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Department of the Treasury

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

men	ai nev	ende Service 1 Hote: The Todaldation Thay	be able to also a sopy of this	return to battery state repe	rung requirements.	_ Open to public inspection
Forc	alen	dar year 2012 or tax year beginning MAR	1, 2012	, and ending	FEB 28, 2013	
Nan	ne of	foundation		-	A Employer identification	number
A	QU:	IDNECK FOUNDATION				
C	/0	GOLDMAN SACHS			13-3102904	
Num	ber ar	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
0	LIV	VER ST TOWERS, 125 HIGH	STREET	1700	617-204-20	15
City	or to	own, state, and ZIP code			C If exemption application is p	ending, check here
В	os:	ron, MA 02110				•
G C	heck	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test,
H C	heck	type of organization: X Section 501(c)(3) ex	xempt private foundation		E If private foundation sta	
] Sec		Other taxable private founda	ation	under section 507(b)(1)	
I Fa	ır ma	rket value of all assets at end of year J Account		Accrual	F If the foundation is in a	
(fr	om F	Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)	
		3,285,349. (Part I, colu		basis.)		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		necessarily equal the amounts in column (a))	expenses per books	` income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
		Check X If the foundation is not required to attach Sch. B		-		
	3	Interest on savings and temporary cash investments	8.	8.		STATEMENT 1
	4	Dividends and interest from securities	45,946.	45,946.	,	STATEMENT 2
	5a	Gross rents				
	b	Net rental income or (loss)				
•	6a	Net gain or (loss) from sale of assets not on line 10	220,683.			
ž	b	Gross sales price for all assets on line 6a 226, 969.				
eve	7	Capital gain net income (from Part IV, line 2)		220,683.		
מיש	8	Net short-term capital gain			/.	12/18/
SCANNED	9	Income modifications			1, 1, 1	10,1
	10a	Gross sales less returns and allowances	•		/2.1. U"/	3113 75/
Ž	b	Less Cost of goods sold			/ \\'/	6 / / >
T	C	Gross profit or (loss)			\ \ \ < < \.	
	11	Other income			1 1 11	
구	12	Total. Add lines 1 through 11	266,637.	266,637		
<u>ר</u>	13	Compensation of officers, directors, trustees, etc	0.	0.	. \ ` \	0.
-	14	Other employee salaries and wages			\	
ے م	15	Pension plans, employee benefits			<u> </u>	
Sesuec 2012	16a	Legal fees				
Cxpenses	b	Accounting fees STMT 3	2,750.	0.		0.
Ä	C	Other professional fees STMT 4	31,268.	31,268		0.
and Administrative		Interest				
trai	18	Taxes STMT 5	4,236.	0.	,	0.
nis	19	Depreciation and depletion				
Ē	20	Occupancy				
¥	21	Travel, conferences, and meetings				
ä	22	Printing and publications				
ng B	23	Other expenses STMT 6	355.	0.	•	0.
rati	24	Total operating and administrative		.		
Operating		expenses. Add lines 13 through 23	38,609.	31,268	•	0.
J	ı	Contributions, gifts, grants paid	88,903.			88,903.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	127,512.	31,268		88,903.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	139,125.			
		Net investment income (if negative, enter -0-)		235,369		· · ·
	C	Adjusted net income (if negative enter -0-)	1	1	N/A	1

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LHA For Paperwork Reduction Act Notice, see instructions.

