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**Return of Private Foundation** 

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

▶ Do not enter Social Security numbers on this form as it may be made public

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www irs gov/form990pf For calendar year 2013 or tax year beginning . and ending Name of foundation A Employer identification number THE VON DER HEYDEN FAMILY FOUNDATION 06-1410915 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number 25 CENTRAL PARK WEST 212-697-6900 24K City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here NEW YORK, NY 10023 G Check all that apply. Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 4,132,381. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (a) Revenue and expenses per books (c) Adjusted net (d) Disbursements (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) income ıncome 355,454. N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 69. STATEMENT 123,826 STATEMENT 123,826. Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 105,174 STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 164,438. 134,378. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 79. 79. STATEMENT 11 Other income 584,602 258,352. 12 Total Add lines 1 through 11 Ö. 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 6,227. 6,227. STMT 5 0. 16a Legal fees 2,900. 1,450. STMT 6 1,450. **b** Accounting fees c Other professional fees Operating and Administrative 17 Interest STMT 7 3,902. 0. <u>o .</u> 18 Taxes 19 Depreciation and depletion Ō 20 Occupancy <del>201</del>4 <del>NOV 17</del> 21 Travel, conferences, and meetings 22 Printing and publications STMT 8 1,769. 508. 0. 23 Other expenses <u>JGD</u> 24 Total operating and administrative 14,798 1,958 expenses Add lines 13 through 23 7,677. 661,824. 25 Contributions, gifts, grants paid 661,824. 26 Total expenses and disbursements. 676,622 1,958 669,501. Add lines 24 and 25 27 Subtract line 26 from line 12: -92,020 & Excess of revenue over expenses and disbursements 256,394

LHA For Paperwork Reduction Act Notice, see instructions.

N/A

Form 990-PF (2013)

b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-)

PROCESSED NOV I 8 20%

THE VON DER HEYDEN FAMILY FOUNDATION 06-1410915 Page 2 Part II Balance Sheets Attached schedules and amounts in the description Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 24,126. 51,655 51,655. 1 Cash - non-interest-bearing 10,134. 30,100. 30,100. 2 Savings and temporary cash investments 3 Accounts receivable ► Less allowance for doubtful accounts 4 Pledges receivable ► Less allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U S and state government obligations 2,292,935. 4,050,626. 2,223,608. STMT 10 b Investments - corporate stock c Investments - corporate bonds 11 Investments land, buildings, and equipment basis Less accumulated degreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 4,132,381. 2,374,690. 2,257,868. instructions. Also, see page 1, item 1) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 0. 23 Total liabilities (add lines 17 through 22) ightharpoonup XFoundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31 Fund Balances 2,374,690. 2,257,868. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Net Assets or 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 2,257,868. 2,374,690. 30 Total net assets or fund balances 2,374,690 2,257,868. 31 Total liabilities and net assets/fund balances 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	2,257,868.
2	Enter amount from Part I, line 27a	2	-92,020.
3	Other increases not included in line 2 (itemize)  SEE STATEMENT 9	3	208,842.
4	Add lines 1, 2, and 3	4	2,374,690.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,374,690.

323511 10-10-13

Part IV Capital Gains	and Losses for	Tax on Investmen	t Income						
(a) List and descr 2-story brick wa	rbe the kind(s) of proprehense; or common	perty sold (e.g., real estate, stock, 200 shs MLC Co.)		1 . b	low ac - Purc - Dona	cquired hase ation		acquired ay, yr.)	(d) Date sold (mo., day, yr)
1a 750 SHS INTL B						D			04/18/13
b BLUE ORCHID SE	LECT SPV T	RUST		<u> </u>		D			12/31/13
d				ļ					
<u>e</u>			<del></del>	<u> </u>					
	(f) Depreciation	allowed (n) Co	ist or other basis	<u> </u>			(h) G	aın or (loss	· <u> </u>
(e) Gross sales price	(or allowab		expense of sale					s (f) minus	
a 159,996.		-	30,06	0.					129,936.
b 4,442.									4,442.
С									
d									
Complete only for assets showin	n gain in column (h) a	ind owned by the foundation	n on 12/31/69			41	Count (C	ol (h) gain	minus
- Complete only for assets showing	(j) Adjusted t		xcess of col. (i)				(k), but r	not less tha	า -0-) <b>or</b>
(i) F M V as of 12/31/69	as of 12/31		r col. (j), if any				Losses	(from col. (	h))
a						-			129,936.
b									4,442.
С									
_d_									
e				_		ſ			
2 Capital gain net income or (net ca		ain, also enter in Part I, line loss), enter -0- in Part I, line		}	2				134,378.
3 Net short-term capital gain or (los	•	ns 1222(5) and (6):		٦					
If gain, also enter in Part I, line 8, of If (loss), enter -0- in Part I, line 8	column (c).			}	,			N/A	
Part V   Qualification U	nder Section 4	940(e) for Reduce	Tax on Net	Inv	estn	nent Inc	ome	N/A	<del></del>
(For optional use by domestic private		<del>```</del>							
					,				
If section 4940(d)(2) applies, leave th	is part diank								
Was the foundation liable for the sect		, ,		od?					Yes X No
If "Yes," the foundation does not quali 1 Enter the appropriate amount in e	<i>,</i>	<u> </u>		ntrioc					
(a)	acii colullii loi eacii y	(b)	I I I I I I I I I I I I I I I I I I I	(c)			$\overline{}$		(d)
Base periód years Calendar year (or tax year beginnir	ng in) Adjusted	qualifying distributions	Net value of no	nchar	ıtable-	use assets			oùtión ratio ided by col. (c))
2012	.9)	465,598.		3	, 56	8,877		( (-)	.130461
2011		384,697.				3,319			.123169
2010		287,870.				7,739		•	.117128
2009		803,817.				3,724			.458349
2008		684,894.	<u> </u>	_2	,46	6,546	<u>.</u>		.277673
7. Total of line 1. column (d)									1.106780
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the 5</li></ul>	-vear base period - di	uide the total on line 2 hy 5	or by the number	of vo	are		2	-	1.100/00
the foundation has been in existen	-	•	, or by the number	OI ye	113		3		.221356
4 Enter the net value of noncharitab	e-use assets for 2013	from Part X, line 5					4		3,976,918.
5 Multiply line 4 by line 3							5		880,315.
									0 564
6 Enter 1% of net investment incom	e (1% of Part I, line 2)	7b)					6		2,564.
7 Add lines 5 and 6							,		882,879.
And tilles Jallu 0							7		004,013.
8 Enter qualifying distributions from	Part XII, line 4						8		669,501.
If fine 8 is equal to or greater than See the Part VI instructions.	line 7, check the box	in Part VI, line 1b, and com	plete that part using	g a 1%	% tax r	ate.			
GGG THE FAIT VI HISTI UCTIONS.		<del> </del>							

