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Form 990

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

		nt of the Treasury	Note. The fo	undation may	I reated as a Priva be able to use a copy of thi	i te Foundati s return to satisfy	I ON / state reno:	rtina requirements	Open to public Inspection
_			or tax year beginning			, and end		APR 30, 2013	
Na	me o	f foundation	O/HELEN &			,	_ -	A Employer identificatio	
					VIES, LLP			05-0613835	ξ
			ox number if mail is not			T _B	oom/suite		
_6	65	FIFTH .	AVENUE					B Telephone number 212-286-26	500
	-	own, state, and Z						C If exemption application is i	pending, check here
G	Check	all that apply	Initial retu	rn	Initial return of a	former public cha	rity	D 1. Foreign organization	s, check here
			Final retu	'n	Amended return				
_			X Address o	hange	Name change			Foreign organizations m check here and attach c	eeting the 85% test, omputation
H	_	ctype of organiza	ation X Section Number 1		kempt private foundation Other taxable private found	iation		E If private foundation sta under section 507(b)(1	
I F			assets at end of year			Accrual		F If the foundation is in a	• • •
		Part II, col. (c),	•	l	ther (specify) MODIF1			under section 507(b)(1	_ [1
	- \$				mn (d) must be on cash			2401 5551.6.1 551 (5)(1	/(2// 0//0// //
P	art I	Analysis of Re (The total of amo necessarily equa	evenue and Expense unts in columns (b), (c), a I the amounts in column	S ind (d) may not (a))	(a) Revenue and expenses per books	(b) Net inves		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1		gifts, grants, etc., rec		<u> </u>			N/A	1 1-10 10 10 10 10 10 10 10 10 10 10 10 10 1
	2		the foundation is not required					=:: #=	
	3	Interest on saving cash investments	s and temporary		1	<u> </u>	*****		-
	4		nterest from securitie	!\$	3,612,741.	3,612	.741.		STATEMENT 1
	1	Gross rents		.•			,		
	1 -	Net rental income	or (loss)			-			
	62		rom sale of assets not or	line 10		- 	- 1, , , , , , , , , , , , , , , , , , , 	· 144. (· · · · · · · · · · · · · · · · · · ·	
une	b	Green cales notes	for all	11110 10					
Revenue	7		come (from Part IV, line 2)	***************************************		0.	111111111111111111111111111111111111111	
ď	8	Net short-term		RE	CEIVEN				
	9	Income modific	ations		district to the first filter to the same of the same o	111111111111111111111111111111111111111			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	10a	Gross sales less re and allowances	etums	9	¥ 0 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	b	Less Cost of good	ds sold	FEI	D T O ZUIN XI				
	C	Gross profit or	(loss)						
	11	Other income		l OG	DEN UT				
	12	Total Add lines	s 1 through 11		3,612,741	3,612			
	13	Compensation of	officers, directors, truste	es, etc	156,580.	<u> </u>	0.		156,580.
	14		salaries and wages			ļ			
s	15	•	employee benefits		9,410.		<u> </u>		9,410.
nse	16a	Legal fees	a	n	20 000				20 020
وَجِير	þ	Accounting fees		rmt 2	29,028.		0.		29,028.
3	C	Other professio	nal fees			 			ļ <u> </u>
~ <u>`</u>	17	Interest				 		 	
Str.	18 19	Taxes	d danlation			 			
œ <u>ξ</u>	20	Depreciation an	a depletion						
냽	21	Occupancy	ices, and meetings		1,960.	 	0.	 	1,960.
SOPERATING BIND Administrative Expenses	22	Printing and pu	•		1,500.	 			1,500.
E 110	23	Other expenses		C TMT	13,838.		125.		13,713.
3	24		and administrative		13,030.			<u> </u>	13,713.
Zie Zie			lines 13 through 23		210,816.		125.		210,691.
Ö	25	Contributions, g	-		3,013,496.				3,013,496.
()	26		and disbursements	•					
		Add lines 24 and			3,224,312.	l	125.		3,224,187.
	27	Subtract line 26			, , , , , , , , , , , , , , , , , , ,				
			over expenses and disb	ursements	388,429.				
			income (if negative, en			3,612,	,616.		
	C	Adjusted net in	COM8 (if negative, enter	-0-)				N/A	

223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions.

Form	THE Y. C HO/HELEN & MICH 990-PF (2012) FOUNDATION C/O O'CONNOR		05-0)613835 Page 2
		Beginning of year	End of	
Pa	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	700,462.	1,088,891.	1,088,891.
	3 Accounts receivable ►			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ►			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
ŀ	6 Receivables due from officers, directors, trustees, and other			
	disqualified persons			
	7 Other notes and loans receivable			
	Less allowance for doubtful accounts		Ì	
s l	8 Inventories for sale or use			
ارة	9 Prepaid expenses and deferred charges			
¥ 1	0a Investments - U S and state government obligations STMT 4	19,614,725.	20,613,610.	20,613,610.
'	b Investments - corporate stock STMT 5		34,687,970.	
	Smr.	10,289,188.	10,425,692.	10,425,692.
	t investments corporate bonds = ==================================	10/203/1000		
'	1 Investments - land, buildings, and equipment basis		İ	
	Less accumulated depreciation		·	
	2 Investments - mortgage loans			
	3 Investments - other			, , , , , , , , , , , , , , , , , , , ,
ון	4 Land, buildings, and equipment basis		†	
	Less accumulated depreciation			
1	5 Other assets (describe ►)			
1	6 Total assets (to be completed by all filers)	65,780,596.	66,816,163.	66,816,163.
$\overline{}$	7 Accounts payable and accrued expenses			
- 1	8 Grants payable			
	9 Deferred revenue			
.≌ ∣	_			
<u>`</u>				
رُ ا دُو				
'	2 Other liabilities (describe)			
١,	3 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
S S		65,780,596.	66,816,163.	
ě l	4 Unrestricted	03/100/0301	00,010,100	
Sala	5 Temporarily restricted			
9 2	6 Permanently restricted			
٦	Foundations that do not follow SFAS 117, check here			
٥ ,	and complete lines 27 through 31.			
※ .	7 Capital stock, trust principal, or current funds			
SSI	8 Paid-in or capital surplus, or land, bldg, and equipment fund			
₩.	9 Retained earnings, accumulated income, endowment, or other funds	65,780,596.	66,816,163.	
$\tilde{\mathbf{z}}$	O Total net assets or fund balances	33,100,330.	30,010,103.	
3	1 Total liabilities and net assets/fund balances	65,780,596.	66,816,163.	
	rt III Analysis of Changes in Net Assets or Fund B			
	otal net assets or fund balances at beginning of year - Part II, column (a), line			
	nust agree with end-of-year figure reported on prior year's return)		1	65,780,596.
•	·		1 . 1	200 420

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	65,780,596
2	Enter amount from Part I, line 27a	2	388,429
	Other increases not included in line 2 (itemize) UNREALIZED GAIN ON INVESTMENTS	3	647,138
	Add lines 1, 2, and 3	4	66,816,163
	Decreases not included in line 2 (itemize)	5	0
	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	66,816,163

