSMAN WAY SALT LAKE CITY, UT 8410		/TTEE 125,000.	0.	0.		
JAMES H. HUNTSMAN 500 HUNTSMAN WAY SALT LAKE CITY, UT 8410	VICE PRESIDENT 1.00	/TTEE 0.	0.	0.		
JENNIFER H. PARKIN 500 HUNTSMAN WAY SALT LAKE CITY, UT 8410	VICE PRESIDENT 1.00	/TTEE 0.	0.	0.		
KATHLEEN HUFFMAN 500 HUNTSMAN WAY SALT LAKE CITY, UT 8410	VICE PRESIDENT 1.00	/TTEE	0.	0.		
J. KIMO ESPLIN 500 HUNTSMAN WAY SALT LAKE CITY, UT 8410	VICE PRESIDENT 1.00	/TREAS	0.	0.		
TOTALS INCLUDED ON 990	PF, PAGE 6, PART VIII	250,000.	0.	0.		

Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

•	are filing for an Automatic 3-Month Extension, comple	-		thus forms		► X	
Do not		an automa	itic 3-month extension on a previous	sly filed Fo			
	onic filing _(e-file) . You can electronically file Form 8868 if y						
require	d to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 88	368 to request	an extension	
of time	to file any of the forms listed in Part I or Part II with the ex-	ception of	Form 8870, Information Return for	Transfers /	Associated With	n Certain	
Persor	al Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details	on the elec	ctronic filing of t	this form,	
visit wi	vw irs gov/efile and click on e-file for Chanties & Nonprofits	<u> </u>					
Part	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded).			
A corp	pration required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete			
Part I o	nly .		•			▶ □	
	er corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time		
to tile i	ncome tax returns.						
Турес	 Name of exempt organization or other filer, see instru 	ictions.		Employer	dentification r	number (EIN) or	
print					74 0501		
File by th	THE HUNTSMAN FOUNDATION				74-2521	1914	
due date filing you return So	for Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	Social security number (SSN)		
instructio		oreign add	lress, see instructions.				
Enter t	ne Return code for the return that this application is for (file	e a separa	te application for each return)	•		0 4	
Applic	ation	Return	Application			Return	
ls For		Code	Is For			Code	
	90 or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 9		02	Form 1041-A			08	
	720 (individual)	03	Form 4720			09	
Form 9		04	Form 5227			10	
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
	90-T (trust other than above)	06	Form 8870			12	
01117	TOM MUIR		1 0111 0070				
	books are in the care of ▶ 500 HUNTSMAN W	AY -					
	phone No. ► 801-584-5700		FAX No.				
	e organization does not have an office or place of busines		•				
	is is for a Group Return, enter the organization's four digit	-	· · · · · · · · · · · · · · · · · · ·		r the whole gro	• •	
box 🕨					ers the extensi	on is for.	
1 1	request an automatic 3-month (6 months for a corporation	•	•		_ .		
-		it organiza	tion return for the organization name	ed above.	ine extension		
	s for the organization's return for: ▶ X calendar year 2012 or						
,			at a a alice a				
,	tax year beginning	, an	d ending		 •		
2 1	the toy year entered in line 1 in far less than 12 months.	book roop	an: Intial rature	Final retur	_		
2 1	f the tax year entered in line 1 is for less than 12 months, c Change in accounting period	neck reas	on: L Initial return L	rınaı retur	п		
	Change in accounting period						
3a I	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069 e	nter the tentative tax less any				
	nonrefundable credits. See instructions.	J. 0000, 6	The till territative tax, 1655 arry	3a	s 2	259,679.	
-	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	34		,	
	• •	=		3ь	s 1	L69,679.	
