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Form **990-PF**

# Return of Private Foundation

## or Section 4947(a)(1) Nonexempt Charitable Trust

### Treated as a Private Foundation

OMB No 1545-0052

**2012**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2012 or tax year beginning

07/01, 2012, and ending

06/30, 2013

Name of foundation **MYS FAMILY U.S. CHARITABLE  
FOUNDATION, INC.**

A Employer identification number

27-0521354

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

B Telephone number (see instructions)

(212) 652-7528

C/O M SAFRA &amp; CO., 499 PARK AVE., 11TH FL.

City or town, state, and ZIP code

NEW YORK, NY 10022

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at end

J Accounting method

☐ Cash☒ Accrual

of year (from Part II, col. (c), line

☐ Other (specify) \_\_\_\_\_

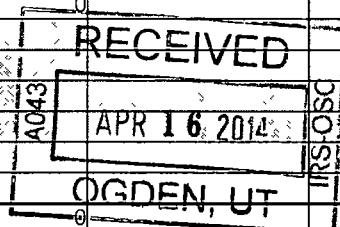
16) ▶ \$ 19,885,382.

(Part I, column (d) must be on cash basis)

C If exemption application is  
pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the  
85% test, check here and attach  
computation ☐E If private foundation status was terminated  
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here ☐

### Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))

|                                                                                       | (a) Revenue and<br>expenses per<br>books | (b) Net investment<br>income | (c) Adjusted net<br>income | (d) Disbursements<br>for charitable<br>purposes<br>(cash basis only) |
|---------------------------------------------------------------------------------------|------------------------------------------|------------------------------|----------------------------|----------------------------------------------------------------------|
| <b>Revenue</b>                                                                        |                                          |                              |                            |                                                                      |
| 1 Contributions, gifts, grants, etc., received (attach schedule)                      | 4,000,000.                               |                              |                            |                                                                      |
| 2 Check <input type="checkbox"/> if the foundation is not required to<br>attach Sch B |                                          |                              |                            |                                                                      |
| 3 Interest on savings and temporary cash investments                                  |                                          |                              |                            |                                                                      |
| 4 Dividends and interest from securities                                              |                                          |                              |                            |                                                                      |
| 5a Gross rents                                                                        |                                          |                              |                            |                                                                      |
| b Net rental income or (loss)                                                         |                                          |                              |                            |                                                                      |
| 6a Net gain or (loss) from sale of assets not on line 10                              |                                          |                              |                            |                                                                      |
| b Gross sales price for all<br>assets on line 6a                                      |                                          |                              |                            |                                                                      |
| 7 Capital gain net income (from Part IV, line 2)                                      |                                          |                              |                            |                                                                      |
| 8 Net short-term capital gain                                                         |                                          |                              |                            |                                                                      |
| 9 Income modifications                                                                |                                          |                              |                            |                                                                      |
| 10a Gross sales less returns<br>and allowances                                        |                                          |                              |                            |                                                                      |
| b Less Cost of goods sold                                                             |                                          |                              |                            |                                                                      |
| c Gross profit or (loss) (attach schedule)                                            |                                          |                              |                            |                                                                      |
| 11 Other income (attach schedule)                                                     |                                          |                              |                            |                                                                      |
| 12 Total. Add lines 1 through 11                                                      | 4,000,000.                               |                              |                            |                                                                      |
| <b>Operating and Administrative Expenses</b>                                          |                                          |                              |                            |                                                                      |
| 13 Compensation of officers, directors, trustees, etc.                                | 0                                        |                              |                            |                                                                      |
| 14 Other employee salaries and wages                                                  |                                          |                              |                            |                                                                      |
| 15 Pension plans, employee benefits                                                   |                                          |                              |                            |                                                                      |
| 16a Legal fees (attach schedule) <u>ATCH 1</u>                                        | 3,086.                                   |                              |                            | 17,396.                                                              |
| b Accounting fees (attach schedule)                                                   |                                          |                              |                            |                                                                      |
| c Other professional fees (attach schedule) *                                         |                                          |                              |                            | 22,950.                                                              |
| 17 Interest                                                                           |                                          |                              |                            |                                                                      |
| 18 Taxes (attach schedule) (see instructions)                                         |                                          |                              |                            |                                                                      |
| 19 Depreciation (attach schedule) and depletion                                       | 278,681.                                 |                              |                            |                                                                      |
| 20 Occupancy                                                                          |                                          |                              |                            |                                                                      |
| 21 Travel, conferences, and meetings                                                  |                                          |                              |                            |                                                                      |
| 22 Printing and publications                                                          |                                          |                              |                            |                                                                      |
| 23 Other expenses (attach schedule) <u>ATCH 3</u>                                     | 75,944.                                  |                              |                            | 75,944.                                                              |
| 24 Total operating and administrative expenses.<br>Add lines 13 through 23            | 357,711.                                 |                              |                            | 116,290.                                                             |
| 25 Contributions, gifts, grants paid                                                  | 1,495,000.                               |                              |                            | 1,345,000.                                                           |
| 26 Total expenses and disbursements Add lines 24 and 25                               | 1,852,711.                               | 0                            | 0                          | 1,461,290.                                                           |
| 27 Subtract line 26 from line 12                                                      |                                          |                              |                            |                                                                      |
| a Excess of revenue over expenses and disbursements                                   | 2,147,289.                               |                              |                            |                                                                      |
| b Net investment income (if negative, enter -0-)                                      |                                          | 0                            |                            |                                                                      |
| c Adjusted net income (if negative, enter -0-)                                        |                                          |                              |                            |                                                                      |



