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

| 0111 | 3 140 14 | 773-0032 |
|------|----------|----------|
| 2 | 20 | 12 |

Department of the Treasury

| | | | 1, 2012 | | APR 30, 2013 | T Open to public inspection |
|---------------------------------------|----------|--|---|--|---|---|
| | | foundation | | | A Employer identification | |
| | | JOSEPH H. WENDER FOUND | ATION | | | |
| | | KROHN + COMPANY, CPAS | | | 13-3318170 | |
| | | nd street (or P O box number if mail is not delivered to street | Room/suite | B Telephone number | | |
| | | MONTGOMERY STREET | , | 1410 | 415-344-04 | 0.0 |
| | | own, state, and ZIP code | | 12 - 2 - 2 | C If exemption application is p | |
| | | FRANCISCO, CA 94111 | | | in exemption application is p | ending, check here |
| | | all that apply Initial return | Initial return of a fo | rmer nublic charity | D 1. Foreign organization: | s check here |
| u 0 | HOOK | Final return | Amended return | mor public onality | i i i i i i i i i i i i i i i i i i i | of conson word |
| | | Address change | Name change | | 2. Foreign organizations me check here and attach or | eeting the 85% test, |
| н с | hack | type of organization X Section 501(c)(3) ex | ···· | | | |
| <u> </u> | _ | , , | Other taxable private founda | tion | E If private foundation sta under section 507(b)(1 | ~ 1 1 |
| I Fa | | rket value of all assets at end of year J Accounting | | Accrual | | |
| | | | her (specify) | //ocruar | F If the foundation is in a under section 507(b)(1 | |
| > | | 2,447,453. (Part I, colu | · · · · — — — — — — — — — — — — — — — — | pasis.) | under 30000011 307 (b)(1 | (D), check here |
| | | Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| | 1 () | (The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a)) | expenses per books | income | income | for chantable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received | 75,000. | | N/A | (|
| | 2 | Check If the foundation is not required to attach Sch B | , , , , , , | | | |
| | 3 | Interest on savings and temporary cash investments | | | | |
| | 4 | Dividends and interest from securities | 47,560. | 47,560. | | STATEMENT 1 |
| 2008 | 5a | Gross rents | , , | | | · · · · · · · · · · · · · · · · · · · |
| 3 | | Net rental income or (loss) | | ······································ | | |
| €`) | _ | Net gain or (loss) from sale of assets not on line 10 | 33,332. | | | |
| ٦≡ | h | Gross sales price for all assets on line 6a 53,540. | | ······································ | mar. | *** |
| Ę | | Capital gain net income (from Part IV, line 2) | | 33,332. | 2 // 2 | |
| ให้evenüe⊕ | 8 | Net short-term capital gain | | | | ; ; |
| - | 9 | Income modifications | | ************* | NOV S | \$ 73.3 |
| | 10a | Gross sales less returns and allowances | | | * | ; |
| 1 | | Less Cost of goods sold | | | 1 00% | |
| | | Gross profit or (loss) | | | | . welle &. 1 |
| 15 | 11 | Other income | 1,463. | 0. | | STATEMENT 2 |
| <u> </u> | 12 | Total Add lines 1 through 11 | 157,355. | 80,892. | | |
| | 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | 14 | Other employee salaries and wages | | | | |
| | 15 | Pension plans, employee benefits | | | | |
| ses | 16a | Legal fees | | | | |
| pen | | Accounting fees STMT 3 | 3,265. | 30. | | 3,235. |
| EX | C | Other professional fees | | | | |
| <u>X</u> | 17 | Interest | | * | | |
| Operating and Administrative Expenses | 18 | Taxes STMT 4 | 1,171. | 0. | | 0. |
| nis | 19 | Depreciation and depletion | | | | |
| Ē | 20 | Occupancy | | | | |
| Ă | 21 | Travel, conferences, and meetings | | | | |
| anc | 22 | Printing and publications | | - | | |
| <u>n</u> | 23 | Other expenses | | | | <u> </u> |
| rati | 24 | Total operating and administrative | | 2.2 | | 2 22= |
| Эре | 1 | expenses. Add lines 13 through 23 | 4,436. | 30. | | 3,235. |
| J | 25 | Contributions, gifts, grants paid | 116,000. | | | 115,045. |
| | 26 | Total expenses and disbursements. | 100 400 | 2.2 | | 110 000 |
| | <u> </u> | Add lines 24 and 25 | 120,436. | 30. | | 118,280. |
| | 27 | Subtract line 26 from line 12 | 26 010 | | | |
| | 1 | Excess of revenue over expenses and disbursements | 36,919. | 00 000 | | |
| | | Net investment income (if negative, enter -0-) | | 80,862. | | |
| 2235 | | Adjusted net income (if negative, enter -0-) | <u> </u> | | N/A | 5 000 DE (02:00 |
| 2235 12-0 | 5-12 | LHA For Paperwork Reduction Act Notice, see | instructions. | | | Form 990-PF (2012) |