		TION C/O O'CONNOR D		LP	0	5-061	3835	Page 3
Ц		osses for Tax on Investmen	t Income	(b) How acquired	(a) Data	anautrad T	(d) Date	
		kind(s) of property sold (e.g., real estate, e, or common stock, 200 shs MLC Co.)		P - Purchase D - Donation	(mo , c	acquired lay, yr)	(d) Date (mo , da	9 sola 19, yr)
1				B Bondton				
	b NONE							
	<u> </u>							
	d							
	8							
	(e) Gross sales price		st or other basis expense of sale			iain or (loss) s (f) minus (
	a							
	b							
_	<u>c</u>							
	<u>d</u>							
_	e							
_	Complete only for assets showing gain i	n column (h) and owned by the foundation	n on 12/31/69			Col (h) gain i		
_	(i) F M V as of 12/31/69		cess of col (i) col (j), if any	col	(k), but Losses	not less than (from col. (f	1 -0-) or 1)) 	
_	<u>a</u>							
_!	b							
_	<u>c</u>							
_1	<u>d</u>							
_	<u>e</u>							
2	Capital gain net income or (net capital los	s) If gain, also enter in Part I, line If (loss), enter -0- in Part I, line	7 7	} 2				
3	Net short-term capital gain or (loss) as di	•						
Ŭ	If gain, also enter in Part I, line 8, column			<i>)</i>				
_	If (loss), enter -0- in Part I, line 8			<u> </u>				
Ц	Part V Qualification Under	Section 4940(e) for Reduced	Tax on Net	Investment Inc	ome			
(F	or optional use by domestic private founda	tions subject to the section 4940(a) tax or	n net investment in	come)				
14		bla -1.						
11	section 4940(d)(2) applies, leave this part	DIANK						
W	as the foundation liable for the section 494	2 tax on the distributable amount of any y	ear in the base per	nod?			Yes	X No
<u>If</u>	"Yes," the foundation does not qualify unde							
1	Enter the appropriate amount in each co	umn for each year, see the instructions be	fore making any e	ntries				
	(a) Base period years	(b)	}	(c)	1	Distrib	(d) ution ratio	
_	Calendar year (or tax year beginning in)	Adjusted qualifying distributions		ncharitable-use assets		(col (b) divi	ded by col	(c))
_	2011	2,958,356.		63,376,815				16679
_	2010	2,652,172.		61,154,365				13368
_	2009	2,364,661.		54,776,636				3169
_	2008	2,686,202.		48,528,290				5353
_	2007	2,157,207.		55,986,863	•	,	.03	8531
2	Total of line 1, column (d)				2			7100
3	Average distribution ratio for the 5-year b	ase period - divide the total on line 2 by 5,	or by the number	of years		1		
	the foundation has been in existence if le	ss than 5 years			3		.04	5420
4	Enter the net value of noncharitable-use a	ssets for 2012 from Part X, line 5			4	6!	5,584,	306.
5	Multiply line 4 by line 3				5	:	2,97 <u>8</u> ,	839 .
6	Enter 1% of net investment income (1%	of Part I, line 27b)			6		36,	126.
	, ,	•						
7	Add lines 5 and 6				7	:	3,014,	965.
-					·		<u> </u>	
8	Enter qualifying distributions from Part X				8	<u> </u>	3,224,	187.
	If line 8 is equal to or greater than line 7, See the Part VI instructions	check the box in Part VI, line 1b, and comp	olete that part usin	g a 1% tax rate				

	THE Y. C HO/HELEN & MICHAEL CHIANG				
Forn	1990-PF(2012) FOUNDATION C/O O'CONNOR DAVIES, LLP 05-0	<u>06138</u>	335		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see in	stru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		-		
	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 ► X and enter 1%		3	6,1	26.
	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)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
3	Add lines 1 and 2		3	6,1	26.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		3	6,1	26.
6	Credits/Payments				
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 94, 380.				
b	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)				
	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d		9	4,3	80.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		5	8,2	54.
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ► 58, 254 • Refunded ► 11				0.
Pa	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 in			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 or	Γ		- '''	
	distributed by the foundation in connection with the activities.				
c	Did the foundation file Form 1120-POL for this year?		10		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	ľ			
_	(1) On the foundation \blacktriangleright \$ 0 . (2) On foundation managers \blacktriangleright \$				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
_	managers ▶\$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
	If "Yes," attach a detailed description of the activities.	Γ		-, -, -, -, -, -, -, -, -, -, -, -, -, -	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	/A [4b		
	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	ŀ			
	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?	ļ	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.	ľ			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	DE, NY				
h	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	Х]
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	ľ			
•	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	-	9		Х
10	Did any persons become substantial contributors during the tay year? If the big capacity listing their names and addresses		10		X

223531 12-05-12

valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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

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

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

Form 4720, to determine if the foundation had excess business holdings in 2012.)

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

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X

Х

N/A

N/A

Yes X No

2b

3b

4a

4h

statement - see instructions)

during the year?

BESSIE CHIANG, C/O OD 665 FIFTH AVENUE NEW YORK, NY 10022 VICE PRESIDENT MICHAEL CHIANG C/O OD 665 FIFTH AVENUE 0. 0. 0 NEW YORK, NY 10022 5.00 HELEN CHIANG SECRETARY C/O OD 665 FIFTH AVENUE 0 0. NEW YORK, NY 10022 5.00 0. EXECUTIVE DIRECTOR PATRICIA J. DIAZ C/O OD 665 FIFTH AVENUE NEW YORK, NY 10022 156,580 0 0. 25.00

(a) Name and address of each employee paid more than \$50,000

NONE

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Communitarians and determed and determed compensation

(e) Expense expense account, other allowances

NONE

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

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

0	5	_	0	6	1	3	8	3	5	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Hi Paid Employees, and Contractors (continued)	ghly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of	service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services [Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	e	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		-
2		
All other program-related investments. See instructions		
Total. Add lines 1 through 3	•	0.

Form 990-PF (2012) FOUNDATION C/O O'CONNOR DAVIES, LLP 05-0613835 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 64,700,463. a Average monthly fair market value of securities 1a 1,882,589. b Average of monthly cash balances 1b c Fair market value of all other assets <u>1</u>c 66,583,052. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 66,583,052. 3 3 Subtract line 2 from line 1d 998,746. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 65,584,306. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here

[and do not complete this part) 3,279,215. Minimum investment return from Part X, line 6 36,126. 2a Tax on investment income for 2012 from Part VI, line 5 2a Income tax for 2012 (This does not include the tax from Part VI) 2b 36,126. Add lines 2a and 2b 2c C 243,089. Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 243,089. 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 3,243,089 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 3,224,187. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the 3 За a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule) 3b 3,224,187. Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4

Form **990-PF** (2012)

5

6

<u>36,126.</u>

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

Part XIII	Undistributed	Income	(see instructions))