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Б	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	<u> </u>	nd of y	year
	ar L	Balance Sileets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing	11,418.	1,45	3.	1,453. 19,916.
	2	Savings and temporary cash investments	23,840.	19,91	6.	19,916.
		Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable ▶		,	Ì	-
		Less; allowance for doubtful accounts ▶				-
	5	Grants receivable				
		Receivables due from officers, directors, trustees, and other		-		· · · · · · · · · · · · · · · · · · ·
		disqualified persons			l	
	7	Other notes and loans receivable	***			-
	•	Less; allowance for doubtful accounts				
(0	Ω	Inventories for sale or use				
Assets		Prepaid expenses and deferred charges				
As		Investments - U.S. and state government obligations				
		Investments - corporate stock				
	l	Investments - corporate stock				
	l	·			-	
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
		Investments - mortgage loans Investments - other STMT 8	895,582.	1,070,73	2	3,263,980.
			093,304.	1,070,73	4.	3,203,300.
	14	Land, buildings, and equipment basis				
	l	Less accumulated depreciation				
	15	Other assets (describe ►)			_	
			020 040	1 000 10	,	2 205 240
	T	Total assets (to be completed by all filers)	930,840.	1,092,10	 	3,285,349.
	١	Accounts payable and accrued expenses			_	
	18	Grants payable				
ies	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				•
į	21	Mortgages and other notes payable			_	
_	22	Other liabilities (describe)			_	-
_	23	Total liabilities (add lines 17 through 22)	0.		0.	
		Foundations that follow SFAS 117, check here				• •
s		and complete lines 24 through 26 and lines 30 and 31.				_
Ce		Unrestricted				
盲	25	Temporarily restricted			_	
ä	26	Permanently restricted				
Š		Foundations that do not follow SFAS 117, check here			- 1	•
Net Assets or Fund Balances		and complete lines 27 through 31.				
ţ	27	Capital stock, trust principal, or current funds	2,152,294.	2,152,29	_	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.		0.	
Ž	29	Retained earnings, accumulated income, endowment, or other funds	-1,221,454.	-1,060,19		
Ž	30	Total net assets or fund balances	930,840.	1,092,10	1.	
_	31	Total liabilities and net assets/fund balances	930,840.	1,092,10	1.	
F	art	Analysis of Changes in Net Assets or Fund B	Balances			
					1 1	
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30] [
	•	st agree with end-of-year figure reported on prior year's return)			1	930,840.
		r amount from Part I, line 27a			2	139,125.
		er increases not included in line 2 (itemize)	SEE STA	ATEMENT 7	3	22,136.
		lines 1, 2, and 3			4	1,092,101.
		reases not included in line 2 (itemize)			5	0.
6	Tota	l net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30		6	1,092,101.
						Form 990-PF (2012)

C/O GOLDMAN SACHS

Part IV Capital Gains	and Lo	sses for Tax on In	vestment	Income						
(a) List and descr 2-story brick wa	ribe the ki rehouse;	nd(s) of property sold (e.g. or common stock, 200 shs	, real estate, . MLC Co.)		(b) h	low acquir - Purchase - Donation	ed (c) Date ac (mo., day		(d) Date sold (mo., day, yr.)
1a 400 SHARES EXP	RESS	SCRIPTS				D				
b 7000 SHARES ME	DCO 1	HEALTH SOLUT	IONS			D				
С					ļ		_			
<u>d</u>					├—					
_e	45.1				<u> </u>					
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gair (e) plus (1	or (loss) f) minus (g)
a 25,369.				6,28	6.					19,083.
b 201,600.										201,600.
<u> </u>										
<u>d</u>										
Complete only for assets shown	on asin in	column (h) and owned by t	he foundation	on 12/31/69			(I) C	Cole (Col	(h) goup	minuo
Complete only for assets shown		(j) Adjusted basis		cess of col. (I)			col. (k	Sains (Col. k), but not	t less thai	11111us 1 -0-) or
(i) F.M.V. as of 12/31/69	,	as of 12/31/69		col. (j), if any				Losses (fr		
				· · · · · · · · · · · · · · · · · · ·						19,083.
b								•	•	201,600.
C						-				20270000
d						-		-		
e				-				•		
		∫ If gain, also enter	in Part I line	7	٦					
2 Capital gain net income or (net ca	pital loss				•	2				220,683.
3 Net short-term capital gain or (los	ss) as def	•								_
If gain, also enter in Part I, line 8,			u (0).		ا (
If (loss), enter -0- in Part I, line 8						3			N/A	
Part V Qualification U	Inder S	section 4940(e) for	Reduced	Tax on Net	: Inv	estmer	it Inco	me		
(For optional use by domestic private If section 4940(d)(2) applies, leave t		•	10 10 (u) tax 011	not invostment ii	100111	,				
Was the foundation liable for the sec If "Yes," the foundation does not qua				•	rıod?					Yes X No
1 Enter the appropriate amount in	each colu	mn for each year; see the ır	nstructions be	fore making any e	entries	S.		_		
(a) Base period years Calendar year (or tax year beginni	ng in)	(b) Adjusted qualifying dis		Net value of no		rıtable-use			Dıstrıt ol. (b) dı	(d) oution ratio vided by col. (c))
2011		39	9,014.		2	,960,	679.			.134771
2010		1,05	4,287.			,287,				.320681
2009			4,500.			,369,				.075535
2008			5,905.			<u>,442,</u>				.033667
2007		28	5,786.		4	<u>,086,</u>	808.			.069929
2 Total of line 1, column (d)								2		.634583
3 Average distribution ratio for the the foundation has been in existe	-	•	on line 2 by 5,	or by the number	r of ye	ears		3		.126917
		•	1 F							
4 Enter the net value of noncharital	ble-use as	sets for 2012 from Part X,	line 5					4		3,104,000.
5 Multiply line 4 by line 3								5		393,950.
6 Enter 1% of net investment incom	me (1% o	f Part I, line 27b)						6		2,354.
7 Add lines 5 and 6								7		396,304.
8 Enter qualifying distributions from	m Part XII	, line 4						8		88,903.
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, c	heck the box in Part VI, line	1b, and comp	olete that part usi	ng a 1	% tax rate.	•			
										orm QQ0-PF (2012)