| 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) | 11 | 909,658. |
| 2 | Enter amount from Part I, line 27a | 2 | 36,919. |
| 3 | Other increases not included in line 2 (itemize) | 3 | 0. |
| 4 | Add lines 1, 2, and 3 | 4 | 946,577. |
| 5 | Decreases not included in line 2 (itemize) | 5 | 0. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 946,577. |

Page 3

| (a) List and desc | and Losses for Tax on cribe the kind(s) of property sold (e | g , real estate, | t Income | P- | ow acquired Purchase | (c) Date acq | | (d) Date sold |
|--|---|--|--------------------------------------|--|-------------------------|---|--------------------|------------------------------------|
| 1a GOLDMAN SACHS | CROUD TNC | SIIS IVILU UO) | - | | Donation P | 11/27/ | | (mo , day, yr) 11/28/12 |
| b B GOLDMAN SACES | GROUP, INC. | · | | | P | 11/2// | 02 | 11/28/12 |
| C | | | | | | | | |
| d | | | | † | | | | |
| е | | | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis expense of sale | | | (h) Gain (e) plus (f) | | (g) |
| a 53,540. | | | 20,20 | 8. | | | | 33,332. |
| b | | | | | | | | |
| | | - | | | | | | |
| <u>d</u> | | | · · · · | -+ | | | | |
| Complete only for assets shown | l ng gain in column (h) and owned b | y the foundation | on 12/31/60 | | | Il Caine /Cel | /b) ann | minus |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) E> | cess of col (i) | | | I) Gains (Col II (k), but not Losses (fro | less tha | n -0-) a r |
| a | | | (1), | | | | | 33,332. |
| b | | | | | | | | 30,002. |
| C | | | | | | | | |
| d | | | | | | | | |
| е | | | | | | | | |
| 2 Capital gain net income or (net ca | apital loss) { If gain, also en If (loss), enter | ter in Part I, line -0- in Part I, line | 7 7 | } | 2 | | | 33,332. |
| 3 Net short-term capital gain or (lo- If gain, also enter in Part I, line 8, | ss) as defined in sections 1222(5) | | | ٦ | | | | |
| If (loss), enter -0- in Part I, line 8 | | | | <u>}</u> | 3 | | N/A | |
| If section 4940(d)(2) applies, leave t Was the foundation liable for the sec if "Yes," the foundation does not qua | ction 4942 tax on the distributable a | complete this pa | art | | | | | Yes X No |
| | each column for each year, see the | e instructions be | fore making any e | | | | | (4) |
| (a) Base period years Calendar year (or tax year beginn | | | Net value of no | | | ,,,, | Distri I (b) di | (d) bution ratio vided by col (c)) |
| 2011 | | 27,425. | | | 116,30 | | | .060211 |
| 2010 | | 89,299. 86,043. | | | 358,92 273,52 | | | .080248 |
| 2009 2008 | | 72,245. | | | 098,56 | | | .129729 |
| 2007 | | 02,518. | | | 790,74 | | | .144233 |
| 2 Total of line 1, column (d) | | , | | | , | 2 | | .540236 |
| 3 Average distribution ratio for the the foundation has been in existe | • | al on line 2 by 5, | or by the number | r of yea | rs | 3 | | .108047 |
| 4 Enter the net value of noncharita | ble-use assets for 2012 from Part : | X, line 5 | _ | | | 4 | | 2,090,918. |
| 5 Multiply line 4 by line 3 | | | | | 5 | | 225,917. | |
| 6 Enter 1% of net investment incor | me (1% of Part I, line 27b) | | | | | 6 | | 809. |
| 7 Add lines 5 and 6 | | | | | | 7 | | 226,726. |
| 8 Enter qualifying distributions from | m Part XII, line 4 | | | | | 8 | | 118,280. |
| | n line 7, check the box in Part VI, li | ine 1b, and comp | plete that part usin | ng a 1% | tax rate | | | |
| 223521 12-05-12 | | | | | | | F | orm 990-PF (2012) |