a Enter amount for 2011 only b Total for prior years 2. Excess distributions carryover, if any, to 2012 a From 2007 b From 2008 c From 2009 d From 2010 1 Total of lines 3a through e 4. Qualifying distributions for 2012 from Part XII, line 4 № \$ 3, 224 √ 18 7, a Applied to 2011, but not more than line 2a b Applied to 2011, but not more than line 2a b Applied to 2011, but not more than line 2a b Applied to 2012 flow the second of corpus years (Election required - see instructions) 4. Applied to 2012 distributiable amount 8. Remaining amount distributed out of corpus 5. Excess distributions carryover and the second of the se		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
Inter 7 Lice Applied to Just activations of Justice Brown and Jus	1 Distributable amount for 2012 from Part XI,				
Enter amount for 2011 only Total for proryears Sexess distributions caryover, if amy, to 2012 a From 2008 From 2009 A From 2010 From 2010 From 2010 From 2010 A paging at 2011, but not more than lane 28 Applied to 2011, but not offer the lane has 28 Applied to 2011, but not offer the lane lane 28 Applied to 2011, but not offer the lane 28 Applied to 2013 (distributions out of corpus (Election required - see instructions) Circated as distributions out of corpus (Election required - see instructions) Circated as distributions out of corpus (Election required - see instructions) Circated as distributions out of corpus (Election required - see instructions) Circated as distributions out of corpus (Election required - see instructions) Circated as distributions out of corpus (Election required - see instructions) Circated as distribution sout of corpus (Election required - see instructions) Circated as distribution out of corpus (Election required - see instructions) Circated as distribution out of corpus Circated as distribution out of corpus Circated as distribution out of corpus Circated as distribution and the corpus O. Circated as distributions and the corpus O. Circated as	i i				3,243,089.
B Total for prior years 3. Excess distributions carryover, if any, to 2012 a From 2009 6 From 2010 6 From 2010 6 From 2010 7 Total of lines 33 through e 4. Qualifying distributions for 2012 from A Qualifying distributions for 2012 from e 7 A Applied to 2011, but not more than line 2a but Applied to undistributed income of prior years (Belcotin required - see instructions) c 7 Traited as distributions out of corpus (Belcotin required - see instructions) c 7 Traited as distributions out of corpus (Belcotin required - see instructions) c 8 Applied to 2012 distributible amount come of prior years (Belcotin required - see instructions) c 9 Applied to 2012 distributible amount come of prior years (Belcotin required - see instructions) c 1 Applied to 2012 distributible amount come of prior years (Belcotin required - see instructions) c 1 Applied to 2012 distributible amount come of the company of the	2 Undistributed income, if any, as of the end of 2012				
3 Excess distributions carryover, if any, to 2012 a From 2007 b From 2008 e From 2010 e From 2010 f F	a Enter amount for 2011 only			3,073,681.	<u></u>
3 Excess distributions carryover, if any, to 2012 a From 2009 From 2009 From 2010 From 2010 From 2011 Total of fines 3st through e 4 Qualifying distributions for 2012 from Part XII, the 4 Ps 3, 224, 187 - a Applied to 2011, but not more than line 2a b Applied to undistributed income of prior years (Exceton required - see instructions) C Treated as distributions out of corpus (Election required - see instructions) C Treated as distributions out of corpus (Election required - see instructions) Applied to 2012 distributible amount Applied to 2012 distributible amount C Remaining amount distributed out of corpus Election required - see instructions) C Applied to 2012 distributible amount O . 5 Excess distributions only only the service and the service and the service asserting as a service as a service as a service asserting as a service as a service asserting as a service as a serv	ь Total for prior years				
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5 Excess distributions carryover applied to 2012 (if an amount appears in column (ii), the same amount must be shown in column (iii). The same amount must be shown in column (iii). The same amount must be shown in column (iii). The same amount must be shown in column (iii). The same amount must be shown in column (iii). The same amount must be column as indicated below: 3 Corpus Add lines 31, 4c, and 4c Subtract line 5 3 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. 4 Subtract line 6c from line 6b Taxable amount - see instructions. 5 Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instructions. 6 Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013. 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(p)(3). 8 Excess distributions carryover from 2007 not applied on line 5 or line 7 O. 9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2009 c Excess from 2009 c Excess from 2010 d Excess from 2011 e Excess from 2011 e Excess from 2012 e Excess from 2012	d Applied to 2012 distributable amount				150,506.
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a Excess from 2008 b Excess from 2009 c Excess from 2010 d Excess from 2011 e Excess from 2012	Subtract lines 7 and 8 from line 6a	0.			
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e Excess from 2012	c Excess from 2010				
e Excess from 2012					
	e Excess from 2012				Form 000, DE (00.10)

Part'	XIV Private Operating F	oundations (see in:	structions and Part VII	A, question 9)	N/A	
1 a lf th	ne foundation has received a ruling o	r determination letter that	t it is a private operating			
fou	ndation, and the ruling is effective fo	r 2012, enter the date of f	the ruling	>		
b Cha	eck box to indicate whether the found	jation is a private operatii	ng foundation described i	section	4942(j)(3) or 49)42(j)(5)
	er the lesser of the adjusted net	Tax year		Prior 3 years		
inco	ome from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
inve	estment return from Part X for					
eac	h year listed	İ				
b 859	% of line 2a	<u> </u>				
c Qua	alifying distributions from Part XII.					
line	4 for each year listed					
	ounts included in line 2c not					
	d directly for active conduct of					
	mpt activities					
	alifying distributions made directly			· · · · · · · · · · · · · · · · · · ·		
	active conduct of exempt activities					
	otract line 2d from line 2c					
	nplete 3a, b, or c for the					
	rnative test relied upon					
_	sets" alternative test - enter Value of all assets					
٠,						
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "End	dowment" alternative test - enter					
	of minimum investment return		!			
sno Iiste	wn in Part X, line 6 for each year					
	pport" alternative test - enter					
	Total support other than gross					
٧٠,	investment income (interest,					ll.
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
(2)	Support from general public					
(2)	and 5 or more exempt					
	organizations as provided in					
(2)	section 4942(j)(3)(B)(iii) Largest amount of support from	 			 	
(3)	• • • • • • • • • • • • • • • • • • • •					
(4)	an exempt organization					
Part)	Gross investment income (V Supplementary Info	rmation (Comple	te this part only i	f the foundation	had \$5,000 or me	ore in assets
1 care 7	at any time during t			i the journation	1100 40,000 01 1110	oro iir doooto
1 Info	ormation Regarding Foundatio					
	any managers of the foundation wh	-	than 2% of the total contr	ibutions received by the	foundation before the clos	se of any tax
	r (but only if they have contributed m			ibations received by the	Touridation belove the cio	so or any tax
NONE		, , ,				
	any managers of the foundation wh	o own 10% or more of th	e stock of a cornoration (or an equally large portion	on of the ownership of a n	artnership or
	er entity) of which the foundation has			or an equally large pertit	m of the officially of a p	araiotomp of
NONE	• •	ŭ				
	ormation Regarding Contributi	on Cront Citt Loon	Cabalambia ata De	arame:		
	ck here X if the foundation o				at accept uncollected requi	acte for funds. If
	foundation makes gifts, grants, etc. (
	name, address, and telephone numb					
a 1110	חומווים , מממים אין מוני נפופטווטוופ וועוווו	yer or e-mail or the heizo	н со многи аррисацииз 50	10010 00 800103360		
h Tho	form in which applications should b	e submitted and informat	ion and materials they sh	ould include		
D IIIe	Torri ili wilich applications should b	e submitted and impiniat	ion and materials they sir	Julu IIICiuue		
c Anv	submission deadlines					
- · ····y						
d Anv	restrictions or limitations on awards	s, such as by geographics	il areas, charitable fields.	rinds of institutions, or c	other factors	
~ · ···y		,, ggp	.===, =::=::===;			

FOUNDATION C/O O'CONNOR DAVIES, LLP

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year ANGEL ON A LEASH PUBLIC CHARITY GENERAL SUPPORT 630 NINTH AVENUE, SUITE 1009 NEW YORK, NY 10036 15,000. ASSOCIATION OF SMALL FOUNDATIONS PUBLIC CHARITY GENERAL SUPPORT 1720 N STREET, NW 4,275. WASHINGTON, DC 20036 BARNARD COLLEGE PUBLIC CHARITY GENERAL SUPPORT 3009 BROADWAY 100,000. NEW YORK, NY 10027 PUBLIC CHARITY SUPPORT FOR BELLEVUE HOSPITAL CENTER 462 FIRST AVENUE, H1N15 EDUCATIONAL RESOURSES NEW YORK, NY 10016 AND OPPORTUNITIES IN CONNECTION WITH HOSPICE AND PALLIATIVE 50,000. BETH ISRAEL MEDICAL CENTER PUBLIC CHARITY SUPPORT FOR THE PHYSICIAN FELLOWSHIP FIRST AVENUE AT 16TH STREET AND NURSE FELLOWSHIP NEW YORK, NY 10003 IN PALLIATIVE MEDICINE 200,000. SEE CONTINUATION SHEET(S) 3,013,496. Total b Approved for future payment PUBLIC CHARITY SUPPORT FOR TRUSTEES OF COLUMBIA UNIVERSITY 630 WEST 168TH STREET EDUCATIONAL ACTIVITIES NEW YORK, NY 10032 IN CONNECTION WITH THE HOSPICE AND PALLIATIVE MEDICINE FELLOWSHIP 11,000. **▶** 3b 11,000. Total

Part XVI-A	Analysis of	Income-Producing	Activities
------------	-------------	------------------	------------

Enter gross amounts unless otherwise indicated	Unrelated	business income	ed by section 512, 513, or 514	(e)	
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	-				
b	-				
C					
d					
e					
f					
g Fees and contracts from government agencies			_11		
2 Membership dues and assessments					
3 Interest on savings and temporary cash				-	
investments					
4 Dividends and interest from securities			14	3,612,741.	
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					
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	 		1 1		
	· 				
<u> </u>	I I				
· · · · · · · · · · · · · · · · · · ·	1 1				·
	· -				
8	·	0		3,612,741.	0.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	L			13	3,612,741
(See worksheet in line 13 instructions to verify calculations)				13_	3/012//11
					