-	stimated tax payments made. Include any prior year overp Balance due. Subtract line 3b from line 3a Include your pa			30	-3	200,0100	
	y using EFTPS (Electronic Federal Tax Payment System)	•	• • •	3c	s	90,000-	
	n. If you are going to make an electronic fund withdrawal						
	you are going to make an electronic fand withdrawal		on other property of the prope	<u> </u>	ioi payincili		

LHA 223841 01-21-13 Form 8868 (Rev. 1-2013)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Application Return Server Code Is For Is For	Form 886	58 (Rev. 1-2013)						Page 2
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Part II	• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		>	
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).		• • • • • • • • • • • • • • • • • • • •			led Form	8868	В.	
Type or print Fib by the Code centre filer, see instructions THE HUNTSMAN FOUNDATION T4-2521914 Number, street, and room or suite no. If a P O. box, see instructions. Social security number (SSN) Number, street, and room or suite no. If a P O. box, see instructions. Sol HUNTSMAN WAY City, town or post office, state, and ZIP code. For a foreign address, see instructions. SALT LAKE CITY, UT 84108 Enter the Return code for the return that this application is for (file a separate application for each return) Application Is For Code Return Code Form 990 or Form 990 EZ D1					-1 /	! -		
Name of exempt organization or other filer, see instructions	Part II	Additional (Not Automatic) 3-Month E	xtensio					
THE HUNTSMAN FOUNDATION THE HUNTSMAN FOUNDATION THE HUNTSMAN FOUNDATION THE HUNTSMAN FOUNDATION Number, street, and room or suite no. If a P O. box, see instructions. Social security number (SSN) TON, town or post office, state, and ZIP code. For a foreign address, see instructions. SALT LAKE CITY, UT 84108 Enter the Return code for the return that this application is for (file a separate application for each return) Told Application Return Code		T						
The byth grant The Huntsman Foundation The byth grant The case of the		Name of exempt organization or other filer, see instru	ictions		Employe	, ,		
Total Days, steet, and Days of Fice, state, and ZIP code. For a foreign address, see instructions. SALT LAKE CITY, UT 84108 Enter the Return code for the return that this application is for (file a separate application for each return) D	•	THE HUNTSMAN FOUNDATION						
Enter the Return code for the return that this application is for (file a separate application for each return) Application	filing your	Number, street, and room or suite no. If a P O. box, see instructions.			Social se	Social security number (SSN)		
Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Section Section	instructions		oreign add	dress, see instructions.				
Application Return Application Is For Code Cod		<u></u>						
SFOR Gode IsFOR	Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)				0 4
Form 990 or Form 990-EZ Form 990-BL Form 990-BL O2 Form 1041-A O8 Form 4720 (individual) O3 Form 4720 (individual) O3 Form 4720 (individual) O4 Form 5227 D5 Form 990-T (sec. 401(a) or 408(a) trust) O5 Form 6069 D1 Form 990-T (trust other than above) O6 Form 8870 D1 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. TOM MUTR The books are in the care of ▶ 500 HUNTSMAN WAY - SLC, UT 84108 Telephone No. ▶ 801-584-5700 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four dight Group Exemption Number (GEN) If this is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. If it is tor part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. NOVEMBER 15, 2013. For calendar year 2012, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Change in accounting penod State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION NECESSARY IN ORDER TO PREPARE AND FILE A COMPLETE AN ACCURATE RETURN.	Applicati	ion	Return	Application				Return
Form 990 BL Form 4720 (individual) Form 990 FF Form 9	is For		Code	ls For				Code
Form 4720 (individual) Form 990-PF O4 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) O5 Form 6069 11 Form 990-T (trust other than above) O6 Form 8870 TOM MUIR The books are in the care of ▶ 500 HUNTSMAN WAY - SLC, UT 84108 Telephone No. ▶ 801-584-5700 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for part of the group, check this box ▶ and attach a list with the names and ElNs of all members the extension is for. NOVEMBER 15, 2013 For calendar year 2012, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Change in accounting period To ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION NECESSARY IN ORDER TO PREPARE AND FILE A COMPLETE AN ACCURATE RETURN. Ba If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	Form 990) or Form 990-EZ	01					
Form 990-PF	Form 990	ABL	02	Form 1041-A				08
Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) O6 Form 8870 12 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. TOM MUIR The books are in the care of 500 HUNTSMAN WAY - SLC, UT 84108 Telephone No. 801-584-5700 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. I request an additional 3-month extension of time until NOVEMBER 15, 2013. For calendar year 2012, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, check reason: Change in accounting period State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION NECESSARY IN ORDER TO PREPARE AND FILE A COMPLETE AN ACCURATE RETURN. Ba If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. Ba \$ 259,679	Form 472	20 (individual)	03	Form 4720				09
Form 990-T (trust other than above) STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. TOM MUIR The books are in the care of ▶ 500 HUNTSMAN WAY - SLC, UT 84108 Telephone No. ▶ 801-584-5700 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box I request an additional 3-month extension of time until NOVEMBER 15, 2013. For calendar year 2012, or other tax year beginning , and ending If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return Change in accounting period The state in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION NECESSARY IN ORDER TO PREPARE AND FILE A COMPLETE AN ACCURATE RETURN. 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	Form 990	}PF	04	Form 5227			·	10
STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. TOM MUIR Tole books are in the care of ▶ 500 HUNTSMAN WAY - SLC, UT 84108 Telephone No. ▶ 801-584-5700 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box. If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN). If this is for the whole group, check the box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. I request an additional 3-month extension of time until NOVEMBER 15, 2013. For calendar year 2012, or other tax year beginning , and ending. If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return Change in accounting period. State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION NECESSARY IN ORDER TO PREPARE AND FILE A COMPLETE AN ACCURATE RETURN. 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	Form 990)-T (sec. 401(a) or 408(a) trust)	05					11
TOM MUIR The books are in the care of ▶ 500 HUNTSMAN WAY - SLC, UT 84108 Telephone No. ▶ 801-584-5700 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box.								12
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ■ and attach a list with the names and EINs of all members the extension is for. I request an additional 3-month extension of time until NOVEMBER 15 , 2013. For calendar year 2012 , or other tax year beginning , and ending If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return	Teleph	pooks are in the care of \blacktriangleright 500 HUNTSMAN WARDON No. \blacktriangleright $801-584-5700$		FAX No. ▶				
box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for. 4 I request an additional 3-month extension of time until 5 For calendar year 2012, or other tax year beginning 6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION NECESSARY IN ORDER TO PREPARE AND FILE A COMPLETE AN ACCURATE RETURN. 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.		•		-	thus is for	- 44	- udeala avera el	
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For calendar year 2012, or other tax year beginning					all memo	ers t	ine extension is	or.
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Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION NECESSARY IN ORDER TO PREPARE AND FILE A COMPLETE AN ACCURATE RETURN. 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 8a \$ 259,679			hock reas		-T	otur	m	 '
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nonrefundable credits. See instructions.								
nonrefundable credits. See instructions. 8a \$ 259,679	_					•		
nonrefundable credits. See instructions. 8a \$ 259,679	8a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720.	or 6069, e	nter the tentative tax, less any		T		·
			,	•	8a	\$	259	,679.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	b If th	nis application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated				
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	tax	payments made Include any prior year overpayment all	lowed as a	a credit and any amount paid				
previously with Form 8868. 8b \$ 259,679	pre	eviously with Form 8868.			8b	\$	259	,679.
c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using	c Bal	lance due. Subtract line 8b from line 8a Include your pa	yment wit	th this form, if required, by using				
	EF					\$		0.
Signature and Verification must be completed for Part II only.		_		-	-			
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.	Under pen it is true, c	afties of perjury, I declare that I have examined this form, includi orrect, and complete, and that I am authorized to prepare this fo	ing accomp orm.	panying schedules and statements, and to				lief,
Signature → Title ➤ CPA Date ➤ 7/28/13	Signature-	>toan / y/ rake Title >	C	PA	Date	•	7/28/13	
// Form 8868 (Rev. 1-20 ⁻	,	//						v. 1-2013)

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