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

2012

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 Oct 1, 2012, and ending Sep 30, 2013

<p>Name of foundation <b>SEBONACK FOUNDATION</b></p> <p>Number and street (or P O box number if mail is not delivered to street address) <b>270 S. SERVICE ROAD</b></p> <p>City or town <b>MELVILLE</b></p> <p>State ZIP code <b>NY 11747-2339</b></p> <p>G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial Return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change</p> <p>H Check type of organization. <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation</p> <p>I Fair market value of all assets at end of year (from Part II, column (c), line 16) <b>\$ 3,816,689.</b></p> <p>J Accounting method. <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <b>(Part I, column (d) must be on cash basis.)</b></p>		<p>A Employer identification number <b>20-5411954</b></p> <p>B Telephone number (see the instructions) <b>(631) 622-9419</b></p> <p>C If exemption application is pending, check here <input type="checkbox"/></p> <p>D 1 Foreign organizations, check here <input type="checkbox"/></p> <p>2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/></p> <p>E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/></p> <p>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/></p>
<p><b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</p> <p><b>REVENUE</b></p> <p>1 Contributions, gifts, grants, etc, received (att sch) <b>0.</b></p> <p>2 Ck <input checked="" type="checkbox"/> if the foundn is not req to att Sch B</p> <p>3 Interest on savings and temporary cash investments <b>428.</b></p> <p>4 Dividends and interest from securities</p> <p>5a Gross rents</p> <p>b Net rental income or (loss)</p> <p>6a Net gain/(loss) from sale of assets not on line 10</p> <p>b Gross sales price for all assets on line 6a</p> <p>7 Capital gain net income (from Part IV, line 2)</p> <p>8 Net short-term capital gain</p> <p>9 Income modifications</p> <p>10a Gross sales less returns and allowances</p> <p>b Less Cost of goods sold</p> <p>c Gross profit/(loss) (att sch)</p> <p>11 Other income (attach schedule)</p> <p>12 <b>Total.</b> Add lines 1 through 11. <b>428.</b></p>		<p>(a) Revenue and expenses per books</p> <p>(b) Net investment income</p> <p>(c) Adjusted net income</p> <p>(d) Disbursements for charitable purposes (cash basis only)</p> <p><b>NIA</b></p>
<p><b>ADMINISTRATIVE EXPENSES</b></p> <p>13 Compensation of officers, directors, trustees, etc</p> <p>14 Other employee salaries and wages</p> <p>15 Pension plans, employee benefits</p> <p>16a Legal fees (attach schedule)</p> <p>b Accounting fees (attach sch)</p> <p>c Other prof fees (attach sch) <b>7,815.</b></p> <p>17 Interest <b>2.</b></p> <p>18 Taxes (attach schedule)(see instrs) <b>FEDERAL EXCISE TAX</b></p> <p>19 Depreciation (attach sch) and depletion</p> <p>20 Occupancy</p> <p>21 Travel, conferences, and meetings</p> <p>22 Printing and publications</p> <p>23 Other expenses (attach schedule) See Line 23 Stmt <b>287.</b></p> <p>24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 <b>8,104.</b></p> <p>25 Contributions, gifts, grants paid <b>1,153,248.</b></p> <p>26 <b>Total expenses and disbursements.</b> Add lines 24 and 25 <b>1,161,352.</b></p> <p>27 Subtract line 26 from line 12: a <b>Excess of revenue over expenses and disbursements</b> <b>-1,160,924.</b></p> <p>b <b>Net investment income</b> (if negative, enter -0-) <b>428.</b></p> <p>c <b>Adjusted net income</b> (if negative, enter -0-) <b>NIA</b></p>		<p><b>RECEIVED</b> FEB 18 2014 OGDEN, UT</p>