Part XVI-B Relationship of Activities	to the Accor	nplishment of E	Exempt	Purposes	
Line No. Explain below how each activity for which inc	ome is reported in	column (a) of Part Y\/I	-A contribi	ited importantly to the accom	inlishment of
the foundation's exempt purposes (other than			-A CONTINU	ited importantly to the accom	plistificate of
was realistance and representations and realistance and realis	, cy providing tarie				
					
					
					
					
		· 			
				 	
					
					Form 990-PF (2012)

Form 990-PF (2012)

Page 13

Part XVI	Information Regarding Transfers To Exempt Organizations	and Transactions a	nd Relationships With Noncha	aritable	•	
1 Did the	organization directly or indirectly engage in any of the follow	was with any other property	a described in control FO1(a) of		Yes	No
		•			162	140
	(other than section 501(c)(3) organizations) or in section		zations?			
	s from the reporting foundation to a noncharitable exempt	organization of		4-44		v
(1) Cas				1a(1)		X
	er assets			1a(2)		
	nsactions			45/41		v
	s of assets to a noncharitable exempt organization			1b(1)		<u>X</u>
	chases of assets from a noncharitable exempt organization			1b(2)		X
• •	tal of facilities, equipment, or other assets			1b(3)	\rightarrow	X
• •	nbursement arrangements			1b(4)		X
	ns or loan guarantees	4		1b(5)		X
	formance of services or membership or fundraising solicita			1b(6)		X
· · · · · · · · · · · · · · · · · · ·	of facilities, equipment, mailing lists, other assets, or paid e swer to any of the above is "Yes," complete the following so	· •	inve chow the fair market value of the goods		l	
	es given by the reporting foundation. If the foundation rece		The state of the s		cis,	
	(d) the value of the goods, other assets, or services receive		o in any transaction of sharing arrangement,	3110111 111		
(a) Line no		ble exempt organization	(d) Description of transfers, transactions, and	sharing an	angeme	nts
<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	N/A		(c)			
						
			<u> </u>			
	undation directly or indirectly affiliated with, or related to, o		ations described	-	Γ Ū	٦
	n 501(c) of the Code (other than section 501(c)(3)) or in se	ection 527?	L	Yes	LA] No
b_it^Yes,	complete the following schedule (a) Name of organization	(b) Type of organization	(c) Description of relations	chin.		
	N/A	(b) Type of organization	(b) bescription of relations	3111p	_	
		 			_	
	er penalities of perjury, I declare that I have examined this return, inclu			ay the IRS o	liscuss t	his
olgn	pelief, it is true, correct, and complete Declaration of preparer (other t	nan taxpayen is based on all informa	ation of which preparer has any knowledge	turn with the lown below	prepare	er I
Here	25512 Via P	112114	resident	X Yes		No
Sig	nature of officer or trustee	Date	Title			
	Print/Type preparer's name Preparer's	signature	Date Check If PTIN			
.	THOMAS F. BLANEY,		self- employed	000:		
Paid	CPA, CFE	- by		0234		
Preparer	•	LLP	Firm's EIN ► 27-1	/289	45	
Use Only						
	Firm's address ► 665 FIFTH AVENUE		212	286-	260	Λ
	NEW YORK, NY 100				_	
			<u>, </u>	orm 990	-FF()	ZU Z)

3 Grants and Contributions Paid During the	rear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CALVARY HOSPITAL		PUBLIC CHARITY	SUPPORT FOR CALVARY'S	
1740 EASTCHESTER ROAD			PALLIATIVE CARE	
BROXN, NY 10461			INSTITUTE	25,000
CALVARY HOSPITAL		PUBLIC CHARITY		
1740 EASTCHESTER ROAD			BEREAVEMENT SERVICES	
BROXN, NY 10461	- 	_	 	25,000
CHILDREN'S HEALTHCARE OF ATLANTA		PUBLIC CHARITY	SUPPORT FOR EDUCATION	
FOUNDATION			AND TRAINING IN	
1577 NORTHEAST EXPRESSWAY, SUITE A			PALLIATIVE CARE	
ATLANTA, GA 30329				25,000
CHILDREN'S HOSPITAL CORPORATION	-	PUBLIC CHARITY	SUPPORT FOR A	
300 LONGWOOD AVENUE			PALLIATIVE CARE	
BOSTON, MA 02115			RESEARCH PROJECT AT	
,			BOSTON CHILDREN'S	
			HOSPITAL	65,000
CHILDREN'S HOSPITAL OF PHILADELPHIA		PUBLIC CHARITY	SUPPORT FOR THE	
FOUNDATION			PEDIATRIC FELLOWSHIP	
34TH STREET AND CIVIC CENTER BLVD.			IN HOSPICE AND	
PHILADELPHIA, PA 19104			PALLIATIVE MEDICINE	209,000
COMFORT ZONE CAMP, INC.		PUBLIC CHARITY	SUPPORT FOR NEW JERSEY	
4906 CUTSHAW AVENUE			BEREAVEMENT CAMP	
RICHMOND, VA 23230			PROGRAM	25,000
CONNOR'S HOUSE, INC.		PUBLIC CHARITY	GENERAL SUPPORT	
P.O. BOX 42 LANDING, NJ 07850				10,000
COUNCIL ON FOUNDATIONS		PUBLIC CHARITY	GENERAL SUPPORT	
2121 CRYSTAL DRIVE SUITE 700			1	
ARLINGTON, VA 22202				6,500
DANA-FARBER CANCER INSTITUTE		PUBLIC CHARITY	FOR SCHOLARSHIPS TO	
450 BROOKLINE AVENUE		1	THE PALLIATIVE CARE	
BOSTON, MA 02215			EDUCATION AND PRACTICE	
			COURSE AT THE HARVARD	
			MEDICAL SCHOOL CENTER	54,000
DANA-FARBER CANCER INSTITUTE		PUBLIC CHARITY	SUPPORT FOR THE	
450 BROOKLINE AVENUE			PALLIATIVE CARE	
BOSTON, MA 02215	<u> </u>	<u> </u>	NURSING FELLOWSHIP	106,000
Total from continuation sheets				2,644,221

Part XV Supplementary Information 3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
DOUBLE H RANCH		PUBLIC CHARITY	SUPPORT FOR MEDICAL	
97 HIDDEN VALLEY ROAD			FACILITY AT CAMP FOR	
LAKE LUZERNE, NY 12846			SERIOUSLY ILL CHILDREN	50,000
ELIZABETH SETON PEDIATRIC CENTER		PUBLIC CHARITY	SUPPORT FOR THE	
300 CORPORATE BOULEVARD SOUTH			PALLIATIVE CARE	
YONKERS, NY 10701		ļ	PROGRAM	25,000
ENGLEWOOD HOSPITAL AND MEDICAL CENTER		DIIRI.IC CHARITY	SUPPORT FOR PALLIATIVE	
FOUNDATION, INC.			CARE SERVICES	
350 ENGLE STREET				
ENGLEWOOD, NJ 07631				100,000
FIDELITY CHARITABLE GIFT FUND		PUBLIC CHARITY	GENERAL SUPPORT	
100 CROSBY PARKWAY, MAIL ZONE KC1D-FCS				
COVINGTON, KY 41015			<u> </u>	250,000
FJC		PUBLIC CHARITY	SUPPORT FOR THE DOULA	
520 EIGHTH AVENUE, 20TH FLOOR			PROGRAM TO ACCOMPANY	
NEW YORK, NY 10018			AND COMFORT	25,000
FJC		PUBLIC CHARITY	SUPPORT FOR THE	
520 EIGHTH AVENUE, 20TH FLOOR			BILINGUAL DOULA	
NEW YORK, NY 10018			PROJECT CONDUCTED BY	
			THE DOULA PROGRAM TO	14 701
			ACCOMPANY AND COMFORT	14,721
FLAWLESS FOUNDATION		PUBLIC CHARITY	GENERAL SUPPORT	
P.O. BOX 5183 PORTLAND, OR 97208				50,000
FLAWLESS FOUNDATION		DIIDI IC CUADITY	GENERAL SUPPORT	
P.O. BOX 5183		JUDIC CHARITI	DOLLOW!	
PORTLAND OR 97208			1.	50,000
ELVING HODER EXDME		DUDI TO CUADITAL	GENERAL SUPPORT OF	
FLYING HORSE FARMS 5260 STATE ROUTE 95		PUBLIC CHARITY	CAMP FOR SERIOUSLY ILL	
MT. GILEAD, OH 43338			CHILDREN	25,000
POTRIDAMION CRIMED		DUDI TO CUADITAL	COMPOSI CUDDADA	
FOUNDATION CENTER 79 FIFTH AVENUE		FORFIC CHARITY	GENERAL SUPPORT	
NEW YORK, NY 10003				5,000
Total from continuation sheets			•	

