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Return of Private Foundation

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

OMB No 1545-0052

Dep artment of the Treasury Internal Revenue Service

POSTBIARK DATE AUG 13 2018

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

Fo	r caler	ndar year 2013 or tax year beginning		<u>, 2</u> 01	<u>3, and e</u>	ending		, 20
		oundation					er identification numb	er
Sa	maritar	n Hospital School of Nursing Alumni Association Charitab	le Foundation				14-1684557	
		nd street (or P O box number if mail is not delivered to street address)			n/suite	B Telephor	ne number (see instructi	ons)
22.	15 Bur	dett Ave.					518-453-5928	3
		n, state or province, country, and ZIP or foreign postal code				C if exemp	tion application is pend	
Tre	November	v York 12180						g,
			n of a former	oublic	charity	D 1. Foreig	n organizations, check	here ► 🗌
_	011001	☐ Final return ☐ Amended			1		-	
		☐ Address change ☐ Name cha	nge				n organizations meetin here and attach comp	
H	Check	k type of organization: Section 501(c)(3) exempt p	private founda	ation			foundation status was	
\Box		on 4947(a)(1) nonexempt charitable trust Other ta			dation	section 5	i07(b)(1)(A), check here	▶ [_]
-		narket value of all assets at J Accounting method				F If the fou	indation is in a 60-mon	th termination
•		of year (from Part II, col. (c),					ction 507(b)(1)(B), chec	
		6) ► \$ 110,743 (Part I, column (d) must be	e on cash basis	s.)				
P	art I		T					(d) Disbursements
***	GI.C.C.	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue expenses p			investment icome	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	books		} "	COME	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	 		750	心智能性流	多是一个	第三次第二人
	2	Check ► ☐ if the foundation is not required to attach Sch. B	WAS ASSIST	253,22	海,	运引,更为 见于	FOR THE VOICE	14-7 Here
	3	Interest on savings and temporary cash investments	24 0 M + 28 - 21 - 21 M PAGE	457	FITT GENEL SEAR SE	457	WITH CLAIME ALLEY	THE STATE OF THE
	4	Dividends and interest from securities		8823		8823		K-237 EM-5
	1 _		<u> </u>	0023	 -	5023	<u> </u>	19 3 25 18 1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	5a	Gross rents	Barrens and Barrens	1 . T. of	1. E. De	160° 15 4 75 1	18 12 12 18 W	THE STATE OF THE STATE OF
	b	Net rental income or (loss)	[特别] 新江。三、日日至	JG*1,5%	では、からでは をはる 200%に	TERRY BUT TO	THE REST OF THE PARTY OF THE PA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10	791.90 - 496728 - 1 . 17 . 1501	-1317	16.500.42	The Constant of the	THE PARTY OF THE P	12° 1 5 4 7 7
Revenue	b	Gross sales price for all assets on line 6a 25194	THE REPORT OF SECURIOR		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	EEK CLTSWY	But is a marked to the course	The state of the s
ě	7	Capital gain net income (from Part IV, line 2)	TO THE SOUTH	1000	AND TOO	er of the second	动作情况流流性	1. 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<u>u</u>	8	3-1	ALL STATE OF THE S	િંદુ જેવી કરો જોઈક જોઈ	1,2 m, 25	GACA LOC		The second secon
	9	Income modifications		al stoke is	7 791 7		10 A. 38, 03 >> 1 < 380	The second secon
	10a	Gross sales less returns and allowances 6 2 1 2014			12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A TOUR DAYS	Burgara Baran	1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	b	Less. Cost of goods sold	O STATE OF	是中华的	Victoria San	The same of the sa	次。据《中华·蒙古·城市》	Carlotter Forting
	C	Gross profit or (loss) (attach schedule)	<u>E</u>		以及			企业企业 为2000
	11	Other income (attach schedule) OGDEN, UT			 			
	12	Total. Add lines 1 through 11	<u> </u>	7903	 -	9208		35. 1 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
Ś	13	Compensation of officers, directors, trustees, etc.			 		_	ļ
Expenses	14	Other employee salanes and wages			<u> </u>		<u></u>	
ō.	15	Pension plans, employee benefits						
X	16a	Legal fees (attach schedule)			<u> </u>			
ě	b	Accounting fees (attach schedule)		1000				
Зţ	1.c	Other professional fees (attach schedule)	ļ		 			
Definition and Administration	17	Interest						
Ę	18	Taxes (attach schedule) (see instructions)		50	 			
Ξ	19	Depreciation (attach schedule) and depletion			ļ		<u> </u>	- · · · · · · · · · · · · · · · · · · ·
Ad	20	Occupancy	ļ		 			
Q	21	Travel, conferences, and fileguings 014.	ļ. 				 	
an	22	Printing and publications	<u> </u>		L			
ρ	23	Other expenses (attach-schedule)		143	 	95		
₽₩Ē	24	Total operating and administrative expenses.	ł		}			
65.0		Add lines 13 through 23		1193		95		
₽Ğ.	25	Contributions, gifts, grants paid		750	建设数据	想到機能等	中国主流型的"2%	750
97U	26	Total expenses and disbursements. Add lines 24 and 25		1943		95		750
B. C.	27	Subtract line 26 from line 12:	新兴兴等	140 mg	建筑家	经产品的		发行这个一个
1	a	Excess of revenue over expenses and disbursements		5960	虚学是			
الدو	b	Net investment income (if negative, enter -0-)	CONTRACT.	771 Kg		9185	できる。	न्द्रां पूर्वे क्रान्टिङ्क
	С	Adjusted net income (if negative, enter -0-)	的争入方式型企业	Line in	建加热		0	1 2 2 2
For		work Reduction Act Notice, see instructions.	(Cat No	11289X			rm 990-PF (2013)