<b>Part II</b> <b>Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>ASSETS</b>	1	1 Cash — non-interest-bearing	71,263.	289,911.	289,911.
	2	2 Savings and temporary cash investments	4,906,350.	3,526,778.	3,526,778.
	3	3 Accounts receivable			
		Less: allowance for doubtful accounts			
	4	4 Pledges receivable			
		Less: allowance for doubtful accounts			
	5	5 Grants receivable			
	6	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	7 Other notes and loans receivable (attach sch)			
		Less: allowance for doubtful accounts			
	8	8 Inventories for sale or use			
	9	9 Prepaid expenses and deferred charges			
	10a	10a Investments — U.S. and state government obligations (attach schedule)			
	b	b Investments — corporate stock (attach schedule)			
	c	c Investments — corporate bonds (attach schedule)			
	11	11 Investments — land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)				
12	12 Investments — mortgage loans				
13	13 Investments — other (attach schedule)				
14	14 Land, buildings, and equipment: basis				
	Less: accumulated depreciation (attach schedule)				
15	15 Other assets (describe)				
16	16 Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	4,977,613.	3,816,689.	3,816,689.	
<b>LIABILITIES</b>	17	17 Accounts payable and accrued expenses			
	18	18 Grants payable			
	19	19 Deferred revenue			
	20	20 Loans from officers, directors, trustees, & other disqualified persons			
	21	21 Mortgages and other notes payable (attach schedule)			
	22	22 Other liabilities (describe)			
	23	23 Total liabilities (add lines 17 through 22)			
<b>NET FUND BALANCES</b>	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		<input checked="" type="checkbox"/>		
	24	24 Unrestricted	4,977,613.	3,816,689.	
	25	25 Temporarily restricted			
	26	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.		<input type="checkbox"/>		
	27	27 Capital stock, trust principal, or current funds			
	28	28 Paid-in or capital surplus, or land, building, and equipment fund			
	29	29 Retained earnings, accumulated income, endowment, or other funds			
	30	30 Total net assets or fund balances (see instructions)	4,977,613.	3,816,689.	
	31	31 Total liabilities and net assets/fund balances (see instructions)	4,977,613.	3,816,689.	

**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	4,977,613.
2	Enter amount from Part I, line 27a	2	-1,160,924.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	3,816,689.
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	3,816,689.

**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 shares MLC Company)			(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (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 (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))		
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss). <span style="border: 1px solid black; padding: 2px;">If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7</span>			2	N/A	
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	N/A	

**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) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2011	29,750.	1,231,761.	0.024152
2010	0.	7,167.	0.000000
2009	0.	7,164.	0.000000
2008	1,000.	7,401.	0.135117
2007	113.	8,137.	0.013887

2 Total of line 1, column (d) 2 0.173156

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 0.034631

4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5 4 4,257,524.

5 Multiply line 4 by line 3 5 147,442.

6 Enter 1% of net investment income (1% of Part I, line 27b) 6 4.

7 Add lines 5 and 6 7 147,446.

8 Enter qualifying distributions from Part XII, line 4 8 1,161,063.

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 Date of ruling or determination letter. (attach copy of letter if necessary – see instrs)	1	4.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	2	0.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	3	4.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
3	Add lines 1 and 2	5	4.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	6	4.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0-	6 a	
6	Credits/Payments:	6 b	
a	2012 estimated tax pmts and 2011 overpayment credited to 2012	6 c	
b	Exempt foreign organizations – tax withheld at source	6 d	
c	Tax paid with application for extension of time to file (Form 8868)	7	
d	Backup withholding erroneously withheld	8	
7	Total credits and payments Add lines 6a through 6d	9	4.
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	10	0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	11	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	Refunded	
11	Enter the amount of line 10 to be. Credited to 2013 estimated tax ►		

**Part VII-A Statements Regarding Activities**

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?

	Yes	No
1 a	X	

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?

1 b	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	X	

c Did the foundation file **Form 1120-POL** for this year?

1 c	X	

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.

1 c	X	

(1) On the foundation ► \$ 0. (2) On foundation managers ► \$ 0.

2	X	

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0.

2	X	

2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities.

3	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

4 a	X	

4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

4 b	N/A	

b If 'Yes,' has it filed a tax return on **Form 990-T** for this year?

5	X	

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

6	X	

If 'Yes,' attach the statement required by General Instruction T.

7	X	

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:

8 b	X	

• By language in the governing instrument, or

9	X	

• 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?

10	X	

7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV

8 b	X	

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

9	X	

NY - New York

10	X	

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

BAA

Form 990-PF (2012)

**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? Website address ► N/A	13	X
14	The books are in care of ► CHARLES E. BECKER Telephone no ► (631) 622-9419 Located at ► 270 S. SERVICE ROAD MELVILLE NY ZIP + 4 ► 11747-2339	14	
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 N/A	15	N/A
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 ►	16	Yes X No

**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.

1a	During the year did the foundation (either directly or indirectly):	Yes	No
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? ► Yes X No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ► Yes X No		
(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? ► Yes X 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)? ► Yes X 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) ► Yes X 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)? Organizations relying on a current notice regarding disaster assistance check here ► N/A	1b	N/A
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? ► N/A	1c	N/A
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)): 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? ► Yes X No If 'Yes,' list the years ► 20 __ , 20 __ , 20 __ , 20 __	2a	N/A
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.) ► N/A	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 ► 20 __ , 20 __ , 20 __ , 20 __	2c	
3a	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	3a	
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.) ► N/A	3b	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? ► N/A	4a	
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? ► N/A	4b	

**Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5 a 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)?

5 b *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).

