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# SCANNED AUG 27 2014

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Form 990-PF

Department of the Treasury

Internal Revenue Service

### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

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

OMB No 1545-0052

2012

Open to Public Inspection

Fo	r cal	endar year 2012 or tax year beginning	10/1/2012	, ar	nd ending	9/	30/2013		
Na	me of	foundation				A E	mployer identification nu	ımber	
FΑ	Y EU	GENE F TR U/WILL					04-6091	426	
		and street (or P O box number if mail is not delivered to street	address)		Room/suite	ВТ	elephone number (see inst		
		ellon, NA - PO BOX 185	•				(617) 722-	·	
		wn, state, and ZIP code				~ "	exemption application is pe		
	Isbur		PA		15230-0185	Cir	exemption application is pe	enaing, check here	
							<b>5</b>		
G	CHE		tial return of a fo	imei p	ublic charity	ו טן.	Foreign organizations, che	eck nere	
			nended return			2	Foreign organizations med	-	
			me change				check here and attach cor	nputation	▶□
		ck type of organization <sup>.</sup> Section 501(c)(3 <u>) ex</u>				E If	private foundation status w	as terminated	_
Σا_	Sec	tion 4947(a)(1) nonexempt charitable trust	Other taxable p	rivate f	foundation	ur	nder section 507(b)(1)(A), o	heck here	▶∐
1	Fair	market value of all assets at end J Accounting	method X	Cash	Accrual	F If	the foundation is in a 60-m	onth termination	
		ear (from Part II, col (c),		- 		ur	nder section 507(b)(1)(B), o	heck here	▶□
_		16) ▶ \$ 1,488,356 (Part I, column	(d) must be on ca	sh bası	s)				
Pá	ırt I	Analysis of Revenue and Expenses (The total of	(a) IVEACURE	and	(h) Not investment	ant	(a) Advicted not	(d) Disbursem	
		amounts in columns (b), (c), and (d) may not necessarily equ	- Companies pr	ег	(b) Net investm income	eni	(c) Adjusted net income	for charitabl purposes	е
		the amounts in column (a) (see instructions) )	books					(cash basis oi	nly)
	1	Contributions, gifts, grants, etc., received (attach schedule)							
	2	Check ►X if the foundation is not required to attach Sch.	В .∗		· ·				ı
	3	Interest on savings and temporary cash investments							
	4	Dividends and interest from securities	2	2,596	22	,176			,
	5 a	Gross rents							
ø	t	Net rental income or (loss)				,		·	. 3.
Revenue	6 a	Net gain or (loss) from sale of assets not on line 10	14	1,647			+		
	l t	Gross sales price for all assets on line 6a 682,94	6					• -	,
	7	Capital gain net income (from Part IV, line 2)	*		141	,647	*7		
	8	Net short-term capital gain							
	9	Income modifications				*			27
	10 a	Gross sales less returns and allowances							
		Less Cost of goods sold							
		Gross profit or (loss) (attach schedule)						- 4	
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	16	4,243	163	,823	0		
Ś	13	Compensation of officers, directors, trustees, etc	1	4,643	8	,786			<u>5,857</u>
Š	14	Other employee.salaries and wages.							
ě	15	Pension plans, employee benefits							
Expenses	16 a	Legal fees (attach schedule)		400					400
ive	'	D Accounting fees (attach schedule)							
		Other professional fees (attach schedule)							
tra	17	Interest							
is.	18	Taxes (attach schedule) (see instructions)		1,481		643	4		
Ē	19	Depreciation (attach schedule) and depletion							
þ	20	Occupancy							
Q	21	Travel, conferences, and meetings	1						
ĭ	22	Printing and publications							
0	23	Other expenses (attach schedule)		35					35
Operating and Administra	24	Total operating and administrative expenses.							
ā		Add lines 13 through 23		6,559	9	,429	.0		6,292
e e	25	Contributions, gifts, grants paid	6	2,500				6	2,000
0	26	Total expenses and disbursements. Add lines 24 and 25	7	9,059		,429	0	6	8,292
	27	Subtract line 26 from line 12							
		Excess of revenue over expenses and disbursements	8	5,184					
		Net investment income (if negative, enter -0-)			154	,394			
	(	Adjusted net income (if negative, enter -0-)					0		

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2012)