THE JOSEPH H. WENDER FOUNDATION C/O KROHN + COMPANY, CPAS Form 990-PF (2012) 13-3318170 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup_{\cup} \) and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary-see instructions) 1,617. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔛 and enter 1% 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-) 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments a 2012 estimated tax payments and 2011 overpayment credited to 2012 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 7 Total credits and payments Add lines 6a through 6d 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 9 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be Credited to 2013 estimated tax 11 Refunded > Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Х c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 0. (1) On the foundation > \$ 0 • (2) On foundation managers ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers > \$ X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a Х b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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 X remain in the governing instrument?

Form 990-PF (2012)

X

X

8b

10

NY

7 Did the foundation have at least \$5,000 in assets at any time during the year?

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

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)

year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(1)(3) or 4942(1)(5) for calendar

If "Yes," complete Part II, col. (c), and Part XV.

Form **990-PF** (2012)

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

| 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 | > | (|
| | | |
| 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. | | Expenses |
| 1 | _ | |
| | 4 | |
| SEE STATEMENT 7 | | 0. |
| 2 | _ | |
| | 4 | |
| | | |
| 3 | - | |
| | - | |
| | 1 | |
| 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 | T | Amount |
| 1 N/A | | |
| | 7 | |
| | <u> </u> | |
| 2 | | |
| | _ | |
| | | |
| All other program-related investments. See instructions | 1 | |
| 3 | _ | |
| | 4 | |
| Total Add lines 1 through 3 | | 0. |
| Total. Add lines 1 through 3 | . 1 | () |

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| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign for | ındatıor | ns, 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 | 1,852,480. |
| | Average of monthly cash balances | 1b | 65,937. |
| C | Fair market value of all other assets | 10 | 65,937. 204,342. |
| d | Total (add lines 1a, b, and c) | 10 | 2,122,759. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | ., |
| | 1c (attach detailed explanation) 1e 0 | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 2,122,759. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 31,841. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 2,090,918. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 104,546. |
| P | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part) | nd certa | ın |
| 1 | Minimum investment return from Part X, line 6 | 1 | 104,546. |
| 2a | Tax on investment income for 2012 from Part VI, line 5 Income tax for 2012 (This does not include the tax from Part VI) 2a 1,617 | | |
| b | Income tax for 2012 (This does not include the tax from Part VI) 2b 69 | .] | |
| C | Add lines 2a and 2b | 2c | 1,686. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 1,686. 102,860. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 102,860. |
| 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 | 102,860. |
| P | art XII Qualifying Distributions (see instructions) | · · · · · · · · · · · · · · · · · · · | · ··· |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | 110 000 |
| а | | 1a | 118,280. |
| b | | 1b | 0. |
| 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 | 110 |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 118,280. |
| 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 | 118,280. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years | qualifies | for the section |

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
|---|---------------|----------------------------|-------------|-----------------|
| 1 Distributable amount for 2012 from Part XI, | | | | 100.000 |
| line 7 | | | | 102,860. |
| 2 Undistributed income, if any, as of the end of 2012 | | | • | |
| a Enter amount for 2011 only | | | 0. | |
| b Total for prior years | | 0. | | |
| 3 Excess distributions carryover, if any, to 2012 | | 0. | | |
| 1 064 007 | | | | |
| a From 2007 264, 087. b From 2008 170, 885. | 1 | | | |
| c From 2009 176,616. | | | | |
| d From 2010 73, 190. | 1 | | | |
| e From 2011 22,511. | | | | |
| f Total of lines 3a through e | 707,289. | | | |
| 4 Qualifying distributions for 2012 from | 707/2000 | | | |
| Part XII, line 4. ►\$ 118, 280. | | | | |
| a Applied to 2011, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2012 distributable amount | | | | 102,860. |
| e Remaining amount distributed out of corpus | 15,420. | ······ | | •••••• |
| 5 Excess distributions carryover applied to 2012 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 722,709. | | | |
| 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 | 1 | | | |
| 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 | | | | |
| not applied on line 5 or line 7 | 264,087. | | | |
| 9 Excess distributions carryover to 2013. | 450 600 | | | |
| Subtract lines 7 and 8 from line 6a | 458,622. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2008 170,885. | | | | |
| b Excess from 2009 176,616. | | | | |
| Excess from 2010 73,190. | | | | |
| d Excess from 2011 22,511. | | | | |
| e Excess from 2012 15, 420. | | | <u> </u> | 5 000 DF (0040) |