Form 990-PF (2013) THE VON DER HEYDEN FAMILY FOUNDATION 06-141			Page 4
Part VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ıctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ☐ and enter 1%		5,1	28.
of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			_
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3 Add lines 1 and 2		5,1	28.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		_ 1	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5,1	28.
6 Credits/Payments.			
a 2013 estimated tax payments and 2012 overpayment credited to 2013  6a 3,792.			
b Exempt foreign organizations - tax withheld at source			
c Tax paid with application for extension of time to file (Form 8868)  6c 5,000.			
d Backup withholding erroneously withheld  7. Takk and the specific Addition of Settle and Set		0 7	
7 Total credits and payments. Add lines 6a through 6d 7		0,/	92.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  9 10 Overseyment 16 lines 7 or more than the total of lines 5 and 9 or the total of lines 6 and 9 or the		2 6	<u>- 1</u>
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 Enter the amount of line 10 to be Credited to 2014 estimated tax   3,664 Refunded   11		3,0	0.
11 Enter the amount of line 10 to be Credited to 2014 estimated tax ► 3,664. Refunded ► 11 Part VII-A Statements Regarding Activities		-	0.
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<b></b>	Ves	No
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b	_	X
If the answer is "Yes" to $_{1a}$ or $_{1b}$ , attach a detailed description of the activities and copies of any materials published or			+
distributed by the foundation in connection with the activities			
c Did the foundation file Form 1120-POL for this year?	1c		x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			<del></del>
(1) On the foundation $\blacktriangleright$ \$ 0 • (2) On foundation managers. $\blacktriangleright$ \$ 0 •			1
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
managers. ► \$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
If "Yes," attach a detailed description of the activities			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
If "Yes," attach the statement required by General Instruction T.			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	] 1		
<ul><li>By language in the governing instrument, or</li></ul>			
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	1 1		
remain in the governing instrument?	6	_ <u>X</u>	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			
CT			
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)	_,	v	
of each state as required by General Instruction G? If "No," attach explanation	8b	_X_	<del> </del>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			- V
year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	9		X
	10 m <b>990</b>	DE	

form 990-PF (2013) THE VON DER HEYDEN FAMIL			06 - 14109	15	Page 6
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?			es 🗶 No	1	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	- 1	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			i	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for			
the prevention of cruelty to children or animals?	. , ,		es X No		ļ
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i			F	
section 53 4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined		- 1	
expenditure responsibility for the grant?			es 🔲 No	ŀ	
If "Yes," attach the statement required by Regulations section 53 494		.,		ł	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• /				
a personal benefit contract?	pay premiums on		es X No	ł	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arcanal hanafit contract?	I'		6b	l x
	ersonar benem contract?		<del> </del>	00	<del>  ^</del>
If "Yes" to 6b, file Form 8870	haltar transaction O		es X No	ľ	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		1		7b	
b If "Yes," did the foundation receive any proceeds or have any net income attributed in the foundation About Officers, Directors, Trust				70	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Higni	y		
1 List all officers, directors, trustees, foundation managers and their	compensation	<del> </del>	•		
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(0)	Evnense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	employee benefit plans and deferred compensation	accoi	Expense unt, other
	to position	`enter`-0-)	compensation	allo	wances
OPP CENTRAL 11					•
SEE STATEMENT 11		0.	0.		<u> </u>
		ļ			
		-			
			İ		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e)	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation		wances
NONE					
		<del> </del>			
· · · · · · · · · · · · · · · · · · ·					
		-	<del> </del>		
* A harmony of other employees and eye- #50 000	L <u> </u>	<u> </u>		L	
Total number of other employees paid over \$50,000	· <del> · · · · · · · · · · · · · · · · ·</del>	<del> </del>	<u> </u>	000 -	0
			Form	990-F	<b>PF</b> (2013)