AQUIDNECK FOUNDATION

	990-PF (2012) C/O GOLDMAN SACHS rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	L3-3102 348 - see i			Page 4
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				<u> </u>
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1		4,7	07.
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3	Add lines 1 and 2	3		4,7	07.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		4,7	07.
6	Credits/Payments:				-
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 4,120.	-			
b	Exempt foreign organizations - tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) 6c 2,500.				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d	7		6,6	20.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			21.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ewed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		1,8	92.
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax	11			0.
	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	n		Yes	No
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or			
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.				İ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				l
	managers. ► \$ 0.				l
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		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	ŕ			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		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 conflict with the state	law			
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
	If "Yes," complete Part II, col (c), and Part XV.				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	MA				
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		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar			_
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
		For	m 990	-PF	2012)

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Pa	nrt 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	X	
	Website address ► N/A			
14	The books are in care of ► STEPHEN KAY C/O GOLDMAN SACHS Telephone no. ► 617-20		015	
	Located at ►OLIVER ST. TOWER, 125 HIGH STREET, BOSTON, MA ZIP+4 ►02	110		
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		/A	N. I
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,	1	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			
Pa	country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	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?			,
	(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"			
	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.)			
	o 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)? Organizations relying on a current notice regarding disaster assistance check here	1b		\vdash
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			ļ
Ì	before the first day of the tax year beginning in 2012?	1c		х
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)):	1		
í	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			į
	before 2012?			
	If "Yes," list the years \blacktriangleright ,,,,	1		
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		<u> </u>
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	'	,	_
38	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,		Ì	1
	Form 4720, to determine if the foundation had excess business holdings in 2012.) N/A	3ь	ļ	
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
_	had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		X
		rm 990	-PF	(2012)

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

All other program-related investments. See instructions.

Total. Add lines 1 through 3

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Pa	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		· - .
а	Average monthly fair market value of securities	1a	3,119,371.
b	Average of monthly cash balances	1b	31,898.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	3,151,269.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,151,269.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	47,269.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,104,000.
6	Minimum investment return. Enter 5% of line 5	6	155,200.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	155,200.
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	4,707.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	150,493.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	150,493.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	150,493.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		00 003
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	88,903.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	00 000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	88,903.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	•
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	88,903.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	qualifies fo	or the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7				<u> 150,493.</u>
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:				
a From 2007 96,698.				
b From 2008				
c From 2009 89,689.				
d From 2010 902,585.		•	-	
e From 2011 255,095.	1 244 067			
f Total of lines 3a through e	1,344,067.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ►\$ 88,903.			0.	
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U •		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	<u> </u>			88,903.
d Applied to 2012 distributable amount	0.			80,303.
e Remaining amount distributed out of corpus	61,590.			61,590.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	01,390.			01,330.
6 Enter the net total of each column as indicated below:		-		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,282,477.			
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				•
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	^			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007	25 100			
not applied on line 5 or line 7	35,108.			
9 Excess distributions carryover to 2013.	1,247,369.			
Subtract lines 7 and 8 from line 6a	1,241,303.		 	
10 Analysis of line 9:			1	
a Excess from 2008 b Excess from 2009 89,689.				
c Excess from 2010 902,585.				
d Excess from 2011 255, 095.				
e Excess from 2012				
O ENGOGO ITOTA EO TE			<u> </u>	Form 990-PF (2012)