| P | art XIV Private Operating Fo | oundations (see ins | structions and Part VII- | A, question 9) | N/A | |
|-----|--|------------------------------|----------------------------------|---------------------------------------|-----------------------------|---------------------|
| 1 8 | a If the foundation has received a ruling or | determination letter that | it is a private operating | | | |
| | foundation, and the ruling is effective for | 2012, enter the date of t | he ruling | • | | |
| ı | Check box to indicate whether the found | ation is a private operatin | ig foundation described in | n section | 4942(j)(3) or 49 | 42(j)(5) |
| _ | 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 | | | | | |
| | each year listed | | | | | |
| ı | b 85% of line 2a | | | | | |
| | Qualifying distributions from Part XII, | | 1 | | | |
| | 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 | | | | | |
| | for active conduct of exempt activities | | | | | |
| | Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | | |
| | alternative test relied upon | | | | | |
| ě | a "Assets" alternative test - enter (1) Value of all assets | | | | | |
| | `` | | | | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| ı | b "Endowment" alternative test - enter 2/3 of minimum investment return | | | | | |
| | shown in Part X, line 6 for each year listed | | | | | |
| • | "Support" alternative test - enter | | | | | |
| | (1) Total support other than gross | | | | | |
| | investment income (interest, | | | | | |
| | dividends, rents, payments on securities loans (section | | | | | |
| | 512(a)(5)), or royalties) | | | | | |
| | (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 | | | | | |
| P | art XV Supplementary Info | | | f the foundation | had \$5,000 or mo | ore in assets |
| | at any time during t | he year-see instr | uctions.) | | | |
| 1 | Information Regarding Foundation | n Managers: | | | | |
| | a List any managers of the foundation who | | | ibutions received by the | foundation before the clos | se of any tax |
| | year (but only if they have contributed m | iore than \$5,000) (See s | ection 507(a)(2)) | | | |
| | SEPH H. WENDER | | | | | |
| ١ | b List any managers of the foundation who other entity) of which the foundation has | | | or an equally large porti | on of the ownership of a pa | artnership or |
| NC | ONE | , a 10 /0 or grouter interes | •• | | | |
| 2 | · · · · · · · · · · · · · · · · · · · | on Cront Gift Loon | Sahalambia ata Da | | | |
| 2 | Information Regarding Contribution Check here ► X if the foundation of | | | | ant annual unualizated room | easta for funda. If |
| | | | | | | |
| — | the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d a. The name, address, and telephone number or e-mail of the person to whom applications should be addressed. | | | | | |
| Ī | a The name, address, and telephone numb | DEL OF ETHAILOLUIE PELZO | н то многи аррисаціон s s | HOURD DE AUDIESSEU | | |
| | | | | | | |
| | b The form in which applications should be submitted and information and materials they should include | | | | | |
| | c Any submission deadlines | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | | |
| (| d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors | | | | | |

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Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to **Amount** status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year HIGH MUSEUM OF ART NONE PUBLIC CHARITY 1280 PEACHTREE STREET, N.E. ATLANTA, GA 30309 1,000. NONE PUBLIC CHARITY CENTRE POMPIDOU FOUNDATION 10390 SANTA MONICA BLVD., #410 LOS ANGELES, CA 90025 50,000. PUBLIC CHARITY NAVY SEALS FOUNDATION NONE 1619 D STREET, BLDG, 5326 VIRGINIA BEACH, VA 23459 12,000. PUBLIC CHARITY NONE THE RUSTY STAUB FOUNDATION 100 CORPORATE PLACE, SUITE 203 2,400. PEABODY, MA 01960 LOS ANGELES COUNTY MUSEUM OF ART NONE PUBLIC CHARITY 5905 WILSHIRE BOULEVARD LOS ANGELES, CA 90036 25,000. SEE CONTINUATION SHEET(S ▶ 3a 116,000. Total b Approved for future payment NONE **▶** 3b Total