| Part II Balance Sheets                                                                                    |                                                                                                                                          | Beginning of year |                | End of year           |  |
|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------|-----------------------|--|
|                                                                                                           |                                                                                                                                          | (a) Book Value    | (b) Book Value | (c) Fair Market Value |  |
| Assets                                                                                                    | 1 Cash - non-interest-bearing . . . . .                                                                                                  | 535,128.          | 1,855,321.     | 1,855,321.            |  |
|                                                                                                           | 2 Savings and temporary cash investments . . . . .                                                                                       |                   |                |                       |  |
|                                                                                                           | 3 Accounts receivable ▶                                                                                                                  |                   |                |                       |  |
|                                                                                                           | Less: allowance for doubtful accounts ▶                                                                                                  |                   |                |                       |  |
|                                                                                                           | 4 Pledges receivable ▶                                                                                                                   |                   |                |                       |  |
|                                                                                                           | Less: allowance for doubtful accounts ▶                                                                                                  |                   |                |                       |  |
|                                                                                                           | 5 Grants receivable . . . . .                                                                                                            |                   |                |                       |  |
|                                                                                                           | 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . .        |                   |                |                       |  |
|                                                                                                           | 7 Other notes and loans receivable (attach schedule) ▶                                                                                   |                   |                |                       |  |
|                                                                                                           | Less: allowance for doubtful accounts ▶                                                                                                  |                   |                |                       |  |
|                                                                                                           | 8 Inventories for sale or use . . . . .                                                                                                  |                   |                |                       |  |
|                                                                                                           | 9 Prepaid expenses and deferred charges . . . . .                                                                                        |                   |                |                       |  |
|                                                                                                           | 10 a Investments - U S and state government obligations (attach schedule) . .                                                            |                   |                |                       |  |
|                                                                                                           | b Investments - corporate stock (attach schedule) . . . . .                                                                              |                   |                |                       |  |
|                                                                                                           | c Investments - corporate bonds (attach schedule) . . . . .                                                                              |                   |                |                       |  |
|                                                                                                           | 11 Investments - land, buildings, and equipment basis ▶                                                                                  |                   |                |                       |  |
| Less: accumulated depreciation (attach schedule) ▶                                                        |                                                                                                                                          |                   |                |                       |  |
| 12 Investments - mortgage loans . . . . .                                                                 |                                                                                                                                          |                   |                |                       |  |
| 13 Investments - other (attach schedule) . . . . . ATCH 4                                                 | 1,000,000.                                                                                                                               | 1,000,000.        | 1,910,637.     |                       |  |
| 14 Land, buildings, and equipment basis ▶                                                                 | 14,759,668.                                                                                                                              |                   | ATCH 5         |                       |  |
| Less: accumulated depreciation (attach schedule) ▶                                                        | 662,295.                                                                                                                                 |                   |                |                       |  |
| 15 Other assets (describe ▶ ATCH 6)                                                                       | 79,542.                                                                                                                                  | 1,359,756.        | 1,359,756.     |                       |  |
| 16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item I) . . . . . | 15,990,724.                                                                                                                              | 18,312,450.       | 19,885,382.    |                       |  |
| Liabilities                                                                                               | 17 Accounts payable and accrued expenses . . . . .                                                                                       | 37,260.           | 211,697.       |                       |  |
|                                                                                                           | 18 Grants payable . . . . .                                                                                                              |                   |                |                       |  |
|                                                                                                           | 19 Deferred revenue . . . . .                                                                                                            |                   |                |                       |  |
|                                                                                                           | 20 Loans from officers, directors, trustees, and other disqualified persons . .                                                          |                   |                |                       |  |
|                                                                                                           | 21 Mortgages and other notes payable (attach schedule) . . . . .                                                                         |                   |                |                       |  |
|                                                                                                           | 22 Other liabilities (describe ▶ ATCH 7)                                                                                                 | 15,000,000.       | 15,000,000.    |                       |  |
| 23 Total liabilities (add lines 17 through 22) . . . . .                                                  | 15,037,260.                                                                                                                              | 15,211,697.       |                |                       |  |
| Net Assets or Fund Balances                                                                               | Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> X and complete lines 24 through 26 and lines 30 and 31. |                   |                |                       |  |
|                                                                                                           | 24 Unrestricted . . . . .                                                                                                                | 953,464.          | 3,100,753.     |                       |  |
|                                                                                                           | 25 Temporarily restricted . . . . .                                                                                                      |                   |                |                       |  |
|                                                                                                           | 26 Permanently restricted . . . . .                                                                                                      |                   |                |                       |  |
|                                                                                                           | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>                           |                   |                |                       |  |
|                                                                                                           | 27 Capital stock, trust principal, or current funds . . . . .                                                                            |                   |                |                       |  |
|                                                                                                           | 28 Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .                                                               |                   |                |                       |  |
|                                                                                                           | 29 Retained earnings, accumulated income, endowment, or other funds . .                                                                  |                   |                |                       |  |
|                                                                                                           | 30 Total net assets or fund balances (see instructions) . . . . .                                                                        | 953,464.          | 3,100,753.     |                       |  |
|                                                                                                           | 31 Total liabilities and net assets/fund balances (see instructions) . . . . .                                                           | 15,990,724.       | 18,312,450.    |                       |  |

## Part III Analysis of Changes in Net Assets or Fund Balances

|                                                                                                                                                                        |   |            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|------------|
| 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 | 953,464.   |
| 2 Enter amount from Part I, line 27a . . . . .                                                                                                                         | 2 | 2,147,289. |
| 3 Other increases not included in line 2 (itemize) ▶                                                                                                                   | 3 |            |
| 4 Add lines 1, 2, and 3 . . . . .                                                                                                                                      | 4 | 3,100,753. |
| 5 Decreases not included in line 2 (itemize) ▶                                                                                                                         | 5 |            |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . . . .                                                      | 6 | 3,100,753. |

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**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) |  |  | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|-----------------------------------------------------------------------------------------------------------------------------------|--|--|--------------------------------------------------|--------------------------------------|----------------------------------|
| 1a                                                                                                                                |  |  |                                                  |                                      |                                  |
| b                                                                                                                                 |  |  |                                                  |                                      |                                  |
| c                                                                                                                                 |  |  |                                                  |                                      |                                  |
| d                                                                                                                                 |  |  |                                                  |                                      |                                  |
| e                                                                                                                                 |  |  |                                                  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| a                     |                                            |                                                 |                                              |
| b                     |                                            |                                                 |                                              |
| c                     |                                            |                                                 |                                              |
| d                     |                                            |                                                 |                                              |
| e                     |                                            |                                                 |                                              |

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                   |                                              | (i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) |
|---------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------|-------------------------------------------------------------------------------------------|
| (i) FMV as of 12/31/69                                                                      | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any |                                                                                           |
| a                                                                                           |                                   |                                              |                                                                                           |
| b                                                                                           |                                   |                                              |                                                                                           |
| c                                                                                           |                                   |                                              |                                                                                           |
| d                                                                                           |                                   |                                              |                                                                                           |
| e                                                                                           |                                   |                                              |                                                                                           |

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7 } 2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) { If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 } 3