įΡε	Balance Sheets Attached schedules and amounts in the description column Beginning of year		End o	of year	
42.		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	5683	11255	11255
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶	HINES	BOX SEED OF	STATE OF THE PARTY
		Less: allowance for doubtful accounts ▶		200	1
	4	Pledges receivable ▶	TO THE PARTY OF TH	为是是一种的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人	张文明等中国企业的。
		Less: allowance for doubtful accounts ▶	1	A STATE OF THE STA	Perform & Fr. 1900-may by the
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	}		
	7	Other notes and loans receivable (attach schedule) ▶		STELL STEEL	是實際物產人對於公
	1	Less: allowance for doubtful accounts ▶	HERRY WELL WAS DISHARD TO JAKE	いびかつ 中からははなっている。近年による	TOBELLAND AND AND LAND ON LO
တ္က	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			<u> </u>
Ş	10a	Investments—U.S. and state government obligations (attach schedule)			
`	b	Investments—corporate stock (attach schedule)	23563	26175	24831
l	c	Investments—corporate bonds (attach schedule)	6072	6072	
	11	Investments—land, buildings, and equipment: basis ▶			
	• • • • • • • • • • • • • • • • • • • •	Less: accumulated depreciation (attach schedule)	Car Crosses at 1917 and 1917	LANGUAGE AND	Control to the standard of the Banks on
	10	Investments—mortgage loans		·	
	12 13	Investments—other (attach schedule)	97906	94162	68684
	14	Land, buildings, and equipment: basis ►	大学是" 的一位"的	是不是一种,不是一个。	,一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
	4-	Less: accumulated depreciation (attach schedule) ▶		L	
	15	Other assets (describe >) Total assets (to be completed by all filers—see the		<u> </u>	
	16			455044	440740
		instructions. Also, see page 1, item l)	133224	137664	110743
	17	Accounts payable and accrued expenses			
g	18	Grants payable	<u> </u>		
ij	19	Deferred revenue	<u> </u>	<u></u>	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ä	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►)			
_	23	Other liabilities (describe >) Total liabilities (add lines 17 through 22)	0	0	
တ		FUUI IU AU IU			《李文本》
9		and complete lines 24 through 26 and lines 30 and 31.			THE WAY WAY
a	24	Unrestricted			
Balances	25	Temporarily restricted	11291	11291	
9	26	Permanently restricted	121933	126373	Part of the second
Fun		Foundations that do not follow SFAS 117, check here ▶ □			
Œ.	1	and complete lines 27 through 31.			
Net Assets or	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Š	29	Retained earnings, accumulated income, endowment, or other funds			
۲	30	Total net assets or fund balances (see instructions)	133224	137664	
<u>ड</u>	31	Total liabilities and net assets/fund balances (see			
z		instructions)	133224	137664	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
		I net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (mus	t agree with	
,		of-year figure reported on prior year's return)			133224
9		r amount from Part I, line 27a			5960
3		er increases not included in line 2 (itemize)			0
		lines 1, 2, and 3			139184
5	Door	case on not uncluded in lune 2 (stemize) > prior period adi		5	1520
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b). III	ne 30 6	137664
			· · · · · · · · · · · · · · · · · · ·		101007