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

1,355,222

6

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Part IV Capital Gains and	Losses for Tax on Inves	tment Incor	ne			
(a) List and describe the	kınd(s) of property sold (e g , real estat e, or common stock, 200 shs MLC Co	te,	(b) How acquired P—Purchase D—Donation			
1a See Attached Statement			D-Donation		(c) Date acquired (mo, day, yr)  (h) Gain or (loss) (e) plus (f) minus (g)  (l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))  2	
b See Attached Statement			-			
c See Attached Statement						
d See Attached Statement					İ	
e See Attached Statement						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		, ,	
a						0
b						0
С						0
d						0
_e		. ,				0
Complete only for assets show	ng gain in column (h) and owned	by the foundation	on on 12/31/69	(I) Gains	(Col (h) gain minu	ıs
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	ss of col (i) (j), if any			or
a						0
b						0
С		·				0
d						0
e						0
2 Capital gain net income or (i		so enter in Pai inter -0- in Pai		2		141,647
3 Net short-term capital gain of If gain, also enter in Part I, li	or (loss) as defined in sections ne 8, column (c) (see instructi					
ın Part I, line 8				3	_	0
Part V Qualification Und	er Section 4940(e) for Rec	duced Tax o	n Net Investm	ent Income		
If section 4940(d)(2) applies, lea Was the foundation liable for the If "Yes," the foundation does no	e section 4942 tax on the district qualify under section 4940(e	ibutable amou ). Do not comp	nt of any year in plete this part	the base period	17 Yes [	X No
	unt in each column for each ye	ear, see the in	structions before	making any en		
(a)  Base period years  Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	s Net value o	(c) of noncharitable-use a	ssets (col	Distribution ratio	(c))
2011	83,	659	1,466	5,841	(	057033
2010	83,	883	1,568	3,514	(	053479
2009	68,	423	1,462	2,556		046783
2008	70,	082	1,288	3,975	(	054370
2007	103,	698	1,707	7,632		060726
2 Total of line 1, column (d)					_(	272391
3 Average distribution ratio for the number of years the four	the 5-year base period—divided ndation has been in existence				(	054478
4 Enter the net value of nonch	arıtable-use assets for 2012 fı	rom Part X, lın	e5 .	4	1	,487,862
5 Multiply line 4 by line 3 .				5		81,056
6 Enter 1% of net investment	income (1% of Part I, line 27b)	)		6		1,544
<b>7</b> Add lines 5 and 6				7		82,600
8 Enter qualifying distributions If line 8 is equal to or greate	from Part XII, line 4 r than line 7, check the box in	Part VI, line 1	b. and complete	8that part using	a 1% tax rate	68,292 See

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Pai	t VI Excise Tax Based on Investment Income (Section 494	0(a), 49	940(b)	), 4940(e), or 4	948	—see	instruc	tions	5)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here	an	d ente	r "N/A" on line 1	)					
	Date of ruling or determination letter(attach copy of letter	if neces	sary—s	see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, ch	eck			7	1		3	,088	
_	here  and enter 1% of Part I, line 27b		- 404		- 1					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organization	ns ente	г 4%		,					
2	of Part I, line 12, col (b)  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations.	one only	. Otho	era antar () \		2			0	
3	Add lines 1 and 2	ons only	y Othe	ers eriter -o-)		3			.088	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundate	ions onl	v Othe	ers enter -()-)		4			,000	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less,			ord critical to y		5		3	,088	
6	Credits/Payments								•	
а	2012 estimated tax payments and 2011 overpayment credited to 2012	6a	l	505			1			
b	Exempt foreign organizations—tax withheld at source	6b								
C	Tax paid with application for extension of time to file (Form 8868)	6c_		2,583						
d	Backup withholding erroneously withheld	6d				<b> </b>	ļ			
7	Total credits and payments Add lines 6a through 6d					7		3	,088	<u> </u>
8		m 2220	ıs atta	ched		8	<del> </del>			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	_				9			0	
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount	t overp	aid	Refund	<b>-</b>	10 11			0	<u> </u>
_	Enter the amount of line 10 to be Credited to 2013 estimated tax			Keluliu	eu	<u> </u>	<u> </u>		U	
	rt VII-A Statements Regarding Activities								Yes	No
1 а	During the tax year, did the foundation attempt to influence any national, state,	or local	legisla	ition or did it			}	1a	165	X
h	participate or intervene in any political campaign?	itioal nu	rnaaaa	(000			-	ıa		_^
N	Did it spend more than \$100 during the year (either directly or indirectly) for pol Instructions for the definition)?	iucai pu	poses	(566				1b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activitie	s and co	ח פפותר	f any materials			-			
	published or distributed by the foundation in connection with the activities	s and oc	pics o	any materials				-		
c	Did the foundation file Form 1120-POL for this year?						ľ	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) impose	d during	the ye	ear						
	(1) On the foundation ▶ \$ (2) On foundation	manag	ers 🕨	· \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	tical exp	enditui	re tax imposed						
	on foundation managers  \$						-			لببا
2	Has the foundation engaged in any activities that have not previously been rep	orted to	the IR	S?				2		X
_	If "Yes," attach a detailed description of the activities						ļ			
3	Has the foundation made any changes, not previously reported to the IRS, in it	-	-		5			3		
4 -	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf			•				4a		X
	I Did the foundation have unrelated business gross income of \$1,000 or more dual of "Yes," has it filed a tax return on Form 990-T for this year?	ang me	year /				F	4b	N/A	<del>-^-</del>
5	Was there a liquidation, termination, dissolution, or substantial contraction duri	na the vi	ear?				ŀ	5	,,, (	Х
Ū	If "Yes," attach the statement required by General Instruction T	.go y					ŀ	-		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945	) satısfie	ed eithe	er						
	By language in the governing instrument, or	-								
	By state legislation that effectively amends the governing instrument so that	no man	datory	directions						
	that conflict with the state law remain in the governing instrument?							6	X_	
7	Did the foundation have at least \$5,000 in assets at any time during the year	?If "Yes	," com	plete Part II, col	(c), a	and Pa	art XV	7	Х	ļ
8 a	Enter the states to which the foundation reports or with which it is registered (s	ee instru	uctions	) <b>&gt;</b>			1			
	MA									
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99			•			į	0.		
_	General (or designate) of each state as required by General Instruction G? If "I						}	8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the m	-			, .		,			
	or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see	ınstruct	ions fo	r Part XIV)? If "	es, "		1	0		,
40	complete Part XIV	attach -		dula listina			}	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," their names and addresses	анасл 8	scned	uue usung				10		x
_	and names and addresses			···						(2012)
							⊦oπ	コンゴし	,-r	(2012)