| Form 990-PF (2012) C/O KROHN + CO | OMPANY, CPA | <u> </u> | | 13-3 | 318170 Page 12 |
|---|---------------------------------------|---------------------|--|---------------------------|---------------------------------------|
| Part XVI-A Analysis of Income-Prod | ucing Activities | | | | |
| Enter gross amounts unless otherwise indicated | Unrelated bus (a) Business | iness income (b) | (C) Exclu- | (d) | (e) Related or exempt |
| 1 Program service revenue | code | Amount | sion code | Amount | function income |
| a | | | | | |
| b | | | | | |
| c | _ | | | | |
| d | _ | | | | · · · · · · · · · · · · · · · · · · · |
| e | _ | | | | |
| f | | | | | . |
| g Fees and contracts from government agencies | | | <u> </u> | | |
| 2 Membership dues and assessments | | | ļ | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | | 47.560 | . |
| 4 Dividends and interest from securities | | | 14 | 47,560. | |
| 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 | | | 18 | 33,332. | |
| than inventory | | | 10 | 33,332. | |
| Net income or (loss) from special events Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue | | | | | |
| a CRAFT WORLDWIDE | | | | | |
| b HOLDINGS, LLC | 722100 | 1,463. | | | · · · · · · · · · · · · · · · · · · · |
| c ALLEE, LLC | 722100 | 0. | | | |
| | - | | | | |
| ae | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | _ | 1,463. | | 80,892. | 0. |
| 13 Total. Add line 12, columns (b), (d), and (e) | · · · · · · · · · · · · · · · · · · · | • | | 13 | 82,355. |
| (See worksheet in line 13 instructions to verify calculations) | | | | | • |
| Part XVI-B Relationship of Activities | | lishment of E | xempt Pu | ırposes | |
| Line No. Explain below how each activity for which in | • | | A contributed | importantly to the accomp | lishment of |
| the foundation's exempt purposes (other that | in by providing lunds it | or such purposes) | | | · ····· · |
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13-3318170

Page 13

| | Exempt Organ | izations | | | | | | | |
|------------------|---|----------------------------------|---------------|---|---------------------------------------|-----------------------------------|---|-----------------------|------|
| 1 Did the | organization directly or indi | rectly engage in any of | the follows | ng with any other organization | on described in sec | ction 501(c) of | | Yes | No |
| the Co | de (other than section 501(c |)(3) organizations) or ir | n section 5 | 27, relating to political organ | izations? | | | | |
| a Transfe | ers from the reporting found | ation to a noncharitable | e exempt o | rganization of | | | | | |
| (1) Ca | sh | | | | | | 1a(1) | | Х |
| (2) Ot | her assets | | | | | | 1a(2) | | X |
| b Other t | ransactions | | | | | | | | |
| (1) Sa | les of assets to a noncharita | ible exempt organization | п | | | | 16(1) | | Х |
| | rchases of assets from a no | | | | | | 1b(2) | | X |
| (3) Re | ental of facilities, equipment, | or other assets | | | | | 1b(3) | | X |
| (4) Re | imbursement arrangements | ; | | | | | 1b(4) | | X |
| (5) Lo | ans or loan guarantees | | | • | | | 1b(5) | | X |
| • • | rformance of services or me | - embership or fundraisin | ıa solicitati | ons | | | 1b(6) | | Х |
| | g of facilities, equipment, ma | | | | | | 1c | | X |
| | | • . | | edule Column (b) should alv | vavs show the fair | market value of the goods | | ets | |
| | | | | ed less than fair market valu | | | | , | |
| | (d) the value of the goods, | | | | , | | , | | |
| a) Line no | (b) Amount involved | | | e exempt organization | (d) Description | on of transfers, transactions, an | nd shanng an | rangeme | ents |
| | | | N/A | | | | | | |
| | - | | | _ | | | | | |
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| ın secti | on 501(c) of the Code (othe complete the following sch | r than section 501(c)(3 edule | | 7 | zations described | | Yes | X |] No |
| | (a) Name of org | janization | | (b) Type of organization | | (c) Description of relation | nship | | |
| - | N/A | | | | | | | | |
| | | | | | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | | | | | |
| | | | | | | | | | |
| Sign Here | | mplete Declaration of prepa | | ng accompanying schedules and an taxpayer) is based on all inform | | er has any knowledge n | May the IRS of eturn with the shown below X Yes | e prepan (see inst | er |
| | Print/Type preparer's na | ame P | reparer's s | signature / | Date // | Check if PTIN | 1 | | |
| | | / | | no DIV | .//_ | self- employed | | | |
| Paid | DONALD R. | KROHN (| Herek | Mych | 4/1/13 | P(| 00068 | 214 | |
| Prepare | Film's name KRC | HN + COMPA | NY, C | PAS | | Firm's EIN ► 27 –2 | | | |
| Use Onl | | | • | | | | | - | |
| | · | 5 MONTGOME | RY ST | REET, SUITE | 1410 | | | | |
| | | N FRANCISC | | | | Phone no (415 | 5)34 | 4-0 | 400 |
| | | | -, | | | | Form 990 | | |
| | | | | | | | | 1. | 1 1 |