Form 990-PF (2012) C/O GOLD	MAN SACHS				.02904 Page
Part XIV Private Operating Fo				N/A	
1 a If the foundation has received a ruling or o	determination letter that	it is a private operating			
foundation, and the ruling is effective for 2	2012, enter the date of the	ne ruling	>	· · · · · · · · · · · · · · · · · · ·	
b Check box to indicate whether the found <u>a</u>	tion is a private operatin	g foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	_,	
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for	1				
each year listed					
b 85% of line 2a					-
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			1		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the				-	
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets	··				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter				_	
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section		1			
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					•
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income				-	·
Part XV Supplementary Infor	mation (Comple	te this part onl	y if the foundation	n had \$5,000 or m	ore in assets
at any time during the					
1 Information Regarding Foundation					
a List any managers of the foundation who			intributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed m	ore than \$5,000). (See s	section 507(a)(2).)			-
STEPHEN B. KAY	····				
b List any managers of the foundation who other entity) of which the foundation has			n (or an equally large por	tion of the ownership of a -	partnership or
NONE					-
2 Information Regarding Contribution	on, Grant, Gift, Loan	, Scholarship, etc.,	Programs:		
Check here X if the foundation of the foundation makes gifts, grants, etc. (
a The name, address, and telephone numb	er or e-mail of the perso	on to whom application	s should be addressed:		
N/A					
		<u> </u>			
b The form in which applications should be	e submitted and informa	ition and materials they	should include:		
N/A c Any submission deadlines:		-			
N/A					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable field	ds, kinds of institutions. o	r other factors:	
N/A	. , , , , , , , , , , , , , , , , , , ,		., -		
					Farm 000 DE (004

Page 11

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient a Paid during the year SEE STATEMENT ATTACHED NONE 501(C)(3) UNRESTRICTED CONTRIBUTION 88,903, Total ► 3a 88 903. **b** Approved for future payment NONE Total

Part XVI-A	Analysis of	Income-Producing	Activities
1 WILLY 11.77	- Allalyono or		,

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclud	led by section 512, 513, or 514	(e)
2 The gross unionity unions of the wide incloses.	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
_	- 0000		1		
a			1 1		
					
<u> </u>			 		
0			+-+		
e			+	_	
Topo and contracts from accomment arrange					
g Fees and contracts from government agencies			1		
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			1 4		
investments			14	8.	
4 Dividends and interest from securities			14	45,946.	
5 Net rental income or (loss) from real estate:				· · · · · · · · · · · · · · · · · · ·	
a Debt-financed property		1	1		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			1		
7 Other investment income			11		
8 Gain or (loss) from sales of assets other					
than inventory			18	220,683.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
- <u> </u>					
-				·	
c					
c		0.		266,637.	0.
c		0.		266,637. 13_	
d e 12 Subtotal. Add columns (b), (d), and (e)		0.			0. 266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	0. 266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1	to the Acce	omplishment of E	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exincolumn (e) of Part XVI-A	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1	to the Acco	omplishment of Exincolumn (e) of Part XVI-A	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exincolumn (e) of Part XVI-A	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exincolumn (e) of Part XVI-A	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exincolumn (e) of Part XVI-A	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exincolumn (e) of Part XVI-A	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exincolumn (e) of Part XVI-A	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Explain below how each activity for which incompared to the second section of the	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Explain below how each activity for which incompared to the second section of the	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income.	to the Acco	omplishment of Exin column (e) of Part XVI-Aunds for such purposes).	xemp	13 t Purposes	266,637.