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor GLOBAL CHILDREN'S ART PROGRAMME PUBLIC CHARITY GENERAL SUPPORT P.O. BOX 20351, TOMPKINS SQUARE NEW YORK, NY 10009 5,000. GOD'S LOVE WE DELIVER PUBLIC CHARITY GENERAL SUPPORT 166 AVENUE OF THE AMERICAS NEW YORK, NY 10013 10,000. HAPPINESS IS CAMPING, INC. PUBLIC CHARITY GENERAL SUPPORT OF 2169 GRAND CONCOURSE AMP FOR CHILDREN WITH BROXN, NY 10453 ANCER AND SUPPORT FOR CABIN RENOVATION 40,000. HAROLD P. FREEMAN PATIENT NAVIGATION PUBLIC CHARITY GENERAL SUPPORT INSTITUTE 55 EXCHANGE PLACE, SUITE 405 NEW YORK, NY 10005 25,000. PUBLIC CHARITY SUPPORT FOR PROJECT TO HOSPICE AND PALLIATIVE CARE INCREASE ACCESS TO ASSOCAITION OF NYS PALLIATIVE CARE FOR 2 COMPUTER DRIVE WEST, SUITE 105 ALBANY, NY 12205 PERSONS WITH INTELLECTUAL AND/OR 25,000. PUBLIC CHARITY SUPPORT FOR THE HOSPICE AND PALLIATIVE CARE OF PEDIATRIC PALLIATIVE WESTCHESTER CARE PROGRAM 311 NORTH STREET 25,000. WHITE PLAINS, NY 10605 LAWRENCEVILLE SCHOOL PUBLIC CHARITY GENERAL SUPPORT P.O. BOX 6125 30,000. LAWRENCEVILLE, NJ 08648 MASSACHUSETTS GENERAL HOSPITAL PUBLIC CHARITY FOR THINK: KIDS FUND 55 FRUIT STREET BOSTON, MA 02114 15,000. MEMORIAL SLOAN-KETTERING CANCER PUBLIC CHARITY SUPPORT FOR PAIN AND CENTER PALLIATIVE CARE NURSING FELLOWSHIP 1275 YORK AVENUE NEW YORK, NY 10065 115,000. MOUNT HOLYOKE COLLEGE PUBLIC CHARITY GENERAL SUPPORT 50 COLLEGE STREET SOUTH HADLEY, MA 01075 30,000. Total from continuation sheets

Part XV Supplementary Information	า			
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual,	Foundation	Purpose of great or	-
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MOUNT SINAI SCHOOL OF MEDICINE		PUBLIC CHARITY	SUPPORT FOR THE	
1425 MADISON AVENUE			VISITING DOCTORS	
NEW YORK, NY 10029			PROGRAM'S NURSE	
·			PRACTITIONER CASE	
		ł	MANAGEMENT PROJECT	150,000
MOUNT SINAL SCHOOL OF MEDICINE		PUBLIC CHARITY	SUPPORT FOR THE CENTER	
1225 FIFTH AVENUE, SUITE C-2			TO ADVANCE PALLIATIVE	
NEW YORK, NY 10029			CARE'S MEDIA OUTREACH	
		i	CAMPAIGN AND FOR	
			GENERAL SUPPORT OF ITS	200,000
MOUNT SINAI SCHOOL OF MEDICINE		PUBLIC CHARITY	GENERAL SUPPORT OF THE	
1425 MADISON AVENUE			NATIONAL PALLIATIVE	
NEW YORK, NY 10029			CARE RESEARCH CENTER	50,000
NEW YORK LEGAL ASSISTANCE GROUP		PUBLIC CHARITY	SUPPORT FOR THE	
7 HANOVER SQUARE, 18TH FLOOR		ļ	LEGALHEALTH DIVISION	
NEW YORK, NY 10004			IN PROVIDING LEGAL	
			SERVICES TO PALLIATIVE	
			CARE PATIENTS	40,000.
NEW YORK - PRESBYTERIAN FUND, INC.		PUBLIC CHARITY	SUPPORT OF PALLIATIVE	
425 EAST 61ST STREET			CARE SERVICES IN NEW	
NEW YORK, NY 10065			YORK-PRESBYTERIAN/WEIL	
			CORNELL MEDICAL CENTER	50,000
			GUNDON OF PALLANTIN	
NEW YORK - PRESBYTERIAN FUND, INC.		PUBLIC CHARITY	SUPPORT OF PALLIATIVE	
425 EAST 61ST STREET			CARE SERVICES THROUGH	75 000
NEW YORK, NY 10065		DUDI 10 0011 D 1011	THE HOUSE CALL PROGRAM	75,000
NEW YORK UNIVERSITY		PUBLIC CHARITY		
1 WASHINGTON SQUARE NORTH			SCHOLARSHIPS FOR THE	
NEW YORK, NY 10008			ZELDA FOSTER MSW	
			FELLOWSHIP AT THE	25 000
			SILVER SCHOOL OF	25,000
PET PARTNERS		PIIRLIC CHAPTTY	GENERAL SUPPORT	
875 124TH AVENUE NE		Charles Charles	DOLLOW!	
BELLEVUE, WA 98005			1	_10,000
52222402, WA 30003				
PRINCETON DAY SCHOOL		PUBLIC CHARITY	GENERAL SUPPORT	
P.O. BOX 75				
PRINCETON, NJ 08542			1	30,000
RIVERDALE COUNTRY SCHOOL		PUBLIC CHARITY	GENERAL SUPPORT	
5250 FIELDSTONE ROAD				
RIVERDALE, NY 10471	<u></u>	<u>L</u>		25,000
Total from continuation sheets				

Part XV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor RIVERTOWN ARTS COUNCIL, INC. PUBLIC CHARITY SUPPORT FOR MUSIC P.O. BOX 60 PROGRAM HASTING-ON-HUDSON, NY 10706 15,000. PUBLIC CHARITY GENERAL SUPPORT ST. LUKE'S SCHOOL 487 HUDSON STREET NEW YORK, NY 10014 50,000. THIRD STREET MUSIC SCHOOL SETTLEMENT PUBLIC CHARITY GENERAL SUPPORT 235 EAST 11TH STREET NEW YORK, NY 10003 50,000. VISITING NURSE SERVICE OF NEW YORK PUBLIC CHARITY SUPPORT FOR THE 1250 BROADWAY, 7TH FLOOR HOSPICE AND PALLIATIVE NEW YORK, NY 10001 CARE PHYSICIAN TRAINING PROGRAM 25,000. VISITING NURSE SERVICE OF NEW YORK PUBLIC CHARITY SUPPORT FOR THE VIGIL 1250 BROADWAY, 7TH FLOOR VOLUNTEER PROGRAM NEW YORK, NY 10001 10,000. WINDWARD SCHOOL PUBLIC CHARITY GENERAL SUPPORT 40 WEST RED OAK LANE 30,000. WHITE PLAINS, NY 10604 CHILDREN'S HOSPITAL OF PHILADELPHIA PUBLIC CHARITY SUPPORT FOR THE PEDIATRIC FELLOWSHIP FOUNDATION IN HOSPICE AND 34TH STREET AND CIVIC CENTER BLVD. 200,000. PALLIATIVE MEDICINE PHILADELPHIA, PA 19104 PUBLIC CHARITY SUPPORT FOR RESEARCH JOHN HOPKINS UNIVERSITY 733 N. BROADWAY PROJECT ON PALLIATIVE CARE FOR PANCREAS BALTIMORE, MD 21205 CANCER PATIENTS 44,000. PUBLIC CHARITY SUPPORT FOR PALLIATIVE JOHN HOPKINS UNIVERSITY 733 N. BROADWAY CARE RESEARCH BALTIMORE, MD 21205 FELLOWSHIP FOR PHYSICIANS OR ADVANCED PRACTICE NURSES 100,000. Total from continuation sheets

Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - BELLEVUE HOSPITAL CENTER
SUPPORT FOR EDUCATIONAL RESOURSES AND OPPORTUNITIES IN CONNECTION WITH
HOSPICE AND PALLIATIVE MEDICINE FELLOWSHIP
NAME OF RECIPIENT - DANA-FARBER CANCER INSTITUTE
FOR SCHOLARSHIPS TO THE PALLIATIVE CARE EDUCATION AND PRACTICE COURSE
AT THE HARVARD MEDICAL SCHOOL CENTER FOR PALLIATIVE CARE
NAME OF RECIPIENT - HOSPICE AND PALLIATIVE CARE ASSOCATION OF NYS
SUPPORT FOR PROJECT TO INCREASE ACCESS TO PALLIATIVE CARE FOR PERSONS
WITH INTELLECTUAL AND/OR DEVELOPMENTAL DISABILITIES
NAME OF RECIPIENT - MOUNT SINAI SCHOOL OF MEDICINE
SUPPORT FOR THE CENTER TO ADVANCE PALLIATIVE CARE'S MEDIA OUTREACH
CAMPAIGN AND FOR GENERAL SUPPORT OF ITS ACTIVITIES
NAME OF RECIPIENT - NEW YORK UNIVERSITY
SUPPORT FOR SCHOLARSHIPS FOR THE ZELDA FOSTER MSW FELLOWSHIP AT THE
SILVER SCHOOL OF SOCIAL WORK

FORM 990-PF DIVIDENI	OS AND	INTER	EST F	ROM S	ECUF	RITIES	STATEMENT	1
SOURCE		GROSS	AMOU			TAL GAINS	COLUMN (A AMOUNT)
DIVIDENDS INTEREST			952,8 659,8			0.	1,952,8 1,659,8	
TOTAL TO FM 990-PF, PART I, I	LN 4	3,	612,7	41.	=	0.	3,612,7	41.
FORM 990-PF	AC	COUNTI	NG FE	ES			STATEMENT	2
DESCRIPTION	EXPÈ	A) NSES BOOKS		(B) INVES INCO		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	2	9,028.			0.		29,0	28.
TO FORM 990-PF, PG 1, LN 16B	2	9,028.		# #	0.		29,0	28.
FORM 990-PF	0	THER E	XPENS	ES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INVES INCO		(C) ADJUSTED NET INCOM		
FILING FEES INSURANCE PAYROLL PROCESSING FEES MISCELLANEOUS DUES AND SUBSCRIPTIONS GRANT MANAGEMENT SOFTWARE BANK FEES		1,500. 1,445. 1,344. 1,699. 1,225. 6,500.		1	0. 0. 0. 0. 0. 25.		1,50 1,44 1,34 1,69 1,23	45. 44. 99. 25.
TO FORM 990-PF, PG 1, LN 23	1	3,838.		1	25.		13,7	13.

FORM 990-PF U.S. AND STATE	CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT	4
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET	נ
SEE ATTACHMENT A, PAGE 4 OF 5		x	20,613,610.	20,613,61	10.
TOTAL U.S. GOVERNMENT OBLIGATIONS		-			
TOTAL STATE AND MUNICIPAL GOVERNM	ENT OBLIG	ATIONS	20,613,610.	20,613,61	0.
TOTAL TO FORM 990-PF, PART II, LI	NE 10A	=	20,613,610.	20,613,61	0.
FORM 990-PF C	ORPORATE	STOCK		STATEMENT	5
DESCRIPTION			BOOK VALUE	FAIR MARKET	ר
PREFERRED STOCK - SEE ATTACHMENT COMMON STOCK - SEE ATTACHMENT A,			21,093,790. 13,594,180.	21,093,79 13,594,18	
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	=	34,687,970.	34,687,97	70.
FORM 990-PF C	ORPORATE	BONDS		STATEMENT	
DESCRIPTION			BOOK VALUE	FAIR MARKET	נ
SEE ATTACHMENT A, PAGE 1 OF 5		-	10,425,692.	10,425,69	2.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	- -	10,425,692.	10,425,69	2.
FORM 990-PF EXPLANATION CONCER	NING PART	VII-A,	LINE 12	STATEMENT	

EXPLANATION

THE FOUNDATION TREATED ITS DISTRIBUTION TO A DONOR ADVISED FUND AT THE FIDELITY CHARITABLE GIFT FUND (THE "GIFT FUND") AS A QUALIFYING DISTRIBUTION BECAUSE THE IRS HAS CLASSIFIED THE GIFT FUND A PUBLIC CHARITY. THE ADVISOR TO THE FUND HAS MADE AND WILL, FROM TIME TO TIME, CONTINUE TO MAKE REQUESTS TO THE GIFT FUND TO MAKE DISTRIBUTIONS FROM THE DONOR ADVISED FUND IN FURTHERANCE OF THE FOUNDATION'S CHARITABLE PURPOSES, WHICH ARE DESCRIBED IN CODE SECTION 170(C)(2)(B).

April 30, 2013

TOTAL

Description

April 30, 2013

5.76 4.20 4.48 4.49 5 63 4.37 Annual Income Yield% 70,450 5.92 Estimated Current 8,393 55,130 29,160 30,712 60,750 22,528 7,592.81 9,324 09 25,143.75 4,441.02 14,49900 Sain/(Loss) Accrued Interest Estimated 23,287.63 2,774 22 168,696.00 311,150.00 150,530.00 115,420.00 189,610.00 41,545 40 95,157 00 Unrealized 1,311,150.00 650,530.00 186,545.40 545,157.00 515,420.00 1,054,134.00 Estimated 1,189,610.00 Market Value 117.1260 131.1150 130 1060 118.9610 128 6520 128.8550 121.1460 Estimated Market Price 500,000 00 Adjusted/Total 450,000.00 400,000.00 885,438.00 1,000,000.00 145,000 00 Cost Basis 1,000,000.00 145,000 1,000,000 400,000 900,000 500,000 450,000 Quantity 1,000,000 REV BUILD C GUAR TAXABLE DECO9 05 832%MAY01 30 SVCS COP BUILD C TAXABLE NOVO9 06.825%AUGO1 29 AMER BDS SER B TAXABLE DECO9 05 632%DEC01 29 FCS PJRV BUILD B TAXABLE DECO9 05.788%JUL01 29 PROTN REV SER B TAXABLE JAN10 07.045%JUL01 29 PAR CALL DATE: 12/01/19 PAR CALL PRICE 100 00 PAR CALL DATE. 08/01/19 PAR CALL PRICE: 100.00 PAR CALL DATE 07/01/19 PAR CALL PRICE. 100.00 INST RV B OID TAXABLE DECO9 06 750%DECO1 29 REVS SER A TAXABLE JAN10 05 513%APR01 30 MOODY'S. AA2 S&P- AA+ CUSIP. 34160PDF3 01/13/10 12/10/09 12/15/09 12/04/09 MOODY'S: AA3 S&P' A+ CUSIP. 80586AAQ4 MOODY'S. AAA S&P' AAA CUSIP: 914455JZ4 12/09/09 MOODY'S AA3 S&P AA. CUSIP 574300HY8 MOODY'S. AA2 S&P AA CUSIP 575832TWO 01/08/10 10/29/09 MOODY'S AA3 S&P: AA CUSIP: 20772G4Z8 Acquired MOODY'S: A1 S&P: AA. CUSIP: 34160WUD4 MASS ST CLG BLDG AUTH PJ SCAGO PFC GEORGETWN SC MARYLAND ST TRANSN AT FLORIDA ST DEPT MGMT CONNECTICUT ST BUILD UNIVERSITY MICH UNIV FLORIDA ST DEPT ENV **MUNICIPAL BONDS** Description