rom	1990-PF (2012) FAY EUGENE F TR U/WILL 04-6	091426	Р	age 🕽
Par	t 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		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► BNY MELLON, N A Telephone no ► (617) 722	-7121		
	Located at PO BOX 185, PITTSBURGH, PA ZIP+4 ► 15230-01	<u> 35</u>		<u></u>
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			.—
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority	1 1	Yes	l
	over a bank, securities, or other financial account in a foreign country?	16		<u> </u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country			
Pa	rt 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	Dunng the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			ŀ
	(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)?			28
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			ľ
	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 )			*
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)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
С	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		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	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?			
	If "Yes," list the years 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3a	20 20 20 20 20 20 20 20 20 20 20 20 20 2	} }		
Ja	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X 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	1 1		
	if the foundation had excess business holdings in 2012 )	3b	N/A	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable	1		
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		Х

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	rt VII-B Statements Regarding Activitie		<u>n 4720 May Be F</u>	Required (continued)				
5a	During the year did the foundation pay or incur any							
	(1) Carry on propaganda, or otherwise attempt to			Yes	X No			
	(2) Influence the outcome of any specific public		955), or to carry					
	on, directly or indirectly, any voter registration	n drive?		Yes	X No			
	(3) Provide a grant to an individual for travel, stu	dy, or other similar pui	rposes?	Yes	X No			
	(4) Provide a grant to an organization other than	a charitable, etc., orga	anization described	_				
	in section 509(a)(1), (2), or (3), or section 494		•	X Yes	☐ No			
	(5) Provide for any purpose other than religious, educational purposes, or for the prevention o	of cruelty to children or	anımals?	_	X No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the t	ransactions fail to qual	lify under the excepti	ons described in				
	Regulations section 53 4945 or in a current notice			ons)?	<u>5b</u> _	Х		
	Organizations relying on a current notice regarding			•				
C	If the answer is "Yes" to question 5a(4), does the fo	oundation claim exemp	otion from the		_			
	tax because it maintained expenditure responsibilit			. Yes	X No			
	If "Yes," attach the statement required by Regulation	ons section 53 4945–5	(d)					
6a	Did the foundation, during the year, receive any fur	nds, directly or indirect	ly, to pay	_				
	premiums on a personal benefit contract?			Yes	X No			
b	Did the foundation, during the year, pay premiums,	directly or indirectly, o	on a personal benefit	contract?	6b	X		
72	If "Yes" to 6b, file Form 8870	a parti to a probibitor	d toy aboltor transport	on? Yes	X No			
_	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceeds o			_	7b	N/A		
	art VIII Information About Officers,							
	and Contractors	Directors, Truste	es, Foundation	wanagers, nigniy r	aid Employ	ees,		
1		tion managara and	d thair aamaanaa	tion (oos instructions)				
·	List an officers, unectors, trustees, founda	(b) Title, and average	(c) Compensation	(d) Contributions to		<del></del>		
	(a) Name and address	hours per week	(If not paid, enter	employee benefit plans	other of	se account, lowances		
DAI	V Mollen N A	devoted to position	-0-)	and deferred compensation	on Street all			
	Y Mellon, N A	TRUSTEE	22.255	NONE	NONE			
	D BOX 185 Pittsburgh, PA 15230-0185 Y Mellon, N A.	SEE ATTACHED FEE	22,355	NONE	NONE			
		REIMBURSEMENT	-7,712	N/A	N/A	N/A		
	DOX 103 Fittsbuigh, FA 13230-0163	KEIMBOKSEMENI	-1,112	IN/A	IN/A			
	Compensation of five highest-paid employ	lees (other than the	nse included on li	no 1—see instruction	s) If none			
-	enter "NONE."	rees (other than the	ose iliciaaea oli il	ne i—see msuuction	3). 11 110116,			
		1	<u> </u>	(d) Contributions to	· 1			
la	Name and address of each employee paid more than \$50,	(b) Title, and avera	* I	employee benefit	(e) Expen	se account,		
,-	, rama and a constant on project parameter state, week,	devoted to position	1	plans and deferred compensation	other all	lowances		
NC	NF			Compensation	•			
222	····				İ			
						_		
					1_			
		•••						
To	al number of other employees paid over \$50,0	000 .			NONE			
	<del></del>					0 DE (2042)		

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Part VIII Information About Officers, Directors, Trustee	es, Foundation Managers, Highly Pai	d Employees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NONE."	<del>,</del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	s	NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include releting the number of organizations and other beneficiaries served, conferences convened, research.	evant statistical information such as	Expenses
1 NONE		
***************************************		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (se		<del></del>
Describe the two largest program-related investments made by the foundation during the ta	ax year on lines 1 and 2	Amount
1 NONE		
2		
All other program-related investments See instructions		
3 NONE		
Total Add lines 1 through 2	<b>&gt;</b>	NONE
Total. Add lines 1 through 3	<u> </u>	NONE

Form 990-PF (2012)