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see the instructions before making any entries

| (a)<br>Base period years<br>Calendar year (or tax year beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|----------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-------------------------------------------------------------|
| 2011                                                                 | 4,977,511.                               | 1,013,395.                                   | 4.911719                                                    |
| 2010                                                                 | 431,402.                                 | 279,862.                                     | 1.541481                                                    |
| 2009                                                                 | 9,626,439.                               | 360,321.                                     | 26.716286                                                   |
| 2008                                                                 |                                          |                                              |                                                             |
| 2007                                                                 |                                          |                                              |                                                             |

|                                                                                                                                                                                |   |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-------------|
| 2 Total of line 1, column (d)                                                                                                                                                  | 2 | 33.169486   |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | 3 | 11.056495   |
| 4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5                                                                                                 | 4 | 3,642,735.  |
| 5 Multiply line 4 by line 3                                                                                                                                                    | 5 | 40,275,881. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b)                                                                                                                   | 6 |             |
| 7 Add lines 5 and 6                                                                                                                                                            | 7 | 40,275,881. |
| 8 Enter qualifying distributions from Part XII, line 4                                                                                                                         | 8 | 2,519,807.  |

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

|     |                                                                                                                                                                                                                                     |    |   |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---|
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1<br>Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions) | 1  | 0 |
| b   | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> 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-)                                                                                                                           | 2  |   |
| 3   | Add lines 1 and 2                                                                                                                                                                                                                   | 3  | 0 |
| 4   | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                         | 4  | 0 |
| 5   | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-                                                                                                                                             | 5  | 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                                                                                                                                                                                 | 7  | 0 |
| 8   | Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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  | 0 |
| 10  | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                                           | 10 |   |
| 11  | Enter the amount of line 10 to be Credited to 2013 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>                                                                                                         | 11 |   |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                     | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                            |     | X  |
| 1 b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?                                                                                                                                                                                      |     | X  |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities                                                                                                                                        |     |    |
| 1 c Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                            |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year<br>(1) On the foundation \$ (2) On foundation managers \$                                                                                                                                                                       |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$                                                                                                                                                                                           |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities                                                                                                                                                                      |     | X  |
| 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                                                                                                        |     | X  |
| 4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                     |     | X  |
| b If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                  | N/A |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T                                                                                                                                                                |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either<br>• By language in the governing instrument, or<br>• 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? | X   |    |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV                                                                                                                                                                                                  | X   |    |
| 8 a Enter the states to which the foundation reports or with which it is registered (see instructions)<br>DE, NY,                                                                                                                                                                                                                   |     |    |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation                                                                                                                       | X   |    |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV                                                                              | X   |    |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses<br>ATCH 8                                                                                                                                                                                     | X   |    |

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**Part VII-A Statements Regarding Activities (continued)**

|                                              |                                                                                                                                                                                                                                                                                                                                                                |    |     |    |
|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 11                                           | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) . . . . .                                                                                                                                                              | 11 | X   |    |
| 12                                           | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .                                                                                                                                                             | 12 |     | X  |
| 13                                           | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? . . . . .                                                                                                                                                                                                                                  | 13 | X   |    |
| Website address <input type="checkbox"/> N/A |                                                                                                                                                                                                                                                                                                                                                                |    |     |    |
| 14                                           | The books are in care of <input type="checkbox"/> FRANK S. BONANNO Telephone no <input type="checkbox"/> 212-652-7528                                                                                                                                                                                                                                          |    |     |    |
|                                              | Located at <input type="checkbox"/> ATTACHMENT 11 ZIP+4 <input type="checkbox"/> 10022                                                                                                                                                                                                                                                                         |    |     |    |
| 15                                           | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . . . . . and enter the amount of tax-exempt interest received or accrued during the year . . . . .                                                                                                                                                        | 15 |     |    |
| 16                                           | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country <input type="checkbox"/> | 16 | Yes | No |
|                                              |                                                                                                                                                                                                                                                                                                                                                                |    |     | X  |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Yes | No  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|
| 1a During the year did the foundation (either directly or indirectly)                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |     |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                       |     |     |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                               |     |     |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                   |     |     |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                         |     |     |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                |     |     |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                               |     |     |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . <input type="checkbox"/>                                                                                                                                                                                                                                                  | 1b  | X   |
| Organizations relying on a current notice regarding disaster assistance check here . . . . . <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                      |     |     |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? . . . . .                                                                                                                                                                                                                                                                                                        | 1c  | X   |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))                                                                                                                                                                                                                                                                                                                            |     |     |
| a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                          |     |     |
| If "Yes," list the years <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                          |     |     |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) . . . . .                                                                                                                                                                                       | 2b  | N/A |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                 |     |     |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                |     |     |
| b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012) . . . . . | 3b  | N/A |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .                                                                                                                                                                                                                                                                                                                                                                               | 4a  | X   |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012? . . . . .                                                                                                                                                                                                                                                              | 4b  | X   |

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)****5a** During the year did the foundation pay or incur any amount to

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b N/A

Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

6b X

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

7b N/A

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (if not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| ATCH 12              |                                                           | 0                                         | 0                                                                     | 0                                     |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |

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

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| NONE                                                          |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |

**Total number of other employees paid over \$50,000** ☐ 0

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)****3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

| (a) Name and address of each person paid more than \$50,000                        | (b) Type of service | (c) Compensation |
|------------------------------------------------------------------------------------|---------------------|------------------|
| ATCH 13                                                                            |                     | 919,217.         |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
| Total number of others receiving over \$50,000 for professional services . . . . . |                     | 0                |

**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 THE PURCHASE OF REAL PROPERTY FOR THE DESIGN AND ERECTION OF BUILDINGS FOR LEASING TO SEPHARDIC JEWISH COMMUNITY CENTERS AND/OR SYNAGOGUES. | 1,174,807. |
| 2                                                                                                                                             |            |
| 3                                                                                                                                             |            |
| 4                                                                                                                                             |            |

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

|                                                        |  |
|--------------------------------------------------------|--|
| 1 NONE                                                 |  |
| 2                                                      |  |
| All other program-related investments See instructions |  |
| 3 NONE                                                 |  |
| Total. Add lines 1 through 3 . . . . .                 |  |