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2012

THE JOSEPH H. WENDER FOUNDATION C/O KROHN + COMPANY, CPAS 13-3318170 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year **▶** \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

THE JOSEPH H. WENDER FOUNDATION

C/O KROHN + COMPANY, CPAS

Employer identification number

13-3318170

| Part I | Contributors (s | ee instructions). | Use duplicate copies | of Part I if additional sp | ace is needed. |
|--------|-----------------|-------------------|----------------------|----------------------------|----------------|
|--------|-----------------|-------------------|----------------------|----------------------------|----------------|

| (-) | 4.3 | | |
|------------|--|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | JOSEPH H. WENDER 655 MONTGOMERY STREET, SUITE 1410 SAN FRANCISCO, CA 94111 | \$75,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |

Name of organization

Employer identification number

THE JOSEPH H. WENDER FOUNDATION C/O KROHN + COMPANY, CPAS

13-3318170

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| | · <u>·</u> | | |
|------------------------------|--|--|------------------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| - - - | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| - - - | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| - - | | <u> </u> | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$\$ | 00. 000.E7 or 000.BE\(2012\) |

| | anization DSEPH H. WENDER FOUNDATI ROHN + COMPANY, CPAS | CON | | Employer identification number 13–3318170 | |
|---------------------------|--|---------------------------------------|--|---|--|
| Part III | Exclusively religious, charitable, etc., indivivear. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional | , contributions of \$1,000 or less fo | c)(7), (8), or (10) organizatio ions completing Part III, enter or the year (Enter this information once | ns that total more than \$1,000 for the | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Desc | ription of how gift is held | |
| | Transferee's name, address, and | (e) Transfer of gi d ZIP + 4 | | nsferor to transferee | |
| (a) No. | | | T | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Desc | eription of how gift is held | |
| | Transferee's name, address, and | (e) Transfer of gi | | nsferor to transferee | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Desc | eription of how gift is held | |
| | | (e) Transfer of gi | ift | | |
| | Transferee's name, address, and | d ZIP + 4 | Relationship of tra | nsferor to transferee | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Desc | eription of how gift is held | |
| | | (e) Transfer of gi | ift | | |
| | Transferee's name, address, an | d ZIP + 4 | Relationship of transferor to transferee | | |
| | | | | | |

| 3 Grants and Contributions Paid During the | e Year (Continuation) | | | |
|--|---|---------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or contribution | |
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | status of recipient | contribution | Amount |
| VENDER WEIS FOUNDATION | NONE | PUBLIC CHARITY | | |
| 555 BRYANT STREET, SUITE 300 | | | | 25.0 |
| PALO ALTO, CA 94301 | | | | 25,00 |
| MARYMOUNT UNIVERSITY | NONE | PUBLIC CHARITY | | |
| 2807 NORTH GLEBE ROAD ARLINGTON, VA 22207 | | | | 60 |
| RELINGTON, VA 22207 | | | .,. | |
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| | | | | |
| Total from continuation sheets | | | | 25,6 |