	PROPERTY (2012) FAY EUGENE F TR UWILL		-6091426 Page <b>8</b>
Pai	Minimum Investment Return (All domestic foundations must complete this part Foreign	n foun	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	1,464,096
b	Average of monthly cash balances	1b	46,424
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,510,520
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,510,520
4	Cash deemed held for chantable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	22,658
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,487,862
6	Minimum investment return. Enter 5% of line 5	6	74,393
Par			
	foundations and certain foreign organizations check here  and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	74,393
2a		8	,
b	Income tax for 2012 (This does not include the tax from Part VI)  2b	37	
С	Add lines 2a and 2b	2c	3,088
3	Distributable amount before adjustments Subtract line 2c from line 1	3	71,305
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	71,305
6	Deduction from distributable amount (see instructions)	6	1
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	71,305
500	VIII Overlifetime District (100 (100 (100 )		1
Pari	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	68,292
b	Program-related investments—total from Part IX-B	1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		1
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	68,292
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	68,292
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four	ndation	
	qualifies for the section 4940(e) reduction of tax in those years		

Form **990-PF** (2012)

FAY EUGENE F TR U/WILL

Form 990-PF (2012)

04-6091426

Page 9

	990-PF (2012) FAY EUGENE F TR U/WILL				04-609	
Pa	t XIV Private Operating Foundations (s	see instructions	and Part VII-A, c	uestion 9)		N/A
1 a	If the foundation has received a ruling or determin foundation, and the ruling is effective for 2012, ent		• • •	<b>•</b>		
b	Check box to indicate whether the foundation is a	private operating for	undation described i	n section	4942(J)(3) or	4942(j)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) T-4-1
	income from Part I or the minimum investment return from Part X for each	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) Total
	year listed					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII, line 4 for each year listed					0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					0
	(1) Value of all assets				-	
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0
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)					0
	(2) Support from general public		<del> </del>			
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Co	mplete this par	t only if the fou	ndation had \$5	,000 or more in	
	assets at any time during the ye					
1	Information Regarding Foundation Manag	jers:				
а	List any managers of the foundation who have conbefore the close of any tax year (but only if they h				the foundation	
NC						<del>_</del>
b	List any managers of the foundation who own 109				ortion of the	
	ownership of a partnership or other entity) of whic	n the foundation has	s a 10% or greater if	neresi		
<u>NC</u> 2	Information Regarding Contribution, Gran	at Cift Loan Sc	holarship etc. P	rograme:		<del></del> -
_	Check here  I if the foundation only makes unsolicited requests for funds. If the foundation m	s contributions to pre	eselected charitable	organizations and d		
	other conditions, complete items 2a, b, c, and d		<del></del>			
а	The name, address, and telephone number or e-r	nall of the person to	wnom applications	snould be addressed	נ	
	RY ZAREMBA ONE BOSTON PLACE BOST  The form in which applications should be submitted.			aculd include		·····
r.	, The form in which applications should be subfilled	, a una miorifiation d	a materials tricy Si	.oaia moiddo		
	LL MARY ZAREMBA, 617-722-7626 Any submission deadlines					<del></del>
	LL MARY ZAREMBA, 617-722-7626					
	Any restrictions or limitations on awards, such as factors	by geographical are	as, charitable fields,	kinds of institutions	, or other	
CA	LL MARY ZAREMBA, 617-722-7626					

**Total** 

Form 990-PF (2012) FAY EUGENE F TR U/WILL 04-6091426 Page 11 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year See Attached Statement ▶ 3a 62,500 Approved for future payment NONE

► 3b NONE

Firm's address ► 600 GRANT STREET, PITTSBURGH, PA 15219

(412) 355-6000

Phone no

FAT EUGENE F IR U/WILL				04-609	1426 Page	1 of 4
Continuation of Part XV, Lin	ie 3a (990-PF) -	Gran	ts and Contr	ibutions Paid	During th	e Year
Recipient(s) paid during the year						
Name						
BROOKLINE POLICE MUTUAL AID AS	SOCIATION					
Street						
350 WASHINGTON STREET City	<del></del>	C4-4-	Tin Code	Torsian Coun	<b></b> .	
BROOKLINE		MA	Zip Code 02146-6851	Foreign Coun	try	
Relationship	Foundation Status		102140-0031			
NONE	PUBLIC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						1,000
Name						
<b>BROOKLINE FIREMAN'S RELIEF ASS</b>	OCIATION					
Street						
49 BABCOCK STREET		0	T	le		
City BROOKLINE		MA	Zip Code 02146-6851	Foreign Coun	try	
Relationship	Foundation Status		102 140-000 1			<del></del>
NONE	PUBLIC					
Purpose of grant/contribution	11_000.10				Amount	
GENERAL OPERATING PURPOSES		_			1	1,000
Name						
PERKINS SCHOOL FOR THE BLIND						
Street						<del></del>
175 N BEACON STREET						
City		State	Zip Code	Foreign Coun	try	
WATERTOWN	<del>,</del>	MA	02472			
Relationship	Foundation Status					
NONE	PUBLIC				Ta	
Purpose of grant/contribution					Amount	1 000
GENERAL OPERATING PURPOSES					<u> </u>	1,000
Name						
UNITARIAN UNIVERSALIST ASSOCIA	TION					
Street						
P O BOX 843152 City		State	Zip Code	Foreign Coun	· · · · · · · · · · · · · · · · · · ·	
BOSTON		MA	02284-3152	l oreign count	u y	
Relationship	Foundation Status		102204-0102			
NONE	PUBLIC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES					<u></u>	1,000
Name						
BROOKLINE FRIENDLY SOCIETY						
Street						
40 WEBSTER PL						
City			Zip Code	Foreign Coun	try	
BROOKLINE	Te 1 11 a	MA	02146-7337	<u> </u>		
Relationship	Foundation Status					
NONE Purpose of grant/contribution	PUBLIC				Amount	
GENERAL OPERATING PURPOSES					Amount	1,000
						1,000
Name						
UNITED CHURCH IN WALPOLE Street	<del>-</del>					<del></del>
30 COMMON STREET, P O BOX 287						
City	<del></del>	State	Zip Code	Foreign Coun	trv	
WALPOLE		MA	02081-0287	. S.eigh Coun	·· <i>5</i>	
Relationship	Foundation Status		10001 0201	<u>.</u>		
NONE	PUBLIC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES					1	1,000