F	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	ns, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а		1a	3,946,988.
b	Average of monthly cash balances	1b	3,946,988.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	4,037,480.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,037,480.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	60,562.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,976,918.
6	Minimum investment return Enter 5% of line 5	6	198,846.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part )	d certai	n
1	Minimum investment return from Part X, line 6	1	198,846.
2a	Tax on investment income for 2013 from Part VI, line 5 2a 5, 128.		
b			
C	A	2c	5,128.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,128. 193,718.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	193,718.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	193,718.
_	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		660 501
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	669,501.
	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
	Suitability test (prior IRS approval required)	3a	
b	The second secon	3b	550 501
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	669,501.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	669,501.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies	for the section

Page 9 Part XIII Undistributed Income (see instructions) (b) (c) (d) 2012 2013 Corpus Years prior to 2012 1 Distributable amount for 2013 from Part XI, 193,718. line 7 2 Undistributed income, if any, as of the end of 2013 0 a Enter amount for 2012 only b Total for prior years: 0. 3 Excess distributions carryover, if any, to 2013: a From 2008 563,263. **b** From 2009 717,397. 167,505. c From 2010 232,222 dFrom 2011 290,943. e From 2012 1,971,330 f Total of lines 3a through e 4 Qualifying distributions for 2013 from 669,501. Part XII, line 4: ► \$ 0. a Applied to 2012, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) 0. c Treated as distributions out of corpus 0. (Election required - see instructions) 193,718. d Applied to 2013 distributable amount 475,783 e Remaining amount distributed out of corpus 0. 0. 5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a) ) 6 Enter the net total of each column as indicated below: 2,447,113 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **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 0 assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2012. Subtract line 0. 4a from line 2a Taxable amount - see instr f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2014 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 0 section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2008 563,263. not applied on line 5 or line 7 Excess distributions carryover to 2014. 1,883,850. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 717,397. a Excess from 2009 167,505. 232,222. b Excess from 2010

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c Excess from 2011

dExcess from 2012

e Excess from 2013

290,943.

475,783.

Form 990-PF (2013) THE VON Part XIV   Private Operating F	DER HEYDEN			N/A 06-14	10915 Page 10
	_ <del></del>		A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective for		-	▶	<del> </del>	
<b>b</b> Check box to indicate whether the found		g foundation described i		4942(j)(3) or49	42(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0010	Prior 3 years	1 (1) 0040	(a) Tatal
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					
<b>b</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 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)(iii)					
(3) Largest amount of support from	-				
an exempt organization					
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5.000 or mo	ore in assets
at any time during t					
1 Information Regarding Foundation					
a List any managers of the foundation wh	o have contributed more t		ributions received by th	e foundation before the clos	se of any tax
year (but only if they have contributed n		ection 507(u)(2).)			
KARL M. VON DER HEYD					
b List any managers of the foundation wh other entity) of which the foundation has			or an equally large port	ion of the ownership of a pa	artnership or
NONE					
2 Information Regarding Contribute Check here ► X if the foundation of				not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of the	he person to whom apple	cations should be addre	essed:	
<b>b</b> The form in which applications should be	e submitted and informat	ion and materials they sh	ould include.		
c Any submission deadlines					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields,	kınds of institutions, or	other factors	
				·	

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		<u> </u>
a Paid during the year				
		F01/G1/21		
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST 79TH ST.	NONE	501(C)(3)	CHARITABLE PURPOSE	
NEW YORK, NY 10024				25
CARNEGIE HALL	none	501(C)(3)	CHARITABLE PURPOSE	
881 SEVENTH AVE				
NEW YORK, NY 10019	<del></del>			20,00
CENTRAL PARK CONSERVANCY	NONE	501(C)(3)	CHARITABLE PURPOSE	
14 EAST 60TH STREET				
NEW YORK, NY 10022		-		1,00
COMMUNITY SCHOOL	NONE	501(C)(3)	CHARITABLE PURPOSE	
P.O. BOX 2118				10.00
SUN VALLEY, ID 83353				10,00
COMPANY OF FOOLS	NONE	501(C)(3)	CHARITABLE PURPOSE	
P.O. BOX 329				
HAILEY, ID 83333				10,00
Total SEE CC  b Approved for future payment	ONTINUATION SHE	ET(S)	<b>▶</b> 3a	661,82
270277	;			
NONE				
			-	
Total			<b>▶</b> 3b	