X

X

1b(5)

1b(6)

1c

(d) Description of transfers, transactions, and sharing arrangements

AOUIDNECK FOUNDATION Form 990-PF (2012) C/O GOLDMAN SACHS 13-3102904 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) X 1a(2) (2) Other assets **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) X 1b(3) (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 1b(4)

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(c) Name of noncharitable exempt organization

N/A

		•		
		•		
	. `	-		
	•			
ın section	ndation directly or indirectly affiliated with, or related to 501(c) of the Code (other than section 501(c)(3)) or		zations described	Yes X No
b If Yes, co	omplete the following schedule.	(h) Turn of accounts	(a) December	of valational bio
	(a) Name of organization	(b) Type of organization	(c) Description	or relationship
	N/A			
		-		
Lindor	penalties of penalties, I declare that I have examined this return,	notuding accompanying achadulas and	protegrants, and to the best of my knowl	Adan —
Sign Here	elief, it is true, correct/find-confliefe Declaration of preparer (of	her than taxpayer) is based on all inform	ation of which preparer has any knowled	May the IRS discuss this return with the preparer shown below (see instr.)? X Yes No
		rer's signature	Date Check	ıf PTIN
Paid		1021	self- employe	d
Preparer	LAURIE BENCAL	27	11/32/13	P00354967
Use Only	Firm's name ► CBIZ TOFIAS		Firm's EIN	▶ 26-3753134
	Firm's address ► 500 BOYLSTON S'	TREET		
	BOSTON, MA 021	16	Phone no.	617-761-0600
				Form 990-PF (2012)

(5) Loans or loan guarantees

(a) Line no

(b) Amount involved

(6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

Aquidneck Foundation/Citizens Bank - Stephen B. Kay TTEE Disbursement record 3/1/12 - 2/28/13