Part:	M Capital Gains and	Losses for Tax on Investmen	t Income				rage
`	(a) List and describe the	kind(s) of property sold (e.g., real estate, e; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation		te acquired , day, yr)	(d) Date sold (mo, day, yr)
1a							
b							
C		· · · · · · · · · · · · · · · · · · ·					
<u>d</u>		· · · · · · · · · · · · · · · · · · ·		ļ	ļ		
e				L			l
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			n or (loss) f) minus (g)
<u>a</u> b							
C							
d							
е							
	Complete only for assets show	ring gain in column (h) and owned by t	he foundation	on 12/31/69		(I) Gains (Co	I (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	С		t less than -0-) or rom col (h))
a					ļ		
b							
c							
<u>d</u>							
e							
2	Capital gain net income or (o enter in Pa ter -0- in Pa		2		
3	If gain, also enter in Part I,	or (loss) as defined in sections 12 line 8, column (c) (see instructio	ns). If (loss)	, enter -0- in)	3		
		r Section 4940(e) for Reduce					
Part		ate foundations subject to the sec					
Was th	," the foundation does not q	ection 4942 tax on the distributab jualify under section 4940(e). Do n	ot complete	this part.			☐ Yes ☐ No
1		int in each column for each year;	see the instru		aking ar	ny entries.	(d)
Caler	(a) Base period years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f nonchantable-use a	ssets		(d) Inbution ratio divided by col (c))
	2012	275	0	9	8209		02800
	2011	300	0	10	0074		02997
	2010	400	0	9	9575		04017
	2009	1529			5950		17792
	2008	648	5	10	2440		.06330
	Total of line 1, column (d)					2	.33936
3	•	ition has been in existence if less				3	.06787
4	Enter the net value of nonch	nantable-use assets for 2013 from	Part X, line	5	.	4	105625
5	Multiply line 4 by line 3 .					5	7169
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. _	6	91
7	Add lines 5 and 6				.	7	7260
		s from Part XII, line 4				В	750
	Part VI instructions.	er than line 7, check the box in Pa	irt VI, IINE TD	, and complete t	nat part	. using a 1	⊤ax rate. See the √

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	8-	see ii	nstru	ctio	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)					10 V
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	#22017. X	SPRICEL . "LI	184	Se 457 15%
	here ► □ and enter 1% of Part I, line 27b	545.T	·	4 1720	104	5 1/20
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			SULL PROPERTY OF THE PROPERTY		1 40 M
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				
3	Add lines 1 and 2	3			184	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			184	<u> </u>
6	Credits/Payments:	M	4.35.C	Little Harry	1.59	10 To 0
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a			经合品	X.14	海
b	Exempt foreign organizations—tax withheld at source 6b	100		1		
c	Tax paid with application for extension of time to file (Form 8868) . 6c			7. Y	100 to 100	And the Control of th
d	Backup withholding erroneously withheld 6d		1			
7	Total credits and payments. Add lines 6a through 6d	7	April 1 mg	اعلى ما الله	184	المراجعة
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			184	
10	F	10			07	
11	· · · · · · · · · · · · · · · · · · ·	11				
Part '	VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	or di	d it	4 34	Yes	No
	participate or intervene in any political campaign?			1a		1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos Instructions for the definition)?	ses (see	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any nublished or distributed by the foundation in connection with the activities.	natei	nals		14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4 3 C- 45
C	Did the foundation file Form 1120-POL for this year?			1c		✓
d						
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax im on foundation managers. ▶ \$	pos	ed		4	(1) (1) (1)
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		√
	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, as	rticle			9	要法
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .			3	* \$4.4.4	14-12 mg
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		.	4a		1
b	If "Yes," has it filed a tax return on Form 990-T for this year?		.	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		✓
	If "Yes," attach the statement required by General Instruction T.		- 1		الدردة المثلم يوردون يوردون	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		ļ	1	3	
	By language in the governing instrument, or					7 100 P
	• By state legislation that effectively amends the governing instrument so that no mandatory direction conflict with the state law remain in the governing instrument?	ons i	that	6	\	-
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	l Part	XV	7	✓	,
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶				1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5	13 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney (or designate) of each state as required by General Instruction G? If "No," attach explanation	Gen	eral	8b	**************************************	S. 75.
9	Is the foundation claiming status as a private operating foundation within the meaning of section 494 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)?	2(j)(3 If "Y) or es,"		N. 16. 19.	1/2 24-75
10	complete Part XIV			9		1
10	names and addresses		.	10		1