5 55

32,645

6,801.04

87,915.00

587,915.00

117.5830

500,000.00

500,000

PAR CALL DATE: 08/15/19 PAR CALL PRICE: 100 00

MOODY'S AA3 S&P AA. CUSIP. 023026CE5

REV TAXABLE TAXABLE DECO9 06.529%AUG15 30

AMARILLO TEX EDC SLS TAX

April 30, 2013

MUNICIPAL BONDS (continued) Description	Acquired	Quantity	Adjusted/Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Unrealized Estimated Gain/(Loss) Accrued Interest	Estimated Current Annual Income Yield%	urrent Yield%
NEW YORK N Y SUSER BUILD AMER SER G.1 TAXABLE MAR10 06.268%N MOODY'S AAZ S&P AA CUSIP: 64966HYNA PAR CALL DATE: 03/01/20 PAR CALL PRICE	AYORK NY SUSER BUILD 03/19/10 1,50 AMER SER G-1 TAXABLE MAR10 06.268%MAR01 31 MOODY'S AA2 S&P-AA CUSIP: 64966HYN4 PAR CALL DATE: 03/01/20 PAR CALL PRICE: 100 00	1,500,000 71.31 0.00	1,500,000.00	119.4440	1,791,660.00	291,660 00	15,408.83	94,020	5.24
FINDLAY OHIO CITY SCH DIST SCH FACS B TAXABLE FEB10 06.250%L MOODY'S: AA2 S&P. *** CUSIP 317747DQ3 PAR CALL DATE: 12/01/19 PAR CALL PRICE	01/22/10 1,250 DIST SCH FACS B TAXABLE FEB10 06.250%DEC01 37 MOODY'S AAZ S&P. *** CUSIP-317747DQ3 PAR CALL DATE: 12/01/19 PAR CALL PRICE 100.00	1,250,000 :01 37 0.00	1,250,000 00	115 2850	1,441,062.50	191,062.50	32,335 06	78,125	5.42
SOUTH JERSEY TRANSN AUTH 07/24/09 NJ RV 4-5 OID TAXABLE AUGO9 07.000%NO MOODY'S: BAA1 S&P: A- CUSIP: 838536ER7	1, OT/24/09 1, NJ RV A-S OID TAXABLE AUGO9 07.000%NOV01 38 MOODY'S: BAA1 S&P: A- CUSIP: 838536ER7	1,000,000 3 <i>8</i>	980,950.00	123.4640	1,234,640.00	253,690.00	34,805.55	70,000	5.66
NC TPK AT TRIANGLE EXPWY SYS BUILD B OID TAXABLE JUL09 06.700%. MOODYS- AAZ S&P AA CUSIP. 65830TAGO PAR CALL DATE: 01/01/19 PAR CALL PRICE	TPK AT TRIANGLE EXPWY 07/15/09 1,00 SYS BUILD B OID TAXABLE JULO9 06.700%JANO1 39 MOODY'S AA2 S&P AA CUSIP: 65830TAG0 PAR CALL DATE: 01/01/19 PAR CALL PRICE. 100.00	1,000,000 21.39 0.00	997,630 00	118.9230	1,189,230.00	191,600.00	22,147 22	666'99	5 63
BEXAR CNITY TEX HOSP DIST 08/05/09 CTFS SER B TAXABLE AUGO9 06 904%FEB15 MOODY'S: AA1 S&P AA+ CUSIP-088365DUZ PAR CALL DATE. 02/15/19 PAR CALL PRICE:	CIFS SER B TAXABLE AUGO9 06 904%FEB15 39 MOODY'S: AA1 S&P-AA+ CUSIP-088365DUZ PAR CALL DATE. 02/15/19 PAR CALL PRICE: 100 00	2,000,000 39 70 00	2,000,000 00	120 3720	2,407,440.00	407,440.00	28,766.66	138,079	5 73
MET ST LOUIS MO SWR DT 01/15/10 WWKS RV BUILD B TAXABLE JAN1O 05.856% MOODY'S: AA1 S&P AAA CUSIP. 592481CA1	FST LOUIS MO SWR DT 01/15/10 450, WWKS RV BUILD B TAXABLE JAN10 05.856%MAY01 39 MOODY'S. AA1 S&P AAA CUSIP. 592481CA1	450,000 AYO1 39	450,000 00	129.0630	580,783.50	130,783.50	13,102.80	26,352	4.53
ARIZONA BRD REGENTS AZ UNV REV BUILD A TAXABLE APR 10 06.304% MOODY'S: AA3 S&P: AA CUSIP: 04048RDT0	CONA BRD REGENTS AZ 03/31/10 10 UNV REV BUILD A TAXABLE APR 10 06.304%JUL01 39 MOODY'S. AA3 S&P. AA CUSIP. 04048RDT0	100,000 101 39	100,000 00	119.4370	119,437.00	19,437.00	2,083.82	6,304	5.27
METROPOLITAN TRANSN AUTH 01/06/ N Y REV SER A TAXABLE JAN1O 06 668% MOODY'S, A2 S&P' A CUSIP. 59259YBYA	ROPOLITAN TRANSN AUTH 01/06/10 N Y REV SER A TAXABLE JAN1O 06 668%NOV15 39 MOODY'S, A2 S&P·A CUSIP. 59259YBY4	885,000 5 39	885,000.00	134 2520	1,188,130.20	303,130.20	27,047.07	59,011	4.96

April 30, 2013

5.40 5.40 5.56 5.22 5.40 5.11 5 32 Estimated Current Annual Income Yield% 32,790 5.83 132,800 66,400 6,655 44,512 66,400 32,245 1,097,660 54,964 44 Unrealized Estimated Gain/(Loss) Accrued Interest 536.10 13,571.42 3,585.73 27,482 22 27,482.22 348,935 97 6,717.71 219,294.49 101,100 00 219,294.49 438,588.98 130,745.00 19,575 00 3,701,140.58 62,305 00 20,613,609.60 2,457,040.00 630,745.00 119,575.00 851,100.00 1,228,520 00 1,228,520.00 Estimated Market Value 562,305.00 Estimated Market Price 122.8520 119.5750 112.4610 113 4800 1228520 126 1490 Adjusted/Total Cost Basis 500,000.00 100,000.001 750,000.00 2,018,451.02 16,912,469 02 500,000 00 1,009,225 51 1,009,225 51 Quantity 750,000 1,000,000 2,000,000 500,000 100,000 16,930,000 1,000,000 500,000 REV BUILD AMER B TAXABLE SEP10 05.935%OCT01 40 PLANT BABS A RF TAXABLE MAR10 06.655%APR01 57 INC REV B RF LOC TAXABLE DECO9 06 449%FEB15 44 ORIGINAL UNIT/TOTAL COST: 100 9520/1,009,520.00 ORIGINAL UNIT/TOTAL COST. 100.9520/1,009,520.00 PAR CALL DATE. 10/01/20 PAR CALL PRICE: 100.00 PAR CALL DATE: 12/01/19 PAR CALL PRICE: 100 00 REV SR SER B TAXABLE DECO9 06 558%DECO1 39 FACS AT TAXABLE FEB10 06.640%DEC01 42 03/04/10 03/05/10 08/27/10 03/04/10 11/20/09 11/19/09 Acquired MOODY'S: AA3 S&P. A+ CUSIP: 731167EA6 MOODY'S. AAZ S&P: AA CUSIP 353174FX8 MOODY'S. *** S&P. A+ CUSIP: 033177XV3 MOODY'S A2 S&P-A+ CUSIP. 626207YM0 MOODY'S A3 S&P. A CUSIP 02765UCY8 MUNICIPAL BONDS (continued) A FRANKLIN CO OH CNVNTN A FRANKLIN CO OH CNVNTN AMERICAN MUN PWR OHIO MUNICIPAL ELEC AUTH GA ANCHORAGE AK ELEC UTIL POLK CNTY FLA UTIL SYS Subtotal TOTAL Description