6 a 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?

If 'Yes' to 6b, file Form 8870.

6 b *X*

7 a 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?

7 b *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
MICHAEL C. PASCUCCI 270 S. SERVICE ROAD - STE 45 MELVILLE NY 11747	DIRECTOR/PRESIDENT 0.00	0.	0.	0.
CHRISTOPHER S. PASCUCCI 270 S. SERVICE ROAD - STE 45 MELVILLE NY 11747	DIRECTOR/VP 0.00	0.	0.	0.
RALPH P. PASCUCCI 270 S. SERVICE ROAD - STE 45 MELVILLE NY 11747	DIRECTOR/VP 0.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc.		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 .....

None

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Form 990-PF (2012)

**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
NONE		

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**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	<u>N/A</u>	
2		0.
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	N/A	
2		0.
All other program-related investments. See instructions		
3		
<b>Total. Add lines 1 through 3</b>		None

**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 0.
b	Average of monthly cash balances	1b 4,322,359.
c	Fair market value of all other assets (see instructions)	1c 0.
d	<b>Total</b> (add lines 1a, b, and c)	1d 4,322,359.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0.
2	Acquisition indebtedness applicable to line 1 assets	2 0.
3	Subtract line 2 from line 1d	3 4,322,359.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4 64,835.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5 4,257,524.
6	<b>Minimum investment return.</b> Enter 5% of line 5	6 212,876.

**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	1 212,876.
2a	Tax on investment income for 2012 from Part VI, line 5	2a 4.
b	Income tax for 2012 (This does not include the tax from Part VI)	2b
c	Add lines 2a and 2b	2c 4.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 212,872.
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5 212,872.
6	Deduction from distributable amount (see instructions)	6
7	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 212,872.

**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 1,161,063.
b	Program-related investments – total from Part IX-B	1b 0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2 0.
3	Amounts set aside for specific charitable projects that satisfy the:	
a	Suitability test (prior IRS approval required)	3a 0.
b	Cash distribution test (attach the required schedule)	3b 0.
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 1,161,063.
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 4.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6 1,161,059.

**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) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				212,872.
2 Undistributed income, if any, as of the end of 2012:			30,871.	
a Enter amount for 2011 only				
b Total for prior years: 20 20 20				
3 Excess distributions carryover, if any, to 2012:				
a From 2007	0.			
b From 2008	0.			
c From 2009	0.			
d From 2010	0.			
e From 2011	0.			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from Part XII, line 4. ► \$ 1,161,063.			30,871.	
a Applied to 2011, but not more than line 2a		0.		
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2012 distributable amount				212,872.
e Remaining amount distributed out of corpus	917,320.			0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)		0.		
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	917,320.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount - see instructions			0.	
f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	917,320.			
10 Analysis of line 9:				
a Excess from 2008	0.			
b Excess from 2009	0.			
c Excess from 2010	0.			
d Excess from 2011	0.			
e Excess from 2012	917,320.			

BAA

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

N/A

1 a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling				►	
b	Check box to indicate whether the foundation is a private operating foundation described in section				<input type="checkbox"/>	4942(j)(3) or
2 a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					4942(j)(5)
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
a	'Assets' alternative test — enter:					
(1)	Value of all assets					
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	'Support' alternative test — enter:					
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(ii)					
(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) )

N/A

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:

CHRISTINE TOURTOULIS

270 S. SERVICE ROAD - SUITE 45

MELVILLE

NY 11747

(631) 622-9401

b The form in which applications should be submitted and information and materials they should include:

SEE STATEMENT A

c Any submission deadlines.