| FORM 990-PF DIVIDEND | S AND | INTER | EST FRO | OM SEC | URITIES | STATEMENT | 1 |
|--------------------------------|-------|---------------------|--------------------------|------------------------|-----------------------------------|---------------------|-----------|
| SOURCE | | GROSS | AMOUNT | | PITAL GAINS DIVIDENDS | COLUMN (A AMOUNT | .) |
| GOLDMAN SACHS WELLS FARGO | - | | 47,556 | 5. 1. | 0. | 47,5 | 56. 4. |
| TOTAL TO FM 990-PF, PART I, L | N 4 | | 47,560 |). | 0. | 47,5 | 60. |
| FORM 990-PF | 0' | THER I | NCOME | | | STATEMENT | 2 |
| DESCRIPTION | | | (A) REVENU PER BOO | | (B) NET INVEST- MENT INCOME | | |
| CRAFT WORLDWIDE HOLDINGS, LLC | | | | 1,463. | 0 | • | |
| TOTAL TO FORM 990-PF, PART I, | LINE | 11 | | 1,463. | 0 | | |
| FORM 990-PF | AC | COUNTI | NG FEES | 5 | | STATEMENT | 3 |
| DESCRIPTION | EXPE | A) NSES BOOKS | NET I | 3) NVEST- INCOME | | | |
| ACCOUNTING FEES BANK FEES | 3,235 | | | | | 3,2 | 35. 0. |
| TO FORM 990-PF, PG 1, LN 16B | | 3,265. | | 30 | • | 3,2 | 35. |
| FORM 990-PF TAXES | | | | STATEMENT | 4 | | |
| DESCRIPTION | EXPE | A) NSES BOOKS | NET I | 3) NVEST- INCOME | (C) ADJUSTED NET INCOM | | |
| FEDERAL INCOME TAX STATE TAXES | | 921. 250. | | 0 | | | 0. |
| | | | | | | | |

| FORM 990-PF C | ORPORATE STOCK | | STATEMENT | 5 |
|--|---------------------------------|---------------------------------|-------------|----|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET | ŗ |
| GOLDMAN SACHS | | 596,343. | 2,139,11 | 4. |
| TOTAL TO FORM 990-PF, PART II, LI | NE 10B | 596,343. | 2,139,11 | 4. |
| FORM 990-PF | OTHER ASSETS | | STATEMENT | 6 |
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET | ? |
| CRAFT WORLDWIDE HOLDINGS ALLEE, INC ARTWORK | 224,468. 84,153. 121,020. | 217,464. 84,153. 121,020. | 83,32 | 0. |
| TO FORM 990-PF, PART II, LINE 15 | 429,641. | 422,637. | 204,34 | 2. |
| FORM 990-PF SUMMARY OF DIR | ECT CHARITABLE A | ACTIVITIES | STATEMENT | |
| ACTIVITY ONE PLEASE NOTE, THE FOUNDATION IS NO CHARITABLE ACTIVITIES. ITS PRIMA BY CONTRIBUTIONS, OTHER ORGANIZAT 501(C)(3) | RY PURPOSE IS TO | SUPPORT, | | |
| | | | EXPENSES | |
| TO FORM 990-PF, PART IX-A, LINE 1 | | | | 0. |

Form **8868**

(Rev. January 2013)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Form 8868 (Rev. 1-2013)

| ● If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ● If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a crequired to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request a of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With | n extension Certain | | | | | |
|---|---|--|--|--|--|--|
| Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of the visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. | | | | | | |
| | | | | | | |
| Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. | > | | | | | |
| print THE JOSEPH H. WENDER FOUNDATION | Employer identification number (EIN) or | | | | | |
| File by the due date for filing your 655 MONTGOMERY STREET, NO. 1410 | | | | | | |
| return See Instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions SAN FRANCISCO, CA 94111 | | | | | | |
| Enter the Return code for the return that this application is for (file a separate 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-T (corporation) | 07 | | | | | |
| Form 990-BL 02 Form 1041-A | 08 | | | | | |
| Form 4720 (individual) 03 Form 4720 | 09 | | | | | |
| Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 406(a) trust) 05 Form 6069 | 10 | | | | | |
| | 11 12 | | | | | |
| Form 990-T (trust other than above) 06 Form 8870 KROHN + COMPANY, CPAS - 655 MONTGOMERY STREET, SU | | | | | | |
| The books are in the care of ► 1410 - SAN FRANCISCO, CA 94111 Telephone No. ► 415-344-0400 | ▶ □ | | | | | |
| 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until DECEMBER 15, 2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ calendar year or ▶ tax year beginning MAY 1, 2012, and ending APR 30, 2013 | | | | | | |
| 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period | | | | | | |
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ | | | | | | |
| 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 allowed as a credit. 3b \$ | 0. | | | | | |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are point to make an electronic fund withdrawal with this Form 8868, see Form 8453-FO and Form 8879-FO for payment | 0. | | | | | |

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