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|   |                                                                                                             |    |            |
|---|-------------------------------------------------------------------------------------------------------------|----|------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes. |    |            |
| a | Average monthly fair market value of securities                                                             | 1a |            |
| b | Average of monthly cash balances                                                                            | 1b | 2,014,053. |
| c | Fair market value of all other assets (see instructions)                                                    | 1c | 1,684,155. |
| d | Total (add lines 1a, b, and c)                                                                              | 1d | 3,698,208. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | 1e |            |
| 2 | Acquisition indebtedness applicable to line 1 assets                                                        | 2  |            |
| 3 | Subtract line 2 from line 1d                                                                                | 3  | 3,698,208. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).  | 4  | 55,473.    |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4        | 5  | 3,642,735. |
| 6 | Minimum investment return. Enter 5% of line 5                                                               | 6  | 182,137.   |

**Part XI 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.)

|    |                                                                                                    |    |  |
|----|----------------------------------------------------------------------------------------------------|----|--|
| 1  | Minimum investment return from Part X, line 6                                                      | 1  |  |
| 2a | Tax on investment income for 2012 from Part VI, line 5                                             | 2a |  |
| b  | Income tax for 2012 (This does not include the tax from Part VI)                                   | 2b |  |
| c  | Add lines 2a and 2b                                                                                | 2c |  |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                              | 3  |  |
| 4  | Recoveries of amounts treated as qualifying distributions                                          | 4  |  |
| 5  | Add lines 3 and 4                                                                                  | 5  |  |
| 6  | Deduction from distributable amount (see instructions)                                             | 6  |  |
| 7  | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7  |  |

**Part XII Qualifying Distributions** (see instructions)

|   |                                                                                                                                                       |    |            |
|---|-------------------------------------------------------------------------------------------------------------------------------------------------------|----|------------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                                            |    |            |
| a | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26                                                                         | 1a | 1,461,290. |
| b | Program-related investments - total from Part IX-B                                                                                                    | 1b |            |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes                                             | 2  | 1,058,517. |
| 3 | Amounts set aside for specific charitable projects that satisfy the:                                                                                  |    |            |
| a | Suitability test (prior IRS approval required)                                                                                                        | 3a |            |
| b | Cash distribution test (attach the required schedule)                                                                                                 | 3b |            |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                            | 4  | 2,519,807. |
| 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 (see instructions). | 5  | 0          |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4                                                                                        | 6  | 2,519,807. |

**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 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income (see instructions)**

|                                                                                                                                                                                             | (a)<br>Corpus | (b)<br>Years prior to 2011 | (c)<br>2011 | (d)<br>2012 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2012 from Part XI, line 7 . . . . .                                                                                                                       |               |                            |             |             |
| <b>2</b> Undistributed income, if any, as of the end of 2012                                                                                                                                |               |                            |             |             |
| <b>a</b> Enter amount for 2011 only . . . . .                                                                                                                                               |               |                            |             |             |
| <b>b</b> Total for prior years 20 <u>10</u> , 20 <u>09</u> , 20 <u>08</u> . . . . .                                                                                                         |               |                            |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2012                                                                                                                                    |               |                            |             |             |
| <b>a</b> From 2007 . . . . .                                                                                                                                                                |               |                            |             |             |
| <b>b</b> From 2008 . . . . .                                                                                                                                                                |               |                            |             |             |
| <b>c</b> From 2009 . . . . . 9,626,439.                                                                                                                                                     |               |                            |             |             |
| <b>d</b> From 2010 . . . . . 431,402.                                                                                                                                                       |               |                            |             |             |
| <b>e</b> From 2011 . . . . . 4,977,511.                                                                                                                                                     |               |                            |             |             |
| <b>f</b> Total of lines 3a through e . . . . .                                                                                                                                              | 15,035,352.   |                            |             |             |
| <b>4</b> Qualifying distributions for 2012 from Part XII, line 4. ► \$ <u>2,519,807.</u>                                                                                                    |               |                            |             |             |
| <b>a</b> Applied to 2011, but not more than line 2a . . . . .                                                                                                                               |               |                            |             |             |
| <b>b</b> Applied to undistributed income of prior years (Election required - see instructions). . . . .                                                                                     |               |                            |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .                                                                                            |               |                            |             |             |
| <b>d</b> Applied to 2012 distributable amount . . . . .                                                                                                                                     |               |                            |             |             |
| <b>e</b> Remaining amount distributed out of corpus . . . . .                                                                                                                               | 2,519,807.    |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2012. (If an amount appears in column (d), the same amount must be shown in column (a).)                                                 |               |                            |             |             |
| <b>6</b> Enter the net total of each column as indicated below:                                                                                                                             |               |                            |             |             |
| <b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5 . . . . .                                                                                                                          | 17,555,159.   |                            |             |             |
| <b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .                                                                                                          |               |                            |             |             |
| <b>c</b> 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 . . . . . |               |                            |             |             |
| <b>d</b> Subtract line 6c from line 6b Taxable amount - see instructions . . . . .                                                                                                          |               |                            |             |             |
| <b>e</b> Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instructions . . . . .                                                                            |               |                            |             |             |
| <b>f</b> Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013 . . . . .                                                                |               |                            |             |             |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . . . .                                  |               |                            |             |             |
| <b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) . . . . .                                                                              |               |                            |             |             |
| <b>9</b> Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a . . . . .                                                                                              | 17,555,159.   |                            |             |             |
| <b>10</b> Analysis of line 9                                                                                                                                                                |               |                            |             |             |
| <b>a</b> Excess from 2008 . . . . .                                                                                                                                                         |               |                            |             |             |
| <b>b</b> Excess from 2009 . . . . . 9,626,439.                                                                                                                                              |               |                            |             |             |
| <b>c</b> Excess from 2010 . . . . . 431,402.                                                                                                                                                |               |                            |             |             |
| <b>d</b> Excess from 2011 . . . . . 4,977,511.                                                                                                                                              |               |                            |             |             |
| <b>e</b> Excess from 2012 . . . . . 2,519,807.                                                                                                                                              |               |                            |             |             |

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

1a 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 the ruling . . . . .