Form 990-PF (2013) THE VON DER HE	YDEN FAM	ILY FOUND	ATION	06-1	.41 <u>0915 Page 1</u>
Part XVI-A Analysis of Income-Produ	ıcing Activiti	es			
Enter gross amounts unless otherwise indicated.	Unrelated	business income		y section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue.	code	Amount	sion code	Amount	function income
a					
b					
c					
d					
е					
f					_
g Fees and contracts from government agencies				,	
2 Membership dues and assessments					
3 Interest on savings and temporary cash					<del></del>
investments			14	69.	
4 Dividends and interest from securities			14	123,826.	
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			1 1		
7 Other investment income			01	79.	
8 Gain or (loss) from sales of assets other					
than inventory			18	105,174.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	,			_	
a					
b					
c					
ď					
e					
12 Subtotal. Add columns (b), (d), and (e)			0.	229,148.	0
13 Total Add line 12, columns (b), (d), and (e)				13	229,148
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities  Line No Explain below how each activity for which income					Nichment of
the foundation's exempt purposes (other than				importantly to the accomp	manification
		<u>-</u>		· <del>-</del> ·	
			-		
					-

323621 10-10-13

Form 990-P	/II Information Re	egarding Transfers	N FAMILY FOUNDAT			je 13
		rectly engage in any of the fo	llowing with any other organization		of Yes	No
			on 527, relating to political organiz	ations?		
	fers from the reporting found	ation to a noncharitable exem	pt organization of			
(1) C	Sash				1a(1)	X
(2) 0	Other assets				1a(2)	Х
<b>b</b> Other	transactions:					
(1) S	Sales of assets to a noncharita	ble exempt organization			1b(1)	X
( <b>2</b> ) P	urchases of assets from a no	ncharitable exempt organizat	ion		1b(2)	Х
(3) R	Rental of facilities, equipment,	or other assets			1b(3)	Х
(4) R	Reimbursement arrangements				1b(4)	Х
(5) L	oans or loan guarantees				1b(5)	X
(6) P	erformance of services or me	embership or fundraising soli	citations		1b(6)	Х
c Sharır	ng of facilities, equipment, ma	uling lists, other assets, or pa	ıd employees		1c	Х
<b>d</b> If the	answer to any of the above is	"Yes," complete the following	g schedule Column (b) should alwa	ays show the fair market valu	ie of the goods, other assets,	
or ser	vices given by the reporting f	oundation. If the foundation r	eceived less than fair market value	in any transaction or sharing	g arrangement, show in	
colum	nn (d) the value of the goods,	other assets, or services rece	eived.			
(a)Line no	(b) Amount involved	(c) Name of noncha	ritable exempt organization	(d) Description of transfers	, transactions, and sharing arrangement	ts
	·	N,	/A			
				' <del>-</del>		
				-		
ın sec	tion 501(c) of the Code (othe	r than section 501(c)(3)) or i	o, one or more tax-exempt organiza n section 527?	itions described	Yes X	No
U II Yes	s," complete the following sch (a) Name of org		(b) Type of organization	(a) Decerir	otion of relationship	
	N/A	<u></u>	(b) Type of Organization	(c) Descrip	Juon of relationship	
		<del></del>		.=		
		<del></del>				

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge 11/4/14 TRUSTEE Signature of officer or trustee

May the IRS discuss this return with the preparer shown below (see instr.)?

X Yes N

	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN
	SUSAN TEICHER, CPA,	A	11.1	self- employed	
Paid	CFP, PARTNER	aronare	11/10/19		P00226488
Preparer	Firm's name ► BAKER TILLY	VIRCHOW KRAUSE, LL	P	Firm's EIN ► 3	9-0859910
Use Only					
	Firm's address ► ONE PENN PL	AZA - SUITE 3000	<del></del>		
	NEW YORK, N	Y 10119		Phone no (2	12)697-6900

Date

Form **990-PF** (2013)

Title

# Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

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

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990.

OMB No 1545-0047

**2013** 

Employer identification number

06 - 1410915THE VON DER HEYDEN FAMILY FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990-EZ 」 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III 🔲 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

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

Name of organization

Employer identification number

#### THE VON DER HEYDEN FAMILY FOUNDATION

06-1410915

Part I	Contributors (see instructions) Use duplicate copies of Part I if ad	Iditional space is needed	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	KARL M. VON DER HEYDEN  25 CENTRAL PARK WEST, APT. 24K  NEW YORK, NY 10023	\$\$ <u>98,343.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	KARL M. VON DER HEYDEN  25 CENTRAL PARK WEST, APT. 24K  NEW YORK, NY 10023	\$ <u>123,675</u> .	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	KARL M. VON DER HEYDEN  25 CENTRAL PARK WEST, APT. 24K  NEW YORK, NY 10023	\$133,436.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
323452 10-24		\$	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2013)

Employer identification number

## THE VON DER HEYDEN FAMILY FOUNDATION

06-1410915

art II Non	cash Property (see instructions) Use duplicate copies of Parl	II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1 1,1	87 SHS OF PEPSICO INC.	—	
		s98,343.	06/10/13
(a) No. From	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2 1,5	00 SHS OF PEPSICO INC.	_	
		s123,675.	12/26/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3 125	SHS BLUE ORCHID SELECT SPV TRUST	_	
		s133,436.	12/27/13
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		_   _	
453 10-24-13		`	n 990, 990-EZ, or 990-PF) (