FAY EUGENE F TR U/WILL				04-609	1426 Page	2 of 4
Continuation of Part XV, Lin	<u>ie 3a (990-PF) -</u>	Gran	ts and Conti	ributions Paid	During th	e Year
Recipient(s) paid during the year					<del></del>	
Name FIRST PARISH IN BROOKLINE						
Street						-
382 WALNUT ST City		State	Zip Code	Foreign Coun	trv	
BROOKLINE		MA	02146-7563	. Groigit Gouit	<u> </u>	
Relationship NONE	Foundation Status					
Purpose of grant/contribution	PUBLIC		<del> </del>		Amount	
GENERAL OPERATING PURPOSES						1,000
Name BRIGHAM AND WOMEN'S HOSPITAL	INC					
Street 116 HUNTINGTON AVE - 5TH FLOOR						
City		State	Zip Code	Foreign Coun	trv	
BOSTON		MA	02116		,	
Relationship NONE	Foundation Status					
Purpose of grant/contribution	PUBLIC				Amount	
GENERAL OPERATING PURPOSES			<del></del>			1,000
Name C L CHANDLER CORPS 109 W R C						
Street						
P O BOX 165 City		State	Zip Code	Foreign Count		
NEW DURHAM		NH	03855-0165	Foreign Count	иу	
Relationship	Foundation Status					
NONE Purpose of grant/contribution	PUBLIC				Amount	
GENERAL OPERATING PURPOSES					Amount	1,000
Name						
NEWTON WELLESLEY HOSPITAL						
Street						
2000 WASHINGTON ST City		State	Zip Code	Foreign Count	trv	
NEWTON		MA	02158			
Relationship	Foundation Status					
NONE Purpose of grant/contribution	PUBLIC				Amount	
GENERAL OPERATING PURPOSES					Amount	1,000
Name						
THE STONE INSTITUTE AND NEWTO	N HOME FOR AGED	PEOP	LE			
Street 227 ELLIOT ST						
City		State	Zip Code	Foreign Count	trv	
NEWTON		MA	02164-1231			
Relationship NONE	Foundation Status PUBLIC					
Purpose of grant/contribution	IPOBLIC	-	· · · ·		Amount	
GENERAL OPERATING PURPOSES		_				1,000
Name COMMUNITY RESOURCES FOR JUST	TICE					
Street						
355 BOYLSTON ST City		State	Zip Code	Foreign Count	trv	
BOSTON		MA	02116-3 <u>133</u>		··· <i>y</i>	
Relationship	Foundation Status					
NONE Purpose of grant/contribution	PUBLIC				Amount	
GENERAL OPERATING PURPOSES					- IIII GIII	1,000

FAY EUGENE F IR U/WILL				04-609	1426 Page	<u> 3 of 4</u>
Continuation of Part XV, Lin	ie 3a (990-PF) -	Gran	ts and Con	tributions Paic	During the	e Year_
Recipient(s) paid during the year						
Name						
REBECCA POMROY FOUNDATION IN	IC					
Street						
City		State	Zip Code	Foreign Coun	try	· · · · · · · · · · · · · · · · · · ·
City		State	Zip Code	oreign coun	iti y	
Relationship	Foundation Status					
NONE	PRIVATE NON-OPE	ERATIN	G FOUNDATIO	N		
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						500
Name						
FRIDAY NIGHT SUPPER PROGRAM I	NC					
Street						
City		State	Zip Code	Foreign Coun	itry	
				C.C.g.: 200	,	
Relationship	Foundation Status					
NONE	PUBLIC					
Purpose of grant/contribution					Amount	5 000
GENERAL OPERATING PURPOSES						5,000
Name						
FAMILY NURTURING CENTER						
Street						
City		State	Zip Code	Foreign Coun	ıtrv	
Oity .		Otate	Lip Gode	l oreign coun	,	
Relationship	Foundation Status			· · · · · · · · · · · · · · · · · · ·		
NONE	PUBLIC				· ·	
Purpose of grant/contribution					Amount	E 000
GENERAL OPERATING PURPOSES					<u> </u>	5,000
Name						
SOUTHWEST BOSTON SENIOR SER	VICES					
Street						
City		State	Zip Code	Foreign Coun	itry	
Relationship	Foundation Status					
NONE	PUBLIC				14	
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	5,000
					-	
Name	105 W.O					
ELLIS MEMORIAL & ELDREDGE HOU Street	ISE INC				<del></del>	
Street						
City		State	Zip Code	Foreign Coun	itry	
			·			
Relationship	Foundation Status					
NONE	PUBLIC				TA	
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	5,000
GENERAL OPERATING PURPOSES						5,000
Name						
BOYS AND GIRLS CLUB OF DORCHE	STER			- "		
Street						
City	<del></del>	State	Zip Code	Foreign Coun	itry	
				g., coun	· ·· · <b>,</b>	
Relationship	Foundation Status					
NONE	PUBLIC				<u> </u>	
Purpose of grant/contribution					Amount	5 000