05/23/2011

b Check box to indicate whether the foundation is a private operating foundation described in section

☒ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

| Tax year                                                                                                                                                    | Prior 3 years |             |             |            | (e) Total   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------|-------------|------------|-------------|
| (a) 2012                                                                                                                                                    | (b) 2011      | (c) 2010    | (d) 2009    |            |             |
|                                                                                                                                                             |               |             | 22.         |            | 22.         |
|                                                                                                                                                             |               |             | 19.         |            | 19.         |
| c Qualifying distributions from Part XII, line 4 for each year listed . . . . .                                                                             | 2,519,807.    | 4,977,511.  | 431,402.    | 9,626,439. | 17,555,159. |
| d Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .                                                           | 1,345,000.    |             |             |            | 1,345,000.  |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .                                   | 1,174,807.    | 4,977,511.  | 431,402.    | 9,626,439. | 16,210,159. |
| 3 Complete 3a, b, or c for the alternative test relied upon                                                                                                 |               |             |             |            |             |
| a "Assets" alternative test - enter                                                                                                                         |               |             |             |            |             |
| (1) Value of all assets . . . . .                                                                                                                           | 19,885,382.   | 16,832,011. | 10,811,624. | 9,813,727. | 57,342,744. |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .                                                                                     | 16,029,882.   | 14,759,668. | 9,869,443.  | 9,518,880. | 50,177,873. |
| b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .                              | 121,425.      | 33,780.     | 9,329.      | 11,813.    | 176,347.    |
| c "Support" alternative test - enter                                                                                                                        |               |             |             |            |             |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . . |               |             |             |            |             |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .                                      |               |             |             |            |             |
| (3) Largest amount of support from an exempt organization . . . . .                                                                                         |               |             |             |            |             |
| (4) Gross investment income . . . . .                                                                                                                       |               |             |             |            |             |

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

ATTACHMENT 14

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. 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

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

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient                                   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount     |
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|------------|
| Name and address (home or business)         |                                                                                                           |                                |                                  |            |
| <b>a</b> <i>Paid during the year</i>        |                                                                                                           |                                |                                  |            |
| ATCH 15                                     |                                                                                                           |                                |                                  |            |
| <b>Total</b> . . . . .                      |                                                                                                           |                                | ▶ <b>3a</b>                      | 1,495,000. |
| <b>b</b> <i>Approved for future payment</i> |                                                                                                           |                                |                                  |            |
| <b>Total</b> . . . . .                      |                                                                                                           |                                | ▶ <b>3b</b>                      |            |

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

Enter gross amounts unless otherwise indicated

| Enter gross amounts unless otherwise indicated |                                                          | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (e)<br>Related or exempt<br>function income<br>(See instructions) |
|------------------------------------------------|----------------------------------------------------------|---------------------------|---------------|--------------------------------------|---------------|-------------------------------------------------------------------|
|                                                |                                                          | (a)<br>Business code      | (b)<br>Amount | (c)<br>Exclusion code                | (d)<br>Amount |                                                                   |
| <b>1</b>                                       | Program service revenue                                  |                           |               |                                      |               |                                                                   |
| a                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| b                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| c                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| d                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| e                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| f                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| g                                              | Fees and contracts from government agencies              |                           |               |                                      |               |                                                                   |
| <b>2</b>                                       | Membership dues and assessments . . . . .                |                           |               |                                      |               |                                                                   |
| <b>3</b>                                       | Interest on savings and temporary cash investments       |                           |               |                                      |               |                                                                   |
| <b>4</b>                                       | Dividends and interest from securities . . . . .         |                           |               |                                      |               |                                                                   |
| <b>5</b>                                       | Net rental income or (loss) from real estate             |                           |               |                                      |               |                                                                   |
| a                                              | Debt-financed property . . . . .                         |                           |               |                                      |               |                                                                   |
| b                                              | Not debt-financed property . . . . .                     |                           |               |                                      |               |                                                                   |
| <b>6</b>                                       | Net rental income or (loss) from personal property .     |                           |               |                                      |               |                                                                   |
| <b>7</b>                                       | Other investment income . . . . .                        |                           |               |                                      |               |                                                                   |
| <b>8</b>                                       | Gain or (loss) from sales of assets other than inventory |                           |               |                                      |               |                                                                   |
| <b>9</b>                                       | Net income or (loss) from special events . . .           |                           |               |                                      |               |                                                                   |
| <b>10</b>                                      | Gross profit or (loss) from sales of inventory . .       |                           |               |                                      |               |                                                                   |
| <b>11</b>                                      | Other revenue a _____                                    |                           |               |                                      |               |                                                                   |
| b                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| c                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| d                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| e                                              | _____                                                    |                           |               |                                      |               |                                                                   |
| <b>12</b>                                      | Subtotal. Add columns (b), (d), and (e) . . . . .        |                           |               |                                      |               |                                                                   |
| <b>13</b>                                      | Total. Add line 12, columns (b), (d), and (e) . . . . .  |                           |               |                                      |               |                                                                   |

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

[illegible]



**Schedule of Contributors**

OMB No 1545-0047

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

**2012**

Name of the organization

MYS FAMILY U.S. CHARITABLE  
FOUNDATION, INC.

Employer identification number

27-0521354

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

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

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**

- ☒ 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. . . . . ▶ \$ \_\_\_\_\_

**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 **MYS FAMILY U.S. CHARITABLE  
FOUNDATION, INC.**

Employer identification number  
27-0521354

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                         | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                            |
|------------|-------------------------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | SPIN-AMARALIS HOLDING S.A.<br>C/O M. SAFRA & CO., INC. 499 PARK AVE<br>NEW YORK, NY 10022 | \$ 4,000,000.              | Person <input checked="checked" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is<br>a noncash contribution ) |
|            |                                                                                           |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is<br>a noncash contribution )                   |
|            |                                                                                           |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is<br>a noncash contribution )                   |
|            |                                                                                           |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is<br>a noncash contribution )                   |
|            |                                                                                           |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is<br>a noncash contribution )                   |
|            |                                                                                           |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is<br>a noncash contribution )                   |
|            |                                                                                           |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is<br>a noncash contribution )                   |
|            |                                                                                           |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is<br>a noncash contribution )                   |

Name of organization MYS FAMILY U.S. CHARITABLE  
FOUNDATION, INC.

Employer identification number  
27-0521354

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

| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|---------------------------|----------------------------------------------|------------------------------------------------|----------------------|
| ---                       | -----<br>-----<br>-----<br>-----             | \$-----                                        | -----                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| ---                       | -----<br>-----<br>-----<br>-----             | \$-----                                        | -----                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| ---                       | -----<br>-----<br>-----<br>-----             | \$-----                                        | -----                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| ---                       | -----<br>-----<br>-----<br>-----             | \$-----                                        | -----                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| ---                       | -----<br>-----<br>-----<br>-----             | \$-----                                        | -----                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| ---                       | -----<br>-----<br>-----<br>-----             | \$-----                                        | -----                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| ---                       | -----<br>-----<br>-----<br>-----             | \$-----                                        | -----                |

Name of organization MYS FAMILY U.S. CHARITABLE  
FOUNDATION, INC.