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Page 4 Name of organization Employer identification number THE VON DER HEYDEN FAMILY FOUNDATION 06-1410915 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

3 Grants and Contributions Paid During the				<del></del>
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
COMMUNITY LIBRARY	NONE	501(C)(3)	CHARITABLE PURPOSE	
415 SPRUCE AVENUE				10
KETCHUM, ID 83340				
DUKE UNIVERSITY	NONE	501(C)(3)	CHARITABLE PURPOSE	
BOX 90581				
DURHAM, NC 27708				326,54
FIGURE SKATING IN HARLEM	NONE	501(C)(3)	CHARITABLE PURPOSE	
156 5TH AVE, ST 1100				1 00
NEW YORK, NY 10010				1,000
FRIENDS OF THE JEWISH MUSEUM BERLIN	NONE	501(C)(3)	CHARITABLE PURPOSE	
227 RIDGEVIEW ROAD				
PRINCETON, NJ 08540				1,00
				1
FRIENDS OF THE SAWTOOTH AVALANCHE	NONE	501(C)(3)	CHARITABLE PURPOSE	
20 BOX 2669				
KETCHUM, ID 83340				51
NATIONAL OUTDOOR LEADERSHIP SCHOOL	NONE	501(C)(3)	CHARITABLE PURPOSE	
284 LINCOLN ST LANDER, WY 82520				3,00
DANDER, W1 02320				3,00
OREGON COLLEGE OF ART AND CRAFT	NONE	501(C)(3)	CHARITABLE PURPOSE	
3245 SW BARNES RD				50.
PORTLAND, OR 97225		<u> </u>		50
NEW YORK PUBLIC RADIO	NONE	501(C)(3)	CHARITABLE PURPOSE	
160 VARICK ST.				
NEW YORK, NY 10013			-	50
OREGON EPISCOPAL SCHOOL	NONE	501(C)(3)	CHARITABLE PURPOSE	
6300 SW NICOL ROAD				
PORTLAND, OR 97223				31,60
DODMI AND ARM MICRITY	NONE	E01(G)(2)	OHADIMADI E DVDDOGE	
PORTLAND ART MUSEUM 1219 SW PARK AVENUE	NONE	501(C)(3)	CHARITABLE PURPOSE	
PORTLAND, OR 97205			<u> </u>	10,00
Total from continuation sheets				620,57

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	<del></del>			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
SUN VALLEY BALLET FOUNDATION	NONE	501(C)(3)	CHARITABLE PURPOSE	
P0 BOX 274				
KETCHUM, ID 83340				1,700.
SUN VALLEY SKI EDUCATION FOUNDATION	NONE	501(C)(3)	CHARITABLE PURPOSE	
P0 B0X 203				1 100
SUN VALLEY, ID 83353				1,100.
THE METROPOLITAN MUSEUM OF ART	NONE	501(C)(3)	CHARITABLE PURPOSE	
1000 FIFTH AVENUE NEW YORK, NY 10028				8,304.
				0,304.
_				
THE METROPOLITAN OPERA 70 LINCOLN CENTER PLAZA	NONE	501(C)(3)	CHARITABLE PURPOSE	
NEW YORK, NY 10018				47,900.
THE MUSEUM OF MODERN ART	NONE	501(C)(3)	CHYDIMYDI'E DIIDDOGE	
11 WEST 53 STREET	NONE	501(0)(3)	CHARITABLE PURPOSE	
NEW YORK, NY 10019				2,515.
THE NEW YORK BOTANICAL GARDEN	NONE	501(C)(3)	CHARITABLE PURPOSE	
2900 SOUTHERN BOULEVARD				
BRONX, NY 10458		-		200.
WILDLIFE CONSERVATION SOCIETY	NONE	501(C)(3)	CHARITABLE PURPOSE	
2900 SOUTHERN BOULEVARD				150
BRONX, NY 10460				159.
WOOD RIVER COMMUNITY YMCA PO BOX 6801	NONE	501(C)(3)	CHARITABLE PURPOSE	
KETCHUM, ID 83340				16,000.
YMCA OF GREATER NEW YORK	NONE	501(0)(3)	CUADIMADI E DIIDAGE	
333 SEVENTH AVENUE	NONE	501(C)(3)	CHARITABLE PURPOSE	
NEW YORK, NY 10001		·		160,000.
ENVIRONMENTAL RESOURCE CENTER	NONE	501(C)(3)	CHARITABLE PURPOSE	
PO BOX 819				
KETCHUM, ID 83340				6,500.
Total from continuation sheets				<u> </u>