Form !	_വമ	DE.	/2012\	

			£
ıа	а	е	-

*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		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
14	Website address ► none The books are in care of ► Anne Coonrad, RN, Esq. Telephone no. ► 5	8-453	E020	
1-7	Located at N. 2215 Burdett Aug Troughly	1218		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year			▶ 🗆
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authorit	y	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of	导震	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	the foreign country ►	1		
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1306	Voc	No
10	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	67.50	Yes	No
1a	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person?		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1 2 1		3.8
	disqualified person?	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1. 16 (1) "
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	21.2	20 74	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? \square Yes \square No	1		
	(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)?		and the same	
	, ,	産業		
	(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	100		
	termination of government service, if terminating within 90 days.)		المالية الأمام أياريجا	\$ P
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)–3 or in a current notice regarding disaster assistance (see instructions)?	1b		9.2
	Organizations relying on a current notice regarding disaster assistance check here	\$1000 x	Fair Tr	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	R. W.	Y'T	A State
_	were not corrected before the first day of the tax year beginning in 2013?	1c	18 AND	√
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)):		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?		77	X -13
	If "Yes," list the years ► 20 , 20 , 20 , 20	7 p	12 C. VI	Silyania Sirenia
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			33,141,14 34,141,14
~	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	1	90 - 12 10 - 1	1 14
	all years listed, answer "No" and attach statement—see instructions.)	2b	1617 m	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	F 5	30	_
	▶ 20 , 20 , 20 , 20	1.3.1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			松 种
	at any time during the year?	12.62		4 10 10
b	If "Yes," did it have excess business holdings in 2013 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			7
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1 10 cg		
	foundation had excess business holdings in 2013.)	3b		-, -
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		√
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4	, j, j,	4 °, '
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		1

Form	990-PF	(2013)

Page 6

: Part	VIDS Statements Regarding Activities	s for W	/hich Form	4720	May Be 🖪	equire	d (contil	nued)		
`5a	During the year did the foundation pay or incur a	ny amo	ount to:						新文艺等	WHEN THE !
	(1) Carry on propaganda, or otherwise attempt t	o influe	nce legislatio	n (sect	ion 4945(e))?	☐ Yes	☑ No		
	(2) Influence the outcome of any specific public							١١٠٠ لين		
	directly or indirectly, any voter registration dr					-	□Yes	☑ No		The state of the s
	(3) Provide a grant to an individual for travel, stu						☐Yes	✓ No	15 - 25	持续
	(4) Provide a grant to an organization other than						□ 163	(<u>A</u>) 140		
	section 509(a)(1), (2), or (3), or section 4940(d				anon acso	ibea iii	[]Vaa	[7] No.		Control of the Contro
	(5) Provide for any purpose other than religious,			•	n or odu	Pational	Yes	✓ No	1.50	
	purposes, or for the prevention of cruelty to c						Yes	[7]	المراجع المراجع	
h	If any answer is "Yes" to 5a(1)-(5), did any of the							V No		
	Regulations section 53.4945 or in a current notice							ibea in	., ibn -1	Strains County
		_	_		-	•			5b	5-10 11 N 01-14-26-6
•	Organizations relying on a current notice regarding the analysis of "Yes" to guestion 5/4), does to	_				 *ba *a			200	
C	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility								1993	
			_				Yes	∐ No	12 To	医温度
٥-	If "Yes," attach the statement required by Regula					. 			100 mg	
6a	Did the foundation, during the year, receive any		-	_		emiums				
	•						∐ Yes	☑ No	1 31 -33	A は の 一 一
b	Did the foundation, during the year, pay premium	ns, dire	ctly or indired	ctly, on	a personal	benefit	contract	? .	6b	V
	If "Yes" to 6b, file Form 8870.				_	_	_			勝勝感
	At any time during the tax year, was the foundation							☑ No		
	If "Yes," did the foundation receive any proceeds								7b	
Part		tors, 1	rustees, F	ounda	tion Mana	agers,	Highly F	Paid E	mploy	ees,
	and Contractors									
1	List all officers, directors, trustees, foundation									
	(a) Name and address		e, and average rs per week		mpensation ot paid,		Contribution yee benefit			ense account,
	,		ed to position		ter -0-)		rred compe		other	allowances
See Li	st Attached)				i		
		as requ	ured		0			0		0
									i	
2	Compensation of five highest-paid employed	es (oth	er than thos	se incl	uded on li	ne 1—:	see instr	uction	s). If n	one, enter
	"NONE."									
			(b) Title, and a	verage			(d) Contribi employee		(a) Evan	ense account,
	a) Name and address of each employee paid more than \$50,00	0	hours per v		(c) Compe	nsation	plans and	deferred	other	allowances
							compen	sation		
			 							