Employer identification number  
27-0521354

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry for organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

| (a) No.<br>from<br>Part I | (b) Purpose of gift                     | (c) Use of gift         | (d) Description of how gift is held      |
|---------------------------|-----------------------------------------|-------------------------|------------------------------------------|
| -----                     | -----<br>-----<br>-----                 | -----<br>-----<br>----- | -----<br>-----<br>-----                  |
|                           | (e) Transfer of gift                    |                         |                                          |
|                           | Transferee's name, address, and ZIP + 4 |                         | Relationship of transferor to transferee |
|                           | -----<br>-----<br>-----                 | -----<br>-----<br>----- |                                          |
| -----                     | -----<br>-----<br>-----                 | -----<br>-----<br>----- | -----<br>-----<br>-----                  |
|                           | (e) Transfer of gift                    |                         |                                          |
|                           | Transferee's name, address, and ZIP + 4 |                         | Relationship of transferor to transferee |
|                           | -----<br>-----<br>-----                 | -----<br>-----<br>----- |                                          |
| -----                     | -----<br>-----<br>-----                 | -----<br>-----<br>----- | -----<br>-----<br>-----                  |
|                           | (e) Transfer of gift                    |                         |                                          |
|                           | Transferee's name, address, and ZIP + 4 |                         | Relationship of transferor to transferee |
|                           | -----<br>-----<br>-----                 | -----<br>-----<br>----- |                                          |
| -----                     | -----<br>-----<br>-----                 | -----<br>-----<br>----- | -----<br>-----<br>-----                  |
|                           | (e) Transfer of gift                    |                         |                                          |
|                           | Transferee's name, address, and ZIP + 4 |                         | Relationship of transferor to transferee |
|                           | -----<br>-----<br>-----                 | -----<br>-----<br>----- |                                          |

ATTACHMENT 1

FORM 990PF, PART I - LEGAL FEES

| <u>DESCRIPTION</u>                                                      | <u>REVENUE<br/>AND<br/>EXPENSES<br/>PER BOOKS</u> | <u>NET<br/>INVESTMENT<br/>INCOME</u> | <u>ADJUSTED<br/>NET<br/>INCOME</u> | <u>CHARITABLE<br/>PURPOSES</u> |
|-------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------|------------------------------------|--------------------------------|
| LEGAL FEES INCURRED IN<br>CONNECTION WITH VARIOUS<br>FOUNDATION MATTERS | 3,086.                                            |                                      |                                    | 3,086.                         |
| ADD: PRIOR YEAR ACCRUED LEGAL<br>FEES PAID IN CURRENT YEAR              |                                                   |                                      |                                    | 14,310.                        |
| TOTALS                                                                  | <u>3,086.</u>                                     |                                      |                                    | <u>17,396.</u>                 |

ATTACHMENT 2

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

| <u>DESCRIPTION</u> | <u>REVENUE<br/>AND<br/>EXPENSES<br/>PER BOOKS</u> | <u>CHARITABLE<br/>PURPOSES</u> |
|--------------------|---------------------------------------------------|--------------------------------|
|--------------------|---------------------------------------------------|--------------------------------|

|                                                               |  |         |
|---------------------------------------------------------------|--|---------|
| PRIOR YEAR ACCRUED<br>CONSULTING FEES PAID IN<br>CURRENT YEAR |  | 22,950. |
|---------------------------------------------------------------|--|---------|

TOTALS

|  |                |
|--|----------------|
|  | <u>22,950.</u> |
|--|----------------|

ATTACHMENT 3

FORM 990PF, PART I - OTHER EXPENSES

| DESCRIPTION               | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS |
|---------------------------|-----------------------------------------|
| UTILITIES                 | 5,886.                                  |
| INSURANCE                 | 13,580.                                 |
| MISCELLANEOUS EXPENSES    | 2,001.                                  |
| BANK CHARGES              | 87.                                     |
| REPAIRS & MAINTENANCE     | 52,529.                                 |
| STATE FILING FEES & TAXES | 1,861.                                  |
| TOTALS                    | <u>75,944.</u>                          |

| CHARITABLE<br>PURPOSES |
|------------------------|
| 5,886.                 |
| 13,580.                |
| 2,001.                 |
| 87.                    |
| 52,529.                |
| 1,861.                 |
| <u>75,944.</u>         |

ATTACHMENT 4FORM 990PF, PART II - OTHER INVESTMENTS

| <u>DESCRIPTION</u>        | <u>BEGINNING<br/>BOOK VALUE</u> | <u>ENDING<br/>BOOK VALUE</u> | <u>ENDING<br/>FMV</u> |
|---------------------------|---------------------------------|------------------------------|-----------------------|
| 1000 SHS EMS OVERSEAS LTD | 1,000,000.                      | 1,000,000.                   | 1,910,637.            |
| TOTALS                    | <u>1,000,000.</u>               | <u>1,000,000.</u>            | <u>1,910,637.</u>     |

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENTATTACHMENT 5FIXED ASSET DETAILACCUMULATED DEPRECIATION DETAIL

| ASSET DESCRIPTION  | METHOD/<br>CLASS | FIXED ASSET DETAIL   |           |                  | ACCUMULATED DEPRECIATION DETAIL |           |                   |
|--------------------|------------------|----------------------|-----------|------------------|---------------------------------|-----------|-------------------|
|                    |                  | BEGINNING<br>BALANCE | ADDITIONS | DISPOSALS        | BEGINNING<br>BALANCE            | ADDITIONS | ENDING<br>BALANCE |
| 130E 82ND BUILDING | M39              | 4,578,883            |           |                  | 234,806.                        | 117,402.  | 352,208.          |
| 130E 82ND LAND     | L                | 1,529,088            |           |                  |                                 |           |                   |
|                    |                  |                      |           | 1,529,088.       |                                 |           |                   |
| 132E 82ND BUILDING | M39              | 2,686,819            |           |                  | 83,264                          | 68,890    | 152,154.          |
| 132E 82ND LAND     | L                | 1,074,653            |           |                  |                                 |           |                   |
|                    |                  |                      |           | 1,074,653        |                                 |           |                   |
| 134E 82ND BUILDING | M39              | 3,603,324            |           |                  | 65,544                          | 92,389    | 157,933.          |
| 134E 82ND LAND     | L                | 1,286,901.           |           |                  |                                 |           |                   |
|                    |                  |                      |           | 1,286,901        |                                 |           |                   |
| TOTALS             |                  | <u>14,759,668</u>    |           | <u>1,475,968</u> | <u>383,614</u>                  |           | <u>662,295</u>    |