06-1410915

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BLAIN COUNTY RECREATION DISTRICT	NONE	501(C)(3)	CHARITABLE PURPOSE	
1050 FOX ACRES RD HAILEY, ID 83333				500
		<u> </u>		
ST. LUKES WOOD RIVER	NONE	501(C)(3)	CHARITABLE PURPOSE	
PO BOX 7005	NONE		CHARTABLE TORTOGE	
KETCHUM, ID 83340				100
THE ADVOCATES	NONE	501(C)(3)	CHARITABLE PURPOSE	
PO BOX 3216 HAILEY ID 83333				100
HATLET, 1D 03333				100
CIN VALLEY CIDOUED CYMDUONY	NONE	E01(C)(3)	CUADIMADI E DUDDOCE	
SUN VALLEY SUMMER SYMPHONY PO BOX 1914	NONE	501(C)(3)	CHARITABLE PURPOSE	
SUN VALLEY, ID 83353				100
SUN VALLEY ADAPTIVE SPORTS	NONE	501(C)(3)	CHARITABLE PURPOSE	
120 2ND AVE. STE 206				100
KETCHUM, ID 83340	-		-	100
WILL GALMON GENERA	TOVE	E01/01/21	CHARLES DE DURDOGE	
WILD SALMON CENTER 721 NW 9TH AVE #300	NONE	501(C)(3)	CHARITABLE PURPOSE	
PORTLAND, OR 97209				500
BETTER HOUSING COALITION	NONE	501(C)(3)	CHARITABLE PURPOSE	
23 W BROAD ST STE 100 RICHMOND, VA 23220				500
20220				
			<u> </u>	<u> </u>

	90-PF G	AIN OR (LO	SS) F	FROM SALE	OF A	SSETS		STA	TEMENT	1
DESCRIE	(A) PTION OF PROPERTY	•				ANNER QUIRED	DA ACQU		DATE S	OLE
750 SHS	S INTL BUSINESS M	ACHINES			DO	NATED			04/18	/13
	(B)	(C)	_	(D)		(E)			(F)	
	GROSS SALES PRICE	VALUE AT		EXPENSE SALE	OF	DEPRE	c.	GAIN	OR LOS	S
	159,996.	59,	264.		0.		0.		100,7	32.
DESCRIE	(A) PTION OF PROPERTY	•				ANNER QUIRED	DA' ACQU	TE IRED	DATE SO	OLI
BLUE OF	RCHID SELECT SPV	TRUST			DO	NATED			12/31	/13
	(B) GROSS	(C) VALUE A		(D) EXPE <b>N</b> SE	OF	(E)			(F)	
	SALES PRICE	TIME OF A	CQ.	SALE		DEPRE	c. 	GAIN	OR LOS	3 ——
	4,442.		0.		0.		0.		4,4	42.
CAPITAI	GAINS DIVIDENDS	FROM PART	IV							0.
TOTAL T	O FORM 990-PF, F	ART I, LIN	E 6A				- -		105,1	74.
FORM 99	90-PF INTEREST C	N SAVINGS A	T DNA	EMPORARY	CASH	INVEST	MENTS	STA	TEMENT	2
				(A) EVENUE BOOKS	NET	(B) INVEST			(C) DJUSTED T INCOM	E
SOURCE										
BLUE OR				326. -280. 4. 19.			326. 280. 4. 19.			

FORM 990-PF I	DIVIDENDS	AND II	NTERES	T FROM SE	CUR	TIES S	STATEMENT	3
SOURCE	GROSS AMOUNT	GA:	ITAL INS DENDS	(A) REVENU PER BOO		(B) NET INVEST- MENT INCOME		
BLUE ORCHID SELECT SPV TRUST MERRILL LYNCH	67. 123,759.		0.	123,7	67. 59.	67. 123,759.		
TO PART I, LINE 4	123,826.	· <del></del>	0.	123,8	26.	123,826.		
FORM 990-PF		ОТН	ER INC	OME		S	STATEMENT	4
DESCRIPTION				(A) EVENUE R BOOKS		(B) ET INVEST- ENT INCOME	(C) ADJUSTE NET INCO	
BLUE ORCHID SELECT SPV	TRUST			79	•	79.	· · · · · ·	
TOTAL TO FORM 990-PF,	PART I,	LINE 1	1	79	•	79.		
FORM 990-PF	<del></del>	Ll	EGAL F	EES		S	STATEMENT	5
DESCRIPTION				(B) ET INVEST ENT INCOM		(C) ADJUSTED NET INCOME		
WITHERS BERGMAN LLC		6,2	227.		0.		6,2	27.
TO FM 990-PF, PG 1, LN	16A <u>—</u>	6,2	227.		0.		6,2	27.
FORM 990-PF	<del></del>	ACCOU	JNTING	FEES		S	STATEMENT	6
DESCRIPTION		(A) EXPENSI PER BOO		(B) ET INVEST ENT INCOM		(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
BAKER TILLY VIRCHOW KR	AUSE,	2,9	900.	1,45	0.		1,4	50.
TO FORM 990-PF, PG 1,	LN 16B	2,9	900.	1,45	0.		1,4	50.
		<del></del>		·	=		= =====================================	