1460 1461 1462 1463 1464 1465 1466 1467 1468 1470 1471 1472 1473 1474 1475 1478 1479	3/12 3/13 3/13 3/22 4/12 4/23 5/10 5/10 5/31 5/31 6/12 6/12 7/12 7/16 7/25	Tenacity, Boston MA Pawsitive Pantry, Warren VT PMC/Jimmy Fund, Boston MA BIDMC, Boston MA BIDMC, Boston MA Facing History and Ourselves, Brookline MA Harvard University, Cambridge MA (HCF) Women's Link Worldwide, Northfield VT PMC/Jimmy Fund, Boston MA Boston Midsummer Opera, Boston MA Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,500 00 5,000 00 1,000 00 500.00 7,165.00 1,000.00 1,000 00 1,000 00 250 00 1,000.00
1462 1463 1464 1465 1466 1467 1468 1470 1471 1472 1473 1474 1475 1478 1479	3/13 3/22 4/12 4/23 5/10 5/10 5/31 5/31 6/12 6/12 7/12 7/16	PMC/Jimmy Fund, Boston MA BIDMC, Boston MA BIDMC, Boston MA Facing History and Ourselves, Brookline MA Harvard University, Cambridge MA (HCF) Women's Link Worldwide, Northfield VT PMC/Jimmy Fund, Boston MA Boston Midsummer Opera, Boston MA Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$ \$ \$ \$ \$ \$ \$ \$	1,000 00 500.00 7,165.00 1,000.00 1,000.00 1,000 00 1,000 00 250 00 10,000.00
1463 1464 1465 1466 1467 1468 1470 1471 1472 1473 1474 1475 1478 1479	3/22 4/12 4/23 5/10 5/10 5/31 5/31 6/12 6/12 7/12 7/16	BIDMC, Boston MA BIDMC, Boston MA Facing History and Ourselves, Brookline MA Harvard University, Cambridge MA (HCF) Women's Link Worldwide, Northfield VT PMC/Jimmy Fund, Boston MA Boston Midsummer Opera, Boston MA Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$ \$ \$ \$ \$ \$ \$	500.00 7,165.00 1,000.00 1,000.00 1,000.00 1,000.00 250.00 10,000.00
1464 1465 1466 1467 1468 1470 1471 1472 1473 1474 1475 1478 1479	4/12 4/23 5/10 5/10 5/31 5/31 6/12 6/12 7/12 7/16	BIDMC, Boston MA Facing History and Ourselves, Brookline MA Harvard University, Cambridge MA (HCF) Women's Link Worldwide, Northfield VT PMC/Jimmy Fund, Boston MA Boston Midsummer Opera, Boston MA Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$ \$ \$ \$ \$ \$	7,165.00 1,000.00 1,000.00 1,000.00 1,000.00 250.00 10,000.00
1465 1466 1467 1468 1470 1471 1472 1473 1474 1475 1478 1479	4/23 5/10 5/10 5/31 5/31 6/12 6/12 7/12 7/16	Facing History and Ourselves, Brookline MA Harvard University, Cambridge MA (HCF) Women's Link Worldwide, Northfield VT PMC/Jimmy Fund, Boston MA Boston Midsummer Opera, Boston MA Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$ \$ \$ \$ \$ \$	1,000.00 1,000.00 1,000 00 1,000 00 250 00 10,000.00
1466 1467 1468 1470 1471 1472 1473 1474 1475 1478 1479	5/10 5/10 5/31 5/31 6/12 6/12 7/12 7/16	Harvard University, Cambridge MA (HCF) Women's Link Worldwide, Northfield VT PMC/Jimmy Fund, Boston MA Boston Midsummer Opera, Boston MA Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$ \$ \$ \$ \$	1,000.00 1,000 00 1,000 00 250 00 10,000.00
1467 1468 1470 1471 1472 1473 1474 1475 1478 1479	5/10 5/31 5/31 6/12 6/12 7/12 7/16	Women's Link Worldwide, Northfield VT PMC/Jimmy Fund, Boston MA Boston Midsummer Opera, Boston MA Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$ \$ \$ \$	1,000 00 1,000 00 250 00 10,000.00
1468 1470 1471 1472 1473 1474 1475 1478 1479	5/31 5/31 6/12 6/12 7/12 7/16	PMC/Jimmy Fund, Boston MA Boston Midsummer Opera, Boston MA Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$ \$ \$	1,000 00 250 00 10,000.00
1470 1471 1472 1473 1474 1475 1478 1479	5/31 6/12 6/12 7/12 7/16	Boston Midsummer Opera, Boston MA Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$ \$ \$	250 00 10,000.00
1471 1472 1473 1474 1475 1478 1479	6/12 6/12 7/12 7/16	Friends of Fondation de France, Inc. NY, NY South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$	10,000.00
1472 1473 1474 1475 1478 1479	6/12 7/12 7/16	South Cove Nursing Facilities Foundation Inc., Boston MA Temple Israel, Boston MA	\$	
1473 1474 1475 1478 1479	7/12 7/16	Temple Israel, Boston MA		1 000 00
1474 1475 1478 1479	7/16		7	1,000.00
1475 1478 1479			۱ ۷	3,058.00
1478 1479	7/25	Tenacity, Boston MA	\$	10,000.00
1479		Branders University, Waltham MA	\$	9,000 00
	9/05	Pawsitive Pantry, Warren VT	\$	5,000 00
	9/05	BIDMC, Boston MA	\$	250 00
1481	9/13	Ellis Memorial, Boston MA	\$	500 00
1482	9/25	AUA Foundation's Robert J. Krane Research Scholar's Fd Boston MA	\$	1,000.00
1483	9/27	AJC Boston MA	\$	630.00
1484	10/9	Boston Nature Center, Mattapan MA	\$	1,000.00
1485	10/10	Harvard Business School, Boston MA	\$	1,000 00
1486	10/15	Childen's Hospital Trust, Boston MA	\$	5,000 00
1487	10/24	The Berkeley Carroll School, Brooklyn NY	\$	10,000 00
1488	10/24	Berkshire Humane Society, Pittsfield MA	\$	1,000 00
1489	11/14	Richmond Volunteer Fire Dept Richmond, MA	\$	250.00
1490	12/12	Steps to Success, Brookline MA	\$	250.00
1491	12/12	Harvard Hillel, Cambridge MA	\$	500 00
1492	12/12	Hebrew Union College, Jewish Institute of Religion, NY NY	\$	500 00
1493	12/12	Community Health Assn. of Richmond & W Stockbridge MA	\$	250 00
1494	1/09	Boys & Girls Club or Boston MA	\$	800 00
1495	1/09	The Trilogy Fund, Roxbury MA	\$	1,000.00
1496	1/17	New England Conservatory, Boston MA	\$	500 00
1497	1/22	Harvard Business School, Boston MA	\$	1,000 00
1499	1/22	Harvard Global Equity Initiative, Boston MA	\$	5,000 00
		Total Contributions	\$	88,903.00