					[
									Ĺ	
~ - -										
			1		1					
			ļ		ļ					
			[1					
			L		L		L			
Total	number of other employees paid over \$50,000.	<u> </u>	<u> </u>	···	<u> </u>	<u> </u>		<u>. ▶</u>		0
									Form 99	0-PF (2013)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid El and Contractors (continued)	nployees,
3 Five	highest-paid independent contractors for professional services (see instructions). If none, enter "NOI	JE "
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
		
Total numb	per of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
List the for	undation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of one and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 Help A	Numni nurses in their time of medical need	
		0
2		
3		
4		
Part IX-E	Summary of Program-Related Investments (see instructions)	<u> </u>
Describe t	ne two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
All other p	rogram-related investments. See instructions	
3		
Total Add	lines 1 through 3	
TOTAL AGG	lines 1 through 3	Form 990-PF (2013)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ian fou	ndations
	see instructions.)		ridationio,
` 1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	purposes:		
а	Average monthly fair market value of securities	1a	98585
b	Average of monthly cash balances	1b	8649
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	107234
е	Reduction claimed for blockage or other factors reported on lines 1a and	强级	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3_	107234
4	Cash deemed held for charitable activities. Enter 1 $\frac{1}{2}$ % of line 3 (for greater amount, see		
	instructions)	4	1609
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	105625
6	Minimum investment return. Enter 5% of line 5	6	5281
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► □ and do not complete this part.)	foundat	ions
1	Minimum investment return from Part X, line 6	1	5281
2a	Tax on investment income for 2013 from Part VI, line 5	おは	
b	Income tax for 2013. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	184
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5097
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5097
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	1 1	
	line 1	7	5097
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	3-1-49	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	750
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	漢字	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	750
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	750
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.		
			Form 990-PF (2013)