FORM 990-PF	TAX	ES	<u>.                                    </u>	STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FEDERAL EXCISE TAX FOREIGN TAXES PAID (BLUE ORCHID SELECT SPV)	3,890.	0.			0.
TO FORM 990-PF, PG 1, LN 18	3,902.	0.			0.
FORM 990-PF	OTHER E	XPENSES	(	STATEMENT	8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
NON-DEDUCTIBLE PORTION OF CHARITABLE CONTRIBUTIONS BANK FEES BLUE ORCHID SELECT SPV TRUST	1,181.	0.			0.
EXPENSES	508.	508.			0.
TO FORM 990-PF, PG 1, LN 23	1,769.	508.			0.
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND BA	ALANCES S	STATEMENT	9
DESCRIPTION				AMOUNT	
ADJUSTMENT BOOK/TAX DIFFERENC CORP. ADJUSTMENT BOOK/TAX DIFFERENC				43,7	29.
CORP. ADJUSTMENT BOOK/TAX DIFFERENCE MACY'S INC.	E ON CONTRI	BUTON OF 4,800	) SHS	83,09 82,09	
TOTAL TO FORM 990-PF, PART II	I, LINE 3			208,84	42.

FORM 990-PF	CORPORATE STOCK		STATE	MENT 10
DESCRIPTION		BOOK VALUE		MARKET LUE
13,550 SHS ALTRIA GROUP INC 9,047 SHS INTEL CORP. 1,659 SHS INTL BUSINESS MACHINES 7,200 SHS MACY'S INC. 9,880 SHS PHILIP MORRIS INTL INC 15,687 SHS PEPSICO INC. 3,000 SHS KIMBERLY CLARK 125 SHS BLUE ORCHID SELECT SPV T		73,726 219,573 131,092 213,120 161,281 1,100,663 255,930 137,550	1,	520,185. 234,815. 311,179. 384,480. 860,844. 301,080. 313,380. 124,663.
TOTAL TO FORM 990-PF, PART II, L	INE 10B	2,292,935	4,	050,626.
	ST OF OFFICERS, D D FOUNDATION MANA		STATE	MENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- B	MPLOYEE SEN PLAN : CONTRIB .	
KARL M. VON DER HEYDEN 25 CENTRAL PARK WEST, APT 24K NEW YORK, NY 10023	TRUSTEE 1.50	0.	0.	0.
MARY ELLEN VON DER HEYDEN 25 CENTRAL PARK WEST, APT 24K NEW YORK, NY 10023	TRUSTEE 1.50	0.	0.	0.
ELLEN M. GILLESPIE 25 CENTRAL PARK WEST, APT 24K NEW YORK, NY 10023	TRUSTEE 0.25	0.	0.	0.
ERIC M. VON DER HEYDEN 25 CENTRAL PARK WEST, APT 24K NEW YORK, NY 10023	TRUSTEE 0.25	0.	0.	0.
D. JAMES GILLESPIE 25 CENTRAL PARK WEST, APT 24K NEW YORK, NY 10023	TRUSTEE 0.25	0.	0.	0.
HEIKE VON DER HEYDEN 25 CENTRAL PARK WEST, APT 24K NEW YORK, NY 10023	TRUSTEE 0.25	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

24 STATEMENT(S) 10, 11 10521110 757467 87414.87413 2013.04010 THE VON DER HEYDEN FAMILY F 87414\_81

Form **8868** (Rev January 2014)

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.

▶ Information about Form 8868 and its instructions is at www irs gov/form8868 ·

OMB No 1545-1709

<ul><li>If yo</li></ul>	u are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			ightharpoonup	
• If yo	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of t	this form)			
Do not	complete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868.		
	onic filing <sub>(e-file)</sub> . You can electronically file Form 8868 if					corporation	
	d to file Form 990 T), or an additional (not automatic) 3-mo						
of time	to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers /	Associated With	n Certain	
	al Benefit Contracts, which must be sent to the IRS in page	•					
	vw irs gov/efile and click on e-file for Charities & Nonprofits		,				
Part	I Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded)			
A corp	pration required to file Form 990-T and requesting an auto					_	
Part I c	•						
	er corporations (including 1120-C filers), partnerships, REN	IICs. and t	rusts must use Form 7004 to reques	t an exten	ision of time		
	ncome tax returns			_	er's identifying	number	
Туре о	r Name of exempt organization or other filer, see instru	ictions			r identification r		
print							
pinic	THE VON DER HEYDEN FAMILY	FOUND:	ATTON		06-1410	915	
File by th	• 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		· · · · · · · · · · · · · · · · · · ·	Social so	curity number (		
due date filing you			tions	Social Se	curity number (	33N)	
return Se							
	NEW YORK, NY 10023	oreign auc	iress, see iristructions				
	NEW TORRY, NT 10025				<del>-</del>		
Entor #1	as Datum and for the vature that this application is far (file		to application for each return)			0 4	
Entert	ne Return code for the return that this application is for (file	e a separa	te application for each return)				
Annles		D-4	Aumlinakina			I notice of	
Applic	ation	Return	Application			Return	
Is For	00 5 000 57	Code 01	Is For	Code			
	90 or Form 990-EZ	Form 990-T (corporation)		<del></del>	07		
Form 9		02	Form 1041-A		<del></del>	08	
	720 (ındıvıdual)	03	Form 4720 (other than individual)			09	
Form 9		04	Form 5227			10	
	90-T (sec 401(a) or 408(a) trust)	05	Form 6069	<del></del>		11	
Form 9	90-T (trust other than above)	06	Form 8870			12	
	KARL VON DER H		1	0000			
	books are in the care of $\triangleright$ 25 CENTRAL PARI	K WES	<del></del>	0023			
	phone No ▶ 212-571-2300		Fax No 🕨		<del></del>	. $\overline{}$	
	e organization does not have an office or place of busines						
• If th	is is for a Group Return, enter the organization's four digit						
box 🕨	If it is for part of the group, check this box	and atta	ich a list with the names and EINs of	f all memb	ers the extensi	on is for	
1 1	request an automatic 3-month (6 months for a corporation						
_		t organiza	tion return for the organization name	ed above	The extension		
18	s for the organization's return for.						
	$\mathbf{X}$ calendar year $2013$ or						
	tax year beginning	, an	d ending				
2 1	the tax year entered in line 1 is for less than 12 months, o	heck reas	on L Initial return L I	Fınal retur	n		
	Change in accounting period						
3a II	this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any				
n	onrefundable credits. See instructions			3a	\$	8,792.	
b 11	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and				
e	stimated tax payments made. Include any prior year overp	payment a	llowed as a credit.	3b	\$	3,792.	
_	alance due. Subtract line 3b from line 3a Include your pa		<del></del>				
	y using EFTPS (Electronic Federal Tax Payment System)	•		3с	\$	5,000.	
	n. If you are going to make an electronic funds withdrawal						
instruc	tions		·		· <del></del> ····-		
LHA 323841 12-31-13	For Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form <b>886</b>	8 (Rev 1-2014)	