	<u> </u>			
FORM 990-PF INTEREST ON SAVI	INGS AND TEN	IPORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
CITIZENS BANK			-	8.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	OLUMN A	=	8.
FORM 990-PF DIVIDENT	OS AND INTER	REST FROM SEC	URITIES	STATEMENT 2
SOURCE	GROSS		PITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
PERSHING		45,946.	0.	45,946.
TOTAL TO FM 990-PF, PART I, 1	LN 4	45,946.	0.	45,946.
FORM 990-PF	ACCOUNT:	ING FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
ACCOUNTING FEES	2,750	. 0	•	0 .
TO FORM 990-PF, PG 1, LN 16B	2,750	. 0	•	0
FORM 990-PF (OTHER PROFE	SSIONAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
INVESTMENT FEES BANK FEES	31,044 224	•		0.0
TO FORM 990-PF, PG 1, LN 16C	31,268	. 31,268	•	0

FORM 990-PF	XAT	ES 		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
INTERNAL REVENUE SERVICE	4,236.		0.	0.
TO FORM 990-PF, PG 1, LN 18 =	4,236.		0.	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
MISCELLANEOUS EXPENSE MASSACHUSETTS FILING FEE	320. 35.		0.	0.
TO FORM 990-PF, PG 1, LN 23	355.		0.	0.
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUNI	BALANCES	STATEMENT 7
DESCRIPTION				AMOUNT
PRIOR PERIOD ADJUSTMENT BASIS ADJUSTMENT				2,500. 19,636.
TOTAL TO FORM 990-PF, PART I	II, LINE 3			22,136.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 8
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE
PERSHING		COST 1,070,732.		3,263,980
TOTAL TO FORM 990-PF, PART I	I, LINE 13		1,070,732.	3,263,980

Form 8868 (Rev 1-2013)					Page	
If you are filing for an Additional (Not Automatic) 3-Mo	nth Extension, o	complete only Part II and check this	box		\triangleright \mathbf{X}	
Note. Only complete Part II if you have already been grante	ed an automatic	3-month extension on a previously f	led Form	3868.		
If you are filing for an Automatic 3-Month Extension, c						
Part II Additional (Not Automatic) 3-Mor	nth Extensio	n of Time. Only file the origin	al (no c	opies nee	eded).	
		Enter filer's	identifyir	g number,	see instructions	
	rpe or Name of exempt organization or other filer, see instructions Emp			nployer identification number (EIN) or		
int AQUIDNECK FOUNDATION						
				13-3102904		
filing your	voir voir			cial security number (SSN)		
m See OLIVER ST TOWERS, 125 HIGH STREET, NO. 1700						
City, town or post office, state, and ZIP code. BOSTON, MA 02110	For a foreign add	lress, see instructions.				
Enter the Return code for the return that this application is	for (file a separa	te application for each return)			. 0 4	
Application	Return	Application			Return	
s For	Code	Is For			Code	
Form 990 or Form 990-EZ	01					
Form 990-BL	02	Form 1041-A			08	
Form 4720 (individual)	03	Form 4720			09	
Form 990-PF	04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other than above) STOP! Do not complete Part II if you were not already g	06	Form 8870			12	
The books are in the care of ▶ OLIVER ST. Telephone No. ▶ 617-204-2015 If the organization does not have an office or place of books ▶ If it is for part of the group, check this box I request an additional 3-month extension of time unsupport of the tax year entered in line 5 is for less than 12 most Change in accounting period Telephone No. ▶ 617-204-2015 If the organization does not have an office or place of books of the group, check this box of the group, check this b	usiness in the Uir digit Group Extended and attactil JANU ing MAR 1 onths, check reasonable TO GATHE	FAX No	f this is fo f all memb g FEB Final i	r the whole ers the exte 28, 2 eturn	group, check this	
8a If this application is for Form 990-BL, 990-PF, 990-T,	4720, or 6069, e	enter the tentative tax, less any			2 500	
nonrefundable credits See instructions.			8a	\$	2,500	
b If this application is for Form 990-PF, 990-T, 4720, o	-					
tax payments made. Include any prior year overpayi	ment allowed as	a credit and any amount paid	-		2 500	
previously with Form 8868		the three farmers of many control becomes	8b	\$	2,500	
c Balance due. Subtract line 8b from line 8a Include		in this form, it required, by using	0.5		0	
EFTPS (Electronic Federal Tax Payment System). Se		st be completed for Part II		\$		
Under penalties of perjury, I declare that I have examined this forn it is true, correct, and complete, and that I am authorized to prepa	n, including accom	•	-	of my knowle	dge and belief,	
				_		
Signature T	itle 🖊		Date			