ATTACHMENT 6FORM 990PF, PART II - OTHER ASSETS

| <u>DESCRIPTION</u>       | <u>BEGINNING<br/>BOOK VALUE</u> | <u>ENDING<br/>BOOK VALUE</u> | <u>ENDING<br/>FMV</u> |
|--------------------------|---------------------------------|------------------------------|-----------------------|
| TRANSFER TAX RECEIVABLE  | 79,542.                         | 79,542.                      | 79,542.               |
| OTHER RECEIVABLE         |                                 | 10,000.                      | 10,000.               |
| CONSTRUCTION IN PROGRESS |                                 | 1,270,214.                   | 1,270,214.            |
| TOTALS                   | <u>79,542.</u>                  | <u>1,359,756.</u>            | <u>1,359,756.</u>     |

ATTACHMENT 7FORM 990PF, PART II - OTHER LIABILITIES

| <u>DESCRIPTION</u>                        | <u>BEGINNING<br/>BOOK VALUE</u> | <u>ENDING<br/>BOOK VALUE</u> |
|-------------------------------------------|---------------------------------|------------------------------|
| NO INTEREST LOAN PAYABLE TO RELATED PARTY | 15,000,000.                     | 15,000,000.                  |
| TOTALS                                    | <u>15,000,000.</u>              | <u>15,000,000.</u>           |

MYS FAMILY U.S. CHARITABLE

27-0521354

FORM 990PF, PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 8

| <u>NAME AND ADDRESS</u>                                                                   | <u>DATE</u> | <u>DIRECT<br/>PUBLIC<br/>SUPPORT</u> |
|-------------------------------------------------------------------------------------------|-------------|--------------------------------------|
| SPIN-AMARALIS HOLDING S.A.<br>C/O M. SAFRA & CO., INC. 499 PARK AVE<br>NEW YORK, NY 10022 | 12/19/2012  | 4,000,000.                           |
| TOTAL CONTRIBUTION AMOUNTS                                                                |             | <u>4,000,000.</u>                    |

ATTACHMENT 9FORM 990PF, PART VII-A, LINE 11A-TRANSFERS FROM CONT. ENT. STATEMENT

CONTROLLED ENTITY'S NAME: 130 EAST 82ND LLC  
CONTROLLED ENTITY'S ADDRESS: C/O M. SAFRA & CO., INC., 499 PARK AVE.  
CITY, STATE & ZIP: NEW YORK, NY 10022  
EIN: 27-0548253  
TRANSFER AMOUNT: 100,000.  
EXPLANATION OF TRANSFER FROM CONTROLLED ENTITY:  
CASH FOR THE CONSTRUCTION OF THE SEPHARDIC CENTER

CONTROLLED ENTITY'S NAME: 132 EAST 82ND LLC  
CONTROLLED ENTITY'S ADDRESS: C/O M. SAFRA & CO., INC., 499 PARK AVE.  
CITY, STATE & ZIP: NEW YORK, NY 10022  
EIN: 27-0548399  
TRANSFER AMOUNT: 75,000.  
EXPLANATION OF TRANSFER FROM CONTROLLED ENTITY:  
CASH FOR THE CONSTRUCTION OF THE SEPHARDIC CENTER

CONTROLLED ENTITY'S NAME: 134 EAST 82ND LLC  
CONTROLLED ENTITY'S ADDRESS: C/O M. SAFRA & CO., INC., 499 PARK AVE.  
CITY, STATE & ZIP: NEW YORK, NY 10022  
EIN: 45-2683098  
TRANSFER AMOUNT: 115,000.  
EXPLANATION OF TRANSFER FROM CONTROLLED ENTITY:  
CASH FOR THE CONSTRUCTION OF THE SEPHARDIC CENTER

ATTACHMENT 10FORM 990PF, PART VII-A, LINE 11A-TRANSFERS TO CONT. ENT. STATEMENT

CONTROLLED ENTITY'S NAME: MOISE SAFRA COMMUNITY CENTER, INC.

CONTROLLED ENTITY'S ADDRESS: 499 PARK AVENUE

CITY, STATE &amp; ZIP: NEW YORK, NY 10022

EIN: 45-4001460

TRANSFER AMOUNT: 150,000.

EXPLANATION OF TRANSFER TO CONTROLLED ENTITY:

FUNDING TO MEET THE EXPENDITURE REQUIREMENTS OF THE CENTER.

ATTACHMENT 11

FORM 990PF, PART VII-A, LINE 14 - LOCATION OF BOOKS

C/O M.SAFRA & CO., 499 PARK AVE., 11TH FL. NEW YORK, NY

MYS FAMILY U.S. CHARITABLE

27-0521354

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 12

| NAME AND ADDRESS | TITLE AND AVERAGE HOURS PER<br>WEEK DEVOTED TO POSITION | COMPENSATION | CONTRIBUTIONS |            | EXPENSE ACCT |  |
|------------------|---------------------------------------------------------|--------------|---------------|------------|--------------|--|
|                  |                                                         |              | TO EMPLOYEE   |            | AND OTHER    |  |
|                  |                                                         |              | BENEFIT PLANS | ALLOWANCES |              |  |

JACOB M SAFRA  
C/O M SAFRA & CO., INC.  
499 PARK AVENUE, 11TH FL.  
NEW YORK, NY 10022

PRESIDENT  
3.00

0 0 0 0

EDMOND M SAFRA  
C/O M SAFRA & CO., INC.  
499 PARK AVENUE, 11TH FL.  
NEW YORK, NY 10022

V.P., SECRETARY & TREASURER  
3.00

0 0 0 0

GRAND TOTALS

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALSATTACHMENT 13

| <u>NAME AND ADDRESS</u>                                                              | <u>TYPE OF SERVICE</u> | <u>COMPENSATION</u> |
|--------------------------------------------------------------------------------------|------------------------|---------------------|
| PLATT BYARD DOVELL WHITE ARCHITECTS LLP<br>20 WEST 22ND STREET<br>NEW YORK, NY 10010 | ARCHITECTURAL SVCS     | 919,217.            |
| TOTAL COMPENSATION                                                                   |                        | <u>919,217.</u>     |

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

JACOB M. SAFRA  
EDMOND M. SAFRA

MYS FAMILY U S CHARITABLE

27-0521354

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

ATTACHMENT 15

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

MOISE SAFRA COMMUNITY CENTER INC

499 PARK AVENUE, FL 11

NEW YORK, NY 10022

RELATED ENTITY

PUBLIC CHARITY

CHARITABLE

150,000

MEMORIAL SLOAN-KETTERING CANCER CENTER

1275 YORK AVENUE

NEW YORK, NY 10065-6007

NONE

PUBLIC CHARITY

CHARITABLE

100,000.