ATTACHMENT A PAGE 4 of 5

Estimated Current Annual Income Yield%

Unrealized Estimated Gain/(Loss) Accrued Interest

Market Value 8,595,540.00

Estimated Market Price

Adjusted/Total Cost Basis

> Quantity 340,000

Acquired

PREFERRED STOCKS

95,540 02

25.2810

8,499,999.98

8.375% UNDATED SUBORDINA CALLABLE BONDS

Description ALLIANZ SE MOODY'S A3 S&P A+ CUSIP: 018805200

06/03/08

711,617 8.27

April 30, 2013

						t				
PREFERRED STOCKS (continued) Description	Acquired	Quantity	₽,	Adjusted/Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Unrealized Estimated Gain/(Loss) Accrued Interest	Estimated Current Annual Income Yield%	Yield%
BARCLAYS BANK PLC 04/08/08 16 AMERICAN DEP SHRS SRS 5 8 125% NON CUM PERP MOODY'S: BA2 S&P. BBB CUSIP: 06739H362	04/08/08 1125% NON CUM IP: 06739H362	165,000 PERP	4	4,124,999.99	25.7300	4,245,450.00	120,450.01		335,115 7.89	7.89
HSBC HOLDINGS PLC 04/02/08 SUB CAP SECS 8.125% PFD STK MOODY'S BAA2 S&P: BBB4 CUSIP 404280703	04/02/08 TK USIP: 404280703	320,000	&	8,000,000.01	25.7900	8,252,800.00	252,799 99		649,917	7.87
TOTAL		825,000		20,624,999.98	2	21,093,790.00	468,790.02		1,696,649	8.04
EOUITIES				Unit	Total	Estimated	Estimated		d Estimated Current	Surrent
Description	Symbol Acquired		Quantity	Cost Basis	Cost Basis	Market Price	Market Value		Gain/(Loss) Annual Income Yield%	Yield%
APPLE INC	AAPL 04/13/11	3/11	1,000	333.1235	333,123 50	442.7800	442,780.00	0 109,656 50	12,200	2.75
BOFING COMPANY	BA 08/06/08	80/9	10,000	65 2400	652,400.00	91.4100	914,100.00	0 261,700.00		2.12
	0/80	80/90/80	10,000	64 3000	643,000.00	91 4100	914,100.00	0 271,100.00	19,400	2.12
Subtotal			20,000		1,295,400.00	_	1,828,200.00	10 532,800.00	38,800	2.12
									1	•

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 a	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			ightharpoons X
	are filing for an Additional (Not Automatic) 3-Month Ex			this form).		
	omplete Part II unless you have already been granted					
	ic filing (e-file). You can electronically file Form 8868 if					orporation
	to file Form 990-T), or an additional (not automatic) 3-mo					
	file any of the forms listed in Part I or Part II with the ex					
	Benefit Contracts, which must be sent to the IRS in page					
	rrs gov/efile and click on e-file for Charities & Nonprofits		· · · · · · · · · · · · · · · · · · ·			
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).		
A corpora	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		
Part I only	y					▶ □
	corporations (including 1120-C filers), partnerships, REM	1ICs, and t	rusts must use Form 7004 to reques	st an exter	nsion of time	
to file inc	ome tax returns					
Type or	Name of exempt organization or other filer, see instru			Employe	r identification nu	ımber (EIN) or
print	THE Y. C HO/HELEN & MICHAE					
File by the	FOUNDATION C/O O'CONNOR DAY	VIES,	LLP		05-0613	
due date for filing your	Number, street, and room or suite no. If a P.O. box, s 665 FIFTH AVENUE	ee instruc	tions.	Social se	curity number (S	SN)
return See Instructions	City, town or post office, state, and ZIP code. For a following YORK, NY 10022	oreign add	dress, see instructions.			
	NEW TORK, NI 10022					
Enter the	Return code for the return that this application is for (file	a a canara	te application for each return)			0 4
Cittor tiro	Trotain code for the rotain that this application is for the	c a sopula	no application for each return,			لــــــــــــــــــــــــــــــــــــــ
Applicati		Return	Application			Return
ls For	-	Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
	0 (Individual)	03	Form 4720			09
Form 990		04	Form 5227			10
Form 990	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870			12
	O'CONNOR DAVIE					
	ooks are in the care of > 665 FIFTH AVEN	UE - 1	NEW YORK, NY 10022			
Teleph	none No. ► 212-286-2600		FAX No. ▶			
• If the o	organization does not have an office or place of busines	s in the Ur	nited States, check this box			
• If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole group	p, check this
box ▶	If it is for part of the group, check this box	and atta	ach a list with the names and EINs o	f all memb	ers the extension	n is for.
1 I re	quest an automatic 3-month (6 months for a corporation					
	DECEMBER 15, 2013 , to file the exemp	t organiza	tion return for the organization name	ed above.	The extension	
ıs fo	or the organization's return for:					
	calendar year or		אסס אר אור אור אור			
	X tax year beginning MAY 1, 2012	, an	d ending APR 30, 2013		- ·	
0 1644	on the contract of the feet land the contract of the contract	haal raaa	on: Initial return	Fınal retur		
2 If th	ne tax year entered in line 1 is for less than 12 months, c Change in accounting period	HECK IEAS	on. — initial retuin	rinai retui	"	
L	Change in accounting period					
3a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any		[
nor	refundable credits. See instructions			3a	\$	94,380.
b If th	nis application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
est	mated tax payments made Include any prior year overp	payment a	llowed as a credit.	3b	\$	94,380.
c Bal	ance due. Subtract line 3b from line 3a. Include your pa	syment wit	h this form, if required,			_
	using EFTPS (Electronic Federal Tax Payment System).			3c		0.
	If you are going to make an electronic fund withdrawal			om 8879-		
LHA F	or Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form 8868	(Rev 1-2013)

Form 8868 (Rev. 1-2013)					Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		ightharpoons X
Note. Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously fi	led Form (8868.	
• If you are filing for an Automatic 3-Month Extension, comple					
Part II Additional (Not Automatic) 3-Month E	xtensio				
		Enter filer's	identifyin	ig number, s	ee instructions
Type or Name of exempt organization or other filer, see instru-			Employer	ridentificatio	n number (EIN) or
print THE Y. C HO/HELEN & MICHAEL				05 06	12025
File by the FOUNDATION C/O O'CONNOR DAV				05-06	
due date for filing your return See	ee instruc	tions.	Social se	cunty numbe	er (SSN)
City, town or post office, state, and ZIP code. For a form NEW YORK, NY 10022	oreign add	lress, see instructions.			
					_
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)	-		0 4
Application	Return	Application			Return
Is 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)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted			iously file	<u>d Form 886</u>	8
O'CONNOR DAVIES					_
• The books are in the care of • 665 FIFTH AVENU	<u> </u>				
Telephone No. ► 212-286-2600		FAX No. ►			
If the organization does not have an office or place of business					▶ []
If this is for a Group Return, enter the organization's four digit.					
box . If it is for part of the group, check this box		ch a list with the names and EINs of	all memb	ers the exter	ision is for
4 I request an additional 3-month extension of time until		H 15, 2014 .	ממ ג	30, 2	013
5 For calendar year, or other tax year beginning	MI I	, 2012 , and ending			
6 If the tax year entered in line 5 is for less than 12 months, c Change in accounting period	heck reas	on:	Final r	eturn	
7 State in detail why you need the extension			77505		no Fitt
ADDITIONAL TIME IS NEEDED TO		LE THE INFORMATION	NECE	SSARY	LO LILE
A COMPLETE AND ACCURATE RETURN	N •				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			
nonrefundable credits. See instructions.			8a	\$	94,380.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	- "		
tax payments made. Include any prior year overpayment all	-				
previously with Form 8868.			8b	\$	94,380.
c Balance due. Subtract line 8b from line 8a. Include your pa	yment wit	th this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See instru	uctions.		8c	\$	0.
Signature and Verificat	ion mu	st be completed for Part II o	niy.		
Under penalties of perjury, I declare that I have examined this form, including	ing accomp	panying schedules and statements, and to	the best o	f my knowledg	ge and belief,
it is true, correct, and complete, and that I am authorized to prepare this fo		DΛ		امر	112
Signature ► 6 Jamma Macari Title ►		PA	Date	<u>▶</u> 12/1	1112
1 ~				Form 8	868 (Rev. 1-2013)