FAY EUGENE F TR U/WILL				_04-609_		4 of 4
Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Con	tributions Paid	I During th	e Year
Recipient(s) paid during the year						
Name BOTTOM LINE INC						
BOTTOM LINE INC Street	<del></del>			* *		
			Ţ			
City		State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status		1			<del></del>
NONE	PUBLIC				1.	
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	5,000
Name	·· -· ·		•			
ADOPTION, FOSTER CARE, MENTOR	ING OUTREACH					
Street	•				-	
City		State	Zip Code	Foreign Coun	trv	
					<b>,</b>	
Relationship NONE	Foundation Status					
Purpose of grant/contribution	PUBLIC			<del></del>	Amount	
GENERAL OPERATING PURPOSES					<u> </u>	5,000
Name						
VICTIMS AND RESPOND INC Street						
Street						
City		State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status		1			
NONE	PUBLIC					
Purpose of grant/contribution					Amount	5 000
GENERAL OPERATING PURPOSES				<del></del>	<u> </u>	5,000
Name FRIENDS OF THE CHILDREN-BOSTO	N					
Street				· <del>= · = · ·</del>	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
City		C4-4-	lz:- C-d-	Familia Caus	4	
City BOSTON		MA	Zip Code	Foreign Coun	uy	
Relationship	Foundation Status				<del></del>	
NONE Purpose of grant/contribution	PUBLIC				Amount	
GENERAL OPERATING PURPOSES					Amount	5,000
Name		•				
NATIONAL BRAILLE PRESS						
Street						
City		State	Zip Code	Foreign Coun	try	
D. 1.:	Te		L			
Relationship NONE	Foundation Status PUBLIC					
Purpose of grant/contribution	II OBEIO				Amount	
GENERAL OPERATING PURPOSES					<u> </u>	5,000
Name						
Street						
City		State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status	l	<u> </u>		<del></del>	··
				<u> </u>		
Purpose of grant/contribution					Amount	

ACCOUNT NAME	CUSIP ID	ASSET SHORT NAME	SHARES	MARKET VALUE	FEDERAL TAX COST
FAY EUGENE F TR	05569M434	BNY MELLON TAX-SEN L/C MS-M	38,618.38	578,503.42	510,535 06
FAY EUGENE F TR	05569M442	BNY MELLON SM/MID CAP-M	8,796.66	139,690.96	108,971.14
FAY EUGENE F TR	05569M509	BNY MELLON M/C MULTI-STRATEG	3,796.23	52,995.50	30,683.72
FAY EUGENE F TR	05569M780	BNY MELLON S/T US GOV SECS-M	6,791.65	81,839.47	83,897.33
FAY EUGENE F TR	05569M814	BNY MELLON INTERMEDIATE BD-M	15,368.64	196,718.68	195,447.09
FAY EUGENE F TR	05569M830	BNY MELLON BOND FUND-M	18,805.88	244,100.40	213,449.48
FAY EUGENE F TR	05569M855	BNY MELLON EMERGING MKTS-M	14,252.41	139,388.66	126,874.67
FAY EUGENE F TR	261986632	DREYFUS DIVERSIFIED INTL-I	7,180.39	81,712.88	69,969.54
FAY EUGENE F TR	991061052	CRA (BNY MELLON, N.A., MEMBE	706.61	706.61	706.61
FAY EUGENE F TR	991061052	CRA (BNY MELLON, N.A., MEMBE	14,687.38	14,687.38	14,687.38
Totals				1,530,343.96	1,355,222.02

# Attachment to Form 990-PF Part VIII, Column (b) Title and average hours per week devoted to position

As Trustee, BNY Mellon, N.A. provides administrative services such as acting as investment manager for the named organization. These services require numerous individual bank employees' involvement in the activities of the organization and thus cannot be quantified on an hourly basis. Therefore, the Trustee's fees are not based upon an hourly basis but are calculated based upon factors such as the market value of the account and in accordance with our agreement with the client.

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Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