NY WEILL CORNELL MEDICAL CENTER FUND, INC

575 LEXINGTON AVENUE, 9TH FL

NEW YORK, NY 10022

NONE

PUBLIC CHARITY

CHARITABLE

100,000

JOHN HOPKINS UNIVERSITY

3910 KESWICK ROAD NO N4327B

BALTIMORE, MD 21211

NONE

PUBLIC CHARITY

CHARITABLE

100,000.

AMERICAN FRIENDS OF SHEBA MEDICAL CENTER

250 WEST 57TH STREET

NEW YORK, NY 10107

NONE

PUBLIC CHARITY

CHARITABLE

95,000.

JEWISH NATIONAL FUND, INC

42 EAST 69TH STREET

NEW YORK, NY 10021

NONE

PUBLIC CHARITY

CHARITABLE

100,000

MYS FAMILY U S CHARITABLE

27-0521354

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

ATTACHMENT 15 (CONT'D)

| RECIPIENT NAME AND ADDRESS                                                      | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR<br>AND<br>FOUNDATION STATUS OF RECIPIENT |                | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT           |
|---------------------------------------------------------------------------------|----------------------------------------------------------------------------------|----------------|----------------------------------|------------------|
|                                                                                 |                                                                                  |                |                                  |                  |
| NEW YORK EYE AND EAR INFIRMARY<br>310 EAST 14TH STREET<br>NEW YORK, NY 10003    | NONE                                                                             | PUBLIC CHARITY | CHARITABLE                       | 200,000          |
| SEPHARDIC ACADEMY OF MANHATTAN, INC<br>1274 SECOND AVENUE<br>NEW YORK, NY 10021 | NONE                                                                             | PUBLIC CHARITY | CHARITABLE                       | 150,000          |
| YESHIVA UNIVERSITY<br>500 WEST 185TH STREET<br>NEW YORK, NY 10033               | NONE                                                                             | PUBLIC CHARITY | CHARITABLE                       | 500,000          |
| TOTAL CONTRIBUTIONS PAID                                                        |                                                                                  |                |                                  | <u>1,495,000</u> |



**Application for Extension of Time To File an  
Exempt Organization Return**

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
  - 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 corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension 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 Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

**Part I 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.*

Enter filer's identifying number, see instructions

|                                                                                            |                                                                                                                     |                                                           |
|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>Type or print</b><br><br>File by the due date for filing your return. See instructions. | Name of exempt organization or other filer, see instructions<br>MYS FAMILY U.S. CHARITABLE FOUNDATION, INC.         | Employer identification number (EIN) or<br><br>27-0521354 |
|                                                                                            | Number, street, and room or suite no. If a P.O. box, see instructions<br>C/O M SAFRA & CO., 499 PARK AVE., 11TH FL. | Social security number (SSN)                              |
|                                                                                            | City, town or post office, state, and ZIP code. For a foreign address, see instructions<br>NEW YORK, NY 10022       |                                                           |

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ 0 ☐ 4

| Application Is For                       | Return Code | Application Is For       | Return 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                | 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          |

- The books are in the care of ► FRANK S. BONANNO

Telephone No ► 212 652-7528

FAX No ► \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 02/15, 20 14, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ☐ calendar year 20 \_\_\_\_\_ or
- ☒ tax year beginning 07/01, 20 12, and ending 06/30, 20 13

- 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 \$ | 0 |
| 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 <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.      | 3c \$ | 0 |

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

Form **8868** (Rev. 1-2013)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed)

|                                                               |                                                                                         |  |                                                    |  |
|---------------------------------------------------------------|-----------------------------------------------------------------------------------------|--|----------------------------------------------------|--|
| <b>Type or print</b>                                          | Name of exempt organization or other filer, see instructions                            |  | Enter filer's identifying number, see instructions |  |
|                                                               | MYS FAMILY U.S. CHARITABLE FOUNDATION, INC.                                             |  | Employer identification number (EIN) or            |  |
|                                                               |                                                                                         |  | 27-0521354                                         |  |
|                                                               | Number, street, and room or suite no. If a P O box, see instructions                    |  | Social security number (SSN)                       |  |
| File by the due date for filing your return. See instructions | C/O M SAFRA & CO., 499 PARK AVE., 11TH FL.                                              |  |                                                    |  |
|                                                               | City, town or post office, state, and ZIP code. For a foreign address, see instructions |  |                                                    |  |
| NEW YORK, NY 10022                                            |                                                                                         |  |                                                    |  |

Enter the Return code for the return that this application is for (file a separate application for each return) . . . . . 0 4

| Application Is For                      | Return Code | Application Is For | Return 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 an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of ☒ FRANK S. BONANNO  
Telephone No ☒ 212 652-7528 FAX No ☐
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until 05/15, 20 14
- For calendar year , or other tax year beginning 07/01, 20 12, and ending 06/30, 20 13
- If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return  
☐ Change in accounting period
- State in detail why you need the extension ALL OF THE INFORMATION REQUIRED TO FILE A COMPLETE AND ACCURATE RETURN IS NOT YET AVAILABLE.

|                                                                                                                                                                                                                                           |           |    |   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----|---|
| <b>8a</b> 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                                                                                 | <b>8a</b> | \$ | 0 |
| <b>b</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 and any amount paid previously with Form 8868 | <b>8b</b> | \$ | 0 |
| <b>c Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions                                                           | <b>8c</b> | \$ | 0 |

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature Title Date 

Form 8868 (Rev 1-2013)