SEE STATEMENT A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE STATEMENT A

## Part XV Supplementary Information (continued)

## 3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
<b>a Paid during the year</b>				
BUCKNELL UNIVERSITY 301 MARKET ST, STE 2			ASSISTANCE FOR EDUCATIONAL PURPOSES	200,000.
LEWISBURG PA 17837		501(c) (3)		
CATHOLIC CAMPUS MINISTRY ASSOCIATION 1118 PENDLETON ST, STE 300		501(c) (3)	ASSISTANCE FOR POOR	65,000.
CINCINNATI OH 45202		501(c) (3)	ASSISTANCE FOR SCIENTIFIC PURPOSES	1,000.
COLD SPRING HARBOR LABORATORY ONE BUNGTOWN ROAD		501(c) (3)	HEALTH & WELFARE OF CHILDREN	26,000.
COLD SPRING HARBOR NY 11724		501(c) (3)	HEALTH & WELFARE OF NEEDY	10,000.
ELS FOR AUTISM FOUNDATION 3900 MILITARY TRAIL, STE 200		501(c) (3)	ASSISTANCE FOR EDUCATIONAL PURPOSES	83,332.
JUPITER FL 33458		501(c) (3)	ASSISTANCE FOR ENVIRONMENTAL PURPOSES	500.
FASHION DELIVERS 1372 BROADWAY		501(c) (3)	ASSISTANCE FOR ENVIRONMENTAL PURPOSES	7,500.
NEW YORK NY 10018		501(c) (3)	ASSISTANCE FOR POOR	1,000.
FELLOWSHIP OF CATHOLIC UNIVERSITY STUDENTS 603 PARK POINT DR		501(c) (3)		
GENESEE CO 80401		501(c) (3)		
FOUNDATION FOR LONG ISLAND STATE PARKS 7600 JERICHO TURNPIKE, STE 410		501(c) (3)		
WOODBURY NY 11797		501(c) (3)		
GROUP FOR THE EAST END INC 2442 MAIN ST, PO BOX 569		501(c) (3)		
BRIDGEHAMPTON NY 11932		501(c) (3)		
HERMANDAD, INC. PO BOX 286269		501(c) (3)		
NEW YORK NY 10128		501(c) (3)		
See Line 3a statement				758,916.
<b>Total</b>			► 3a	1,153,248.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>			► 3b	0.
BAA				

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

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue.					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments				14	428.
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				428.	
13 Total. Add line 12, columns (b), (d), and (e)				13	428.

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)
N/A	



Form 990-PF, Page 1, Part I, Line 23

**Line 23 Stmt**

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
NYS ANNUAL FILING FEE	275.			
POSTAGE	12.			
Total	<u>287.</u>			

Form 990-PF, Page 6, Part VIII, Line 1

**Information about Officers, Directors, Trustees, Etc.**

(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
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> CHARLES E. BECKER, JR. 270 S. SERVICE ROAD - STE 45 MELVILLE NY 11747	TREASURER 0.00	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> PETER I. CAVALLARO 270 S. SERVICE ROAD - STE 45 MELVILLE NY 11747	SECRETARY 0.00	0.	0.	0.

Total

0. 0. 0.

Form 990-PF, Page 11, Part XV, line 3a

**Line 3a statement**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Found- ation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
<b>a Paid during the year</b>				
LUSTGARTEN FOUNDATION 1111 STEWART AVENUE BETHPAGE NY 11714		501(c) (3)	SCIENTIFIC & MEDICAL RESEARCH RELATED TO PANCREATIC CANCER	Person or Business <input checked="" type="checkbox"/> 5,000.
MARYKNOLL FATHERS & BROTHERS PO BOX 302 MARYKNOLL NY 10545		501(c) (3)	FAMINE RELIEF	Person or Business <input checked="" type="checkbox"/> 150,000.
MEMORIAL SLOAN-KETTERING CANCER CENTER 633 THIRD AVENUE, 28TH FL NEW YORK NY 10017		501(c) (3)	CANCER CARE & RESEARCH	Person or Business <input checked="" type="checkbox"/> 500.