		Amount							Sales		Basis and Expenses	Expenses	or Los	383
	Long Term CG Distributions	17,206					ŭ	Capital Gains/Losses		682,946		541,299		141,647
	Short Term CG Distributions	0						Other sales		0		0		0
Chack "X"				Check "X" if							Expense of Sale and Cost of			
to include				6.8	Date	Acquisition	Date	Gross Sales	Cost or	Valuation	Improve-			Net Gain
in Part IV	Description	CUSIP #	Purchaser	Business	Acquired	Method	Sold	Pnce	Other Basis	Method	ments	Depreciation	Adjustments	or Loss
×	BNY MELLON LARGE CAP STH	05569M103			8/7/2008		1/24/2013	27,487	25,513				0	1,974
ia ×	BNY MELLON LARGE CAP STE	05569M103			12/17/2008		1/24/2013	10,453	6,588				0	3,865
×	BNY MELLON LARGE CAP STR	05569M103			2/12/2009		1/24/2013	118,200	69,805				0	48,395
×	BNY MELLON LARGE CAP STH	05569M103			3/22/2012		1/24/2013	5,915	5,827				0	88
ă ×	BNY MELLON LARGE CAP STR	05569M103			12/13/2012		1/24/2013	12,338	11,729				0	609
×	BNY MELLON FOC EQ OPP-M	05569M475			2/11/2010		1/24/2013	114,958	86,909				0	28,049
×	BNY MELLON FOC EQ OPP-M	05569M475			12/13/2011		1/24/2013	592	213				0	52
×	BNY MELLON FOC EQ OPP-M	05569M475			3/22/2012		1/24/2013	6,854	6,540				0	314
×	BNY MELLON M/C MULTI-STR	05569M509			12/7/2012		1/24/2013	3,375	3,109				0	266
×	BNY MEL US CORE EQ 130/30	05569M582			2/11/2010		1/24/2013	114,103	85,845				0	28,258
×	BNY MEL US CORE EQ 130/30	05569M582			3/22/2012		1/24/2013	8,798	8,331				0	467
X	BNY MELLON BOND FUND-M	05569MB30			12/17/2012		1/24/2013	2,823	2,819				0	4
×	BNY MELLON BOND FUND-M	05569M830			2/11/2010		1/24/2013	94,343	90,169				0	4,174
×	DREYFUS DIVERSIFIED INTL-(	261986632			2/3/2011		1/24/2013	29,553	30,230				0	-677
×	HIGHBRIDGE DYNAMIC COMIN	48121A670			9/24/2012		8/14/2013	11,283	15,000				0	-3,717
X B	BNY MELLON LARGE CAP STR	05569M103			11/30/1981		1/24/2013	30,968	31,700				0	-732
×	BNY MELLON LARGE CAP STI	05569M103			10/31/1982		1/24/2013	54,233	41,412				0	12,821
X B	BNY MELLON LARGE CAP STI	05569M103			12/31/2001		1/24/2013	15,388					0	-347
×	BNY MELLON LARGE CAP ST	05569M103			7/11/2003		1/24/2013	4,403	3,825				0	578

Part I, Line 16a (990-PF) - Legal Fees

	400	0		400
	Revenue and			Disbursements for Charitable
	Expenses per	Net Investment	Adjusted Net	Purposes
Description	Books	Income	Income	(Cash Basis Only)
1 PROBATE COURT FEES	400			400

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Part I, Line 18 (990-PF) - Taxes

		1,481	643	0	0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	FOREIGN TAXES PAID	643	643		
2	PRIOR YEAR TAXES PAID	333			
3	ESTIMATED TAXES PAID	505			
4					

Part I, Line 23 (990-PF) - Other Expenses

	35	0	0	35
	Revenue and	-		Disbursements
<b>}</b>	Expenses	Net Investment	Adjusted Net	for Charitable
Description	per Books	Income	Income	Purposes
1 MA FILING FEE	35	0		35

Part II, Line 13 (990-PF) - Investments - Other

			1,215,982	1,339,828	1,514,950
		Basis of	Book Value	Book Value	FMV
	Asset Description	Valuation	Beg of Year	End of Year	End of Year
-				0	
7	2 DREYFUS DIVERSIFIED INTL-I		0	026'69	81,713
က	3 BNY MELLON TAX-SENSITIVE LARGE CAR		0	510,535	578,503
4	BNY MELLON SMALL/MID CAP FUND-M		0	108,971	139,691
2	5 BNY MELLON MID CAP STK FD CL M		0	30,684	52,996
9	6 BNY MELLON EMERGING MKTS FD CL M		0	126,875	139,389
7	BNY MELLON S/T US GVT SECS FD CL M		0	83,897	81,839
8	8 BNY MELLON INTERMEDIATE BOND FD C		0	195,447	196,719
6	9 BNY MELLON BOND FD CL M		0	213,449	244,100
l					

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Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

									14,643	0	O	
Name	Check "X"	Street	Cıty	State	State Zip Code	Foreign Country	Title	Avg Hrs Per Week	Avg Hrs Avg Hrs Title Per Week Compensation B	Benefits	Expense Account	
BNY Mellon, N.A	×	O BOX 185	Pittsburgh	PA 15	5230-0185		TRUSTEE	SEE ATTAC	22,355 NONE		NONE	
BNY Mellon, N A	×	X P O BOX 185	Pittsburgh	PA 15	15230-0185		FEE	REIMBURSI	-7,712 N/A	₩.	4/A	

Part VI, Line 6a (990-PF) - Estimated Tax Payments

				Date	Amount
1	Credit from prior year return	•		1	0
2	First quarter estimated tax payment			2/11/2013 2	505
3	Second quarter estimated tax payment		•		
4	Third quarter estimated tax payment			4	·
5	Fourth quarter estimated tax payment .			5	
6	Other payments			6	
7	_Total .		•	7	505