Form 8868 (Rev 1-2014)					Page <b>2</b>	
If you are filing for an Additional (Not Automatic) 3-Month Ex	ctension. c	complete only Part II and check this	box		► X	
Note. Only complete Part II if you have already been granted an	•	· ·		8868		
If you are filing for an Automatic 3-Month Extension, complete		•	100 1 01111	0000		
Part II   Additional (Not Automatic) 3-Month E			al (no co	opies ne	eded)	
		<del></del>			r, see instructions	
Type or Name of exempt organization or other filer, see instru	ictions	Enter mer 3			tion number (EIN) or	
print production of other man, see many	20110110.		Linploye	ido/itimod	donnamber (Eliv) or	
File by the THE VON DER HEYDEN FAMILY F	OUNDA	rion		06-1	410915	
due date for Number, street, and room or suite no. If a P.O. box, s			Social se		nber (SSN)	
return See 25 CENTRAL PARK WEST, NO. 2			000.0.00	ou,		
City, town or post office, state, and ZIP code For a f		ress see instructions				
NEW YORK, NY 10023	oroigir add	nose, ese inetractions				
		_				
Enter the Return code for the return that this application is for (fil	e a senara	te application for each return)			0 4	
	o a copara	to application to caon totally				
Application	Return	Application			Return	
Is For	Is For			Code		
Form 990 or Form 990-EZ	Code 01			1		
Form 990-BL	02	Form 1041-A		}	08	
Form 4720'(individual)	03	Form 4720 (other than individual)			09	
Form 990-PF 04 Form 5227				· · · <del>-</del> ·		
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069					10	
Form 990-T (trust other than above)		12				
STOP! Do not complete Part II if you were not already granted	d an autor	Form 8870 natic 3-month extension on a prev	iously file	d Form 8		
KARL VON DER H		······································				
• The books are in the care of ▶ 25 CENTRAL PAR	K WES'	r - NEW YORK, NY 10	0023			
Telephone No ▶ 212-571-2300		Fax No. ▶				
If the organization does not have an office or place of business	s in the Ur					
If this is for a Group Return, enter the organization's four digit			this is fo	r the whole	e group, check this	
. 1	-1	ich a list with the names and EINs of				
4 I request an additional 3-month extension of time until	NOVEM	BER 15, 2014	٠			
5 For calendar year 2013, or other tax year beginning		, and ending	3			
6 If the tax year entered in line 5 is for less than 12 months, or	check reas	on Initial return	Final r	eturn		
Change in accounting period						
7 State in detail why you need the extension						
ADDITIONAL INFORMATION IS REQ	UIRED	TO PREPARE AN ACCU	JRATE	TAX	RETURN.	
	·					
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any				
nonrefundable credits See instructions			8a	\$	8,792.	
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	9, enter an	y refundable credits and estimated				
tax payments made Include any prior year overpayment a	llowed as a	a credit and any amount paid				
previously with Form 8868			8b	\$	8,792.	
c Balance due. Subtract line 8b from line 8a Include your page 1.	ayment wit	h this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System) See instr	uctions		8c	\$	0.	
Signature and Verifica	tion mus	st be completed for Part II o	nly.			
Under penalties of perjury, I declare that I have examined this form, includit is true, correct, and complete, and that I am authorized to prepare this fe	ling accomp orm.	panying schedules and statements, and to	the best o	f my knowle	edge and belief,	
Signature ► Title ►	TRUST	ee	Date	<b>•</b>		
		<del> </del>				

Form 8868 (Rev. 1-2014)