Form 990-PF, Page 11, Part XV, line 3a  
**Line 3a statement**

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Found- ation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
<b>a Paid during the year</b>				
MERCY & SHARING 201 N MILL ST, STE 201 ASPEN CO 81611				Person or Business <input checked="" type="checkbox"/> 30,000.
MIRACLE CORNERS OF THE WORLD INC 152 MADISON AVENUE NEW YORK NY 10016		501(c) (3)	ASSISTANCE FOR POOR YOUTH DEVELOPMENT & HEALTHCARE	Person or Business <input checked="" type="checkbox"/> 1,000.
MOLLOY COLLEGE 1000 HEMPSTEAD AVE, PO BOX 5002 ROCKVILLE CENTER NY 11571		501(c) (3)	FINANCIAL ASSISTANCE FOR STUDENTS	Person or Business <input checked="" type="checkbox"/> 10,000.
NO SURRENDER BREAST CANCER FOUNDATION INC PO BOX 84 LOCUST VALLEY NY 11560		501(c) (3)	CANCER CARE & RESEARCH	Person or Business <input checked="" type="checkbox"/> 1,000.
NORTHERN PALM BEACH COUNTY YOUTH FOUNDATION 11780 US HIGHWAY ONE NORTH PALM BEACH FL 33408		501(c) (3)	YOUTH DEVELOPMENT & EDUCATION	Person or Business <input checked="" type="checkbox"/> 1,500.
SCO FAMILY OF SERVICES ONE ALEXANDER PLACE GLEN COVE NY 11542		501(c) (3)	ASSISTANCE FOR NEEDY	Person or Business <input checked="" type="checkbox"/> 1,000.
SISTERS OF LIFE 38 MONTEBELLO ROAD SUFFERN NY 10901		501(c) (3)	CARE OF PREGNANT WOMEN	Person or Business <input checked="" type="checkbox"/> 41,666.
SOUTHAMPTON VOLUNTEER AMBULANCE PO BOX 2760 SOUTHAMPTON NY 11969		501(c) (3)	COMMUNITY SAFETY	Person or Business <input checked="" type="checkbox"/> 250.
ST DOMINIC ROMAN CATHOLIC CHURCH 93 ANSTICE ST OYSTER BAY NY 11771		501(c) (3)	ASSISTANCE FOR POOR	Person or Business <input checked="" type="checkbox"/> 50,000.
ST FRANCIS HOSPITAL FOUNDATION 100 PORT WASHINGTON AVE ROSLYN NY 11576		501(c) (3)	COMMUNITY OUTREACH PROGRAMS	Person or Business <input checked="" type="checkbox"/> 220,000.
TELECARE 1200 GLENN CURTISS BLVD UNIONDALE NY 11553		501(c) (3)	REMOTE CARE FOR ELDERLY & DISABLED	Person or Business <input checked="" type="checkbox"/> 245,000.
WELCOMING HOME OUR HEROES 1229 WALT WHITMAN ROAD MELVILLE NY 11747		501(c) (3)	ASSISTANCE FOR VETERANS	Person or Business <input checked="" type="checkbox"/> 1,000.
WINDERMERE COUNTRY CLUB FOUNDATION INC 2710 BUTLER DRIVE N WINDERMERE FL 34786		501(c) (3)	ASSIST FUNDRAISING EFFORTS OF CENTRAL FLORIDA	Person or Business <input checked="" type="checkbox"/> 1,000.

Total

758,916.

## **INTEROFFICE MEMORANDUM**

To: Christopher S. Pascucci

CC: Michael C. Pascucci  
Ralph P. Pascucci  
Christine Tourtoulis  
Peter Cavallaro

From: Chuck Becker

Date: November 6, 2013

Re: **Sebonack Foundation (“SF”) – Funding Procedures**

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This memorandum serves to outline certain operating procedures for SF, which has received its IRS Section 501(c)(3) exemption.

### **Procedures for Making Grants:**

In accordance with IRS guidelines, SF must demonstrate “expenditure responsibility” when making grants to other charitable organizations. Exercising expenditure responsibility requires record keeping, monitoring and reporting obligations to ensure a grant is spent solely for the purpose for which it was made.

To satisfy these requirements, the following procedures must be followed when receiving a request for funding from an outside charitable organization:

- A “Grant Application” form and related cover letter will be sent to the charitable organization by the Managing Director of SF (examples enclosed).
- The Managing Director will receive the completed “Grant Application” forms. Upon receipt, the Managing Director will review the application for content and completeness.
- If a fully completed “Grant Application” is not received, the Managing Director will usually follow-up with a phone call or email to the organization requesting the missing information.
- In accordance with our charitable guidelines and operating budget, an initial screening for approval or decline will be made the Managing Director.
- The Managing Director will present each completed “Grant Application” to the SF Board of Directors. The Board of Directors will issue final approvals or declines for all grants. (Note: see the attached schedule for a listing of the members of the Board of Directors.) Grants must be approved by a majority of the Board. Approval may be obtained verbally with the understanding that “Grant Application” documents must be signed as soon as practically possible.
- The Managing Director will notify the charitable organization of the Board of Director’s decision regarding their grant.