Form 8	388 (Rev. 1-2013)					Page 2
• if y	ou are filing for an Additional (Not Automatic)	3-Month i	Extension, complete only Part I	and check this	box .	<b>▶</b> 🗓
Note.	Only complete Part II if you have already been	granted an	automatic 3-month extension on			
	ou are filing for an Automatic 3-Month Extens			<del></del>	<del></del>	
Part	Additional (Not Automatic) 3-Month	Extension				
Tuna	or Name of exempt organization		Enter file	er's identifying nu Employer identification		
Type print	FAY EUGENE F TR UWILL			)4-6091426	31111011101	37 (E.14) G.
Princ	Number, street, and room or suite no. If a P.C.	) box. see ii		Social security nu	mber (S	SN)
File by the	BAIN Mallar N.A. B.O. BON 405			Josiai Josephi, me	(-	,
filing you	City, town or post office, state, and ZIP code.	For a foreig	n address, see instructions			
retum S Instruction				PA		15230-0185
Enter	the Return code for the return that this application	on is for (fil	e a separate application for each	return)		04
Appl	cation	Return	Application			Return
Is Fo	<u>r</u>	Code	Is For			Code
Form	990 or Form 990-EZ	01	RESIDENCE PROPERTY.		漢的解	
Form	990-BL	02	Form 1041-A			08
	4720 (ındıvidual)	03	Form 4720			09
	990-PF	04	Form 5227			10
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form	990-T (trust other than above)	06	Form 8870			12
Te If t If t for the list wil	e books are in the care of BNY MELLON, Nephone No 412-234-8833  The organization does not have an office or place his is for a Group Return, enter the organization whole group, check this box	of busines of four digit of it is for p sion is for e until eginning 2 months,	FAX No sin the United States, check this sin the United States, check this Group Exemption Number (GEN part of the group, check this box.  8/15/2014  10/1/2012, a check reason: Initial returns.	nd ending rn Final re	9/30/ eturn	. If this is and attach a 2013
8a	If this application is for Form 990-BL, 990-PF, 9	90-T. 4720	), or 6069, enter the tentative tax.	less any		
	nonrefundable credits See instructions.				8a \$_	3,088
b	If this application is for Form 990-PF, 990-T, 47	20, or 6069	, enter any refundable credits an			
	estimated tax payments made Include any prio	r year ove	payment allowed as a credit and	any 🖺		
	amount paid previously with Form 8868.		···		8b \$	3,088
C	Balance due. Subtract line 8b from line 8a. Inc EFTPS (Electronic Federal Tax Payment Syste				Bc \$	0
Linder	Signature and Veri		must be completed for Part	-	the best	of my
	edge and belief of is true, correct, and complete, and the				555(	,
	Par Mas. T		6/1		,	5-5-14
Signatu	re Municipality	Title >		Date		368 (Ray 1-2013)

Form 8868

(Rev January 2013) Department of the Treasury [Internal Revenue Service

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

File a separate application for each return.

OMB No 1545-1709

• If you are filing for an Automatic 3-Month Extension, complete 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

	for Transfers Associated With Certain Personations). For more details on the electronic filing of						
Part							<del></del>
A corp	oration required to file Form 990-T and request				omple	ete	
Part I d							▶ 🗌
All other	er corporations (including 1120-C filers), partne	rships, RE	MICs, and trusts must use Form 700	04 to reques	t an e	xtensi	on of
time to	file income tax returns						
							instructions
Type o		ee instruction		Employer ider		on numb	er (EIN) or
print	FAY EUGENE F TR UWILL			<u>04-6091426</u>			
File by the	for	) box, see if	nstructions	Social secur	ity nu	mber (S	iSN)
filing you	City town or post effect state and 7ID and	F f					
return S instruction		For a foreig	n address, see instructions	Π.	45	220.04	0.5
III SUI UCUC	ns Pittsburgh			PA	15,	<u> 230-01</u>	85
Enter t	he Return code for the return that this application	on is for (fil	e a separate application for each re	turn)			04
Appli	cation	Return	Application				Return
Is For		Code	Is For				Code
Form	990 or Form 990-EZ	01	Form 990-T (corporation)				07
Form	990-BL	02	Form 1041-A				08
	4720 (ındıvıdual)	03	Form 4720				09
Form 990-PF 04 Form 5227 10							
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069				11
<u>Form</u>	990-T (trust other than above)	06	Form 8870				12
Tele If the If the Ist with	e books are in the care of BNY MELLON, Nephone No 412-234-8833  e organization does not have an office or place is is for a Group Return, enter the organization whole group, check this box the names and EINs of all members the exterequest an automatic 3-month (6 months for a until 5/15/2014, to file the s for the organization's return for calendar year or  X tax year beginning 10/1/2 the tax year entered in line 1 is for less than 1	e of busines 's four digit If it is for p ision is for corporation exempt or	Group Exemption Number (GEN) part of the group, check this box n required to file Form 990-T) extension ganization return for the organization, and ending	sion of time n named abo	3	he ext	this is and attach a dension
[	Change in accounting period		<del>-</del>		returi	1	
	f this application is for Form 990-BL, 990-PF, 9	90-T, 4720	), or 6069, enter the tentative tax, le	ss any		_	
	nonrefundable credits See instructions				3a	\$	3,088
	f this application is for Form 990-PF, 990-T, 47				۱ . ا	•	<b>505</b>
(	estimated tax payments made Include any prio	r year over	payment allowed as a credit		3b	\$	505
C I	Balance due. Subtract line 3b from line 3a Inc EFTPS (Electronic Federal Tax Payment Syste	iuae your p	eayment with this form, if required, b	y using	3с	\$	2,583
	If you are going to make an electronic fund withdra			rm 8879-FO		<del></del>	

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