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

• If you	are filing for an Automatic 3-Month Extension, complete	te only Pa	rt I and check this box			ightharpoons		
•	are filing for an Additional (Not Automatic) 3-Month Ex	-		this form)				
Do not (complete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	ly filed Fo	rm 8868			
Electro	nic filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tin	ne to file (8	6 months for a c	orporation		
	to file Form 990-T), or an additional (not automatic) 3-mol					•		
	o file any of the forms listed in Part I or Part II with the exc							
	Il Benefit Contracts, which must be sent to the IRS in pap							
	w irs gov/efile and click on e-file for Chanties & Nonprofits		(ess manusmans) To more setano (),, and old	strorne ming or t	113 TOTTI,		
Part			submit original (no copies ne	eded).				
A corpo	ration required to file Form 990-T and requesting an autor							
Part I or	· · · · · · · · · · · · · · · · · · ·			•				
All other	· · corporations (including 1120-C filers), partnerships, REM	ICs. and ti	rusts must use Form 7004 to reques	t an exten	ision of time			
	come tax returns.	·	•		•			
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	Employer identification number (EIN) or			
print	A COLLEGIA TO CONTRACTOR					, , , , , , , , , , , , , , , , , , , ,		
•	C/O GOLDMAN SACHS				13-3102904			
File by the due date fi	Number street and room or quite no If a D.O. hov a	ee instruc	tions	Social security number (SSN)				
filing your	OLIVER ST TOWERS, 125 HIGH	STRE	ET, NO. 1700					
return See instruction		reign add	ress, see instructions.					
	BOSTON, MA 02110		-					
Enter th	e Return code for the return that this application is for (file	a separa	te application for each return)			0 4		
		·			<u></u>			
Applica	tion	Return	Application			Return		
Is For		Code	Is For			Code		
Form 99	00 or Form 990-EZ	01	Form 990-T (corporation)			07		
Form 99	90-BL	02	Form 1041-A			08		
Form 4720 (individual) 03 Form 4720						09		
Form 99	90-PF	Form 5227 10						
Form 990-T (sec. 401(a) or 408(a) trust) 05			Form 6069					
Form 99	00-T (trust other than above)	06	Form 8870			12		
	STEPHEN KAY C/O							
	books are in the care of OLIVER ST. TOW	ER, 1	<u> 25 HIGH STREET – B</u>	OSTON	I, MA 021	_10		
	phone No ► 617-204-2015		FAX No 🕨					
	organization does not have an office or place of busines					>		
If this	s is for a Group Return, enter the organization's four digit	•			r the whole grou	• •		
box 🕨	If it is for part of the group, check this box	and atta	ich a list with the names and EINs o	f all memb	ers the extension	on is for		
1 1	request an automatic 3-month (6 months for a corporation	•						
_	OCTOBER 15, 2013, to file the exemp	t organiza	tion return for the organization nam	ed above	The extension			
IS	for the organization's return for							
	calendar year or							
-	X tax year beginning MAR 1, 2012	, an	id ending <u>FEB 28, 2013</u>		_			
0 12	the tary year entered in line 4 is fasters than 40 increases	بام مط		C				
2 If	the tax year entered in line 1 is for less than 12 months, o	neck reas	on Initial return	Final retur	m			
L	Change in accounting period							
20 15	this application is far Form 200 PL 200 PE 200 T 4700	or 6060 =	enter the tentative tax large and					
	this application is for Form 990-BL, 990-PF, 990-T, 4720, onrefundable credits. See instructions	טו פטטפן, פ	miter the tentative tax, less any	1		2 500		
-	this application is for Form 990-PF, 990-T, 4720, or 6069,	ontor an	rofundable gradue and	3a	\$	2,500.		
	•••	•				0		
	stimated tax payments made Include any prior year overp			3b	\$	0.		
	alance due. Subtract line 3b from line 3a. Include your pa	•			_	2 500		
	y using EFTPS (Electronic Federal Tax Payment System)			3c	S for payment	2,500.		
<u>Cautior</u> LHA	 If you are going to make an electronic fund withdrawal view For Privacy Act and Paperwork Reduction Act Notice, 			<u> </u>		8 (Rev 1-2013)		
" "	· or i rivacy act and r approvers neadellon act Nutice,	Jee mou	40110113.		1 01111 000	0 (100 V 112010)		

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