- The Managing Director will be responsible for recording all approved grants on a schedule (which includes the grant date, amount of grant and to whom the grant was made). At each Board of Directors meeting the schedule will be ratified by execution of the attached "Unanimous Written Consent" form. The fully executed "Unanimous Written Consent" will be filed with the corporate records of SF by the Secretary/General Counsel of SF.

Files will be maintained by the Managing Director for each charitable agency, which is funded by our organization. The files will include a copy of the "Grant Application" and all related supporting materials including but not limited to annual reports, operating budgets, 501(c)(3) determination letters, etc.

**Procedures for Acknowledging Donations (Cash and Stock)**

We will comply with the IRS regulations, which require that all donations be acknowledged (via a letter) by our charitable entities. The Managing Director will be responsible for making sure all donations are acknowledged and maintaining copies of acknowledgment letters.



**SEBONACK FOUNDATION, INC.**

**270 South Service Road**

**Suite 45**

**Melville, NY 11747-2399**

**Phone: (631) 622-9401 • Fax: (631) 622-9489**

## **Grant Application**

In order for our foundation to consider making a grant to any organization, please complete the following grant application. It is essential that you answer all questions on this form, and sign the form at the top of page 3. Please print, or type the information requested, and return this form to us along with all requested documentation. You may call our office if you have any questions. Thank you for your cooperation.

1. Legal Name of Organization:	Year Organized:
2. Address of Organization:	
Telephone Number: Fax Number: E-Mail Address: Website URL: EIN #:	
3. Are you a tax exempt organization (required)? Yes ____ No ____	
4. Approximate annual # of people served: _____	
5. Head of Staff: Title: _____ Paid: <input type="checkbox"/> Yes <input type="checkbox"/> No	
6. <u>Organizational Overview</u> . Provide background information on your organization, including its mission, primary groups served, major program types and their geographical reach. (Attach additional sheets as required.)	

7. Project Overview. Please provide a concise description of the project for which you are applying for a grant. Please include the project's purpose, objectives, primary groups to be served and the program's target reach (in terms of # of people served and geographical). Please indicate the dollar amount of the grant sought. (Attach additional sheets as required.)

8. Total operating budget for current year: \$ \_\_\_\_\_

9. Program budget (if you are applying for a program with its own budget)  
\$ \_\_\_\_\_

10. Personnel

# full-time staff: \_\_\_\_\_ # part-time staff: \_\_\_\_\_ # volunteers: \_\_\_\_\_

11. Finances (Please check off all sources of funding and their approximate % to the total):

<input type="checkbox"/> Activities/Events	_____ %	<input type="checkbox"/> State Government	_____ %
<input type="checkbox"/> Church Synagogue	_____ %	<input type="checkbox"/> Foundations	_____ %
<input type="checkbox"/> Local Government	_____ %	<input type="checkbox"/> Individuals	_____ %
<input type="checkbox"/> Corporations	_____ %	<input type="checkbox"/> Federal Government	_____ %
<input type="checkbox"/> Direct Mail	_____ %	<input type="checkbox"/> Investments	_____ %
<input type="checkbox"/> Earned Income	_____ %	<input type="checkbox"/> Other (please specify)	_____ %

12. Include a copy of your most recent Form 990 and three years audited financial statements. If not available, please explain why.

13. Include a copy of your 501(c)3 non-profit status exemption letter from the Internal Revenue Service. If not available, please explain why.

14. Please list the names of the members of your Governing Board and their affiliations. Indicate any member(s) of your Executive Committee with an (E) in parentheses after the name(s). Indicate paid staff members serving on your Board with a (P) in parentheses after the name(s).

**15. Certification:**

I certify that the information furnished is true, accurate and complete in all material respects:

---

Signature of Board Member or Officer

---

Title

---

Date

***Do not write in this space.***

- Mission
- 501(c)(3)
- 990 and 3 years financials
- Board of Directors

Reviewed by:

Managing Director \_\_\_\_\_

Date \_\_\_\_\_

Comments \_\_\_\_\_

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***Do not write in this space.*****Board of Directors Approval:**

1.) Name \_\_\_\_\_

Date: \_\_\_\_\_

2.) Name \_\_\_\_\_

Date: \_\_\_\_\_

If applicable:

3.) Name \_\_\_\_\_

Date: \_\_\_\_\_