Undistributed Income (see instructions)							
, 1	Distributable amount for 2010	3 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013	
_	line 7	· · · · ·		那多類別是別語為	TAX SALES	5097	
2	Undistributed income, if any, as of	the end of 2013:				SHE WATER AND THE	
a	Enter amount for 2012 only .				0		
ь	Total for prior years: 20,26			0	建筑建筑 。2.2.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3	经验证证 证据证据	
3	Excess distributions carryover,					The state of the s	
a	From 2008	6600			2 12 2 54 54		
b		6202					
C	From 2010	825					
d	From 2011	2070 16849				Commence of the second	
•	Total of lines 3a through e .	10849					
⊿'	Qualifying distributions for 201	3 from Part YII	32546	THE PERSON NAMED IN STREET	THE PARTY OF THE P		
•	line 4. ► \$	o nomi at XII,			STATE OF STATE		
а	Applied to 2012, but not more t	than line 2a					
b	Applied to undistributed incom			Mark the Table Towns with a second to the Table Towns		ALL STATES AND	
	(Election required—see instruct			0			
С	Treated as distributions out of d	corpus (Election				Enchanted in the control of the cont	
	required—see instructions) .		0				
d	Applied to 2013 distributable ar	mount		表现于实际影响的	THE REPORT OF THE PARTY OF THE	750	
е	Remaining amount distributed of	out of corpus	0		FINE CLARK	京海は 一般に 東	
5	Excess distributions carryover a	applied to 2013	4347	阿里斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯	江河黑海军2007日7	4347	
	(If an amount appears in column						
	amount must be shown in colur						
6	Enter the net total of each	ch column as					
	indicated below:		TO SEE STATE			ENTER THE SHARE	
a	Corpus. Add lines 3f, 4c, and 4e.		28199			The same of the sa	
b	Prior years' undistributed inc	ome. Subtract					
	line 4b from line 2b		THE WARRY	0	THE WAS PROPERTY AND THE PARTY	FEET TON SON OF THE	
С	Enter the amount of prior years						
	income for which a notice of been issued, or on which the						
	tax has been previously assess			0			
d	Subtract line 6c from line	i i	TO THE PERSON OF		The state of the s	Rest of the service	
ŭ	amount—see instructions .			o			
_	Undistributed income for 2012	Subtract line			414 14 To 201, 345, 4374, 71,40 4 11		
·	4a from line 2a. Taxable						
	instructions				0		
f	Undistributed income for 2013	. Subtract lines					
	4d and 5 from line 1. This ar	mount must be					
	distributed in 2014					0	
7	Amounts treated as distribution						
	to satisfy requirements impos					SALES AND THE STREET	
	170(b)(1)(F) or 4942(g)(3) (see in		0		X 244 8 73 14	Marie Charles and the	
8	Excess distributions carryover						
_	applied on line 5 or line 7 (see ii		0	THE PARTY OF THE PROPERTY OF	HARLES TO SECTION OF THE SECTION OF	A CONTRACT OF THE PARTY OF THE	
9	Excess distributions carryo						
	Subtract lines 7 and 8 from line	oa	28199	Walter Control of the	が、 では、 では、 では、 では、 では、 では、 では、 では	ELLOYENSYEMEST (1995)	
10	Analysis of line 9:					有一种"一种"	
a	Excess from 2009						
b	Excess from 2010					日常在江西方	
C	Excess from 2011	 -				を変えると言うない	
d	Excess from 2012 Excess from 2013						
U			Chin Sandan Lat Transfer for The Per Handalah	was a to the windows to be the total the total	1 12 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

Part		ations (see instru	ctions and Part	VII-A. question	9)	Page IU
, 1a	If the foundation has received a rulin	q or determination	letter that it is a	private operating	<u> </u>	
h	foundation, and the ruling is effective for	or 2013, enter the da	ate of the ruling .			
b	Check box to indicate whether the four		operating founda	ition described in se	ection 🗍 4	942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(a) Tatal
	investment return from Part X for	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed				Ì	
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly			Ţ		
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:	1				
	(1) Value of all assets					
	(2) Value of assets qualifying under			 	<u> </u>	
	section 4942(j)(3)(B)(i)	i				
b	"Endowment" alternative test-enter 2/3	ļ		 		
	of minimum investment return shown in					
_	Part X, line 6 for each year listed	ļ 				
С						
	(1) Total support other than gross investment income (interest,		ı			
	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	1		!		
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from		l		1	
	an exempt organization			ļ		
	(4) Gross investment income					
Part				he foundation h	ad \$5,000 (or more in assets at
	any time during the year-	-see instruction	s.)	·		<u> </u>
1	Information Regarding Foundation					
а	List any managers of the foundation	who have contribu	ted more than 2%	% of the total contr	ributions rece	eived by the foundation
	before the close of any tax year (but o	only if they have co	ntributed more th	ian \$5,000). (See s	ection 507(d))(2))
None						
b	List any managers of the foundation	who own 10% or	more of the stoo	ck of a corporation	n (or an equa	ally large portion of the
	ownership of a partnership or other el	ntity) of which the t	foundation has a	10% or greater inte	erest.	
None						
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship, e	etc., Programs:		
	Check here ▶ ☐ If the foundation	only makes contri	butions to prese	lected charitable of	organizations	and does not accept
	unsolicited requests for funds. If the f	oundation makes	gifts, grants, etc.	(see instructions) t	o ındivıduals	or organizations under
	other conditions, complete items 2a,					
а	The name, address, and telephone nu	ımber or e-mail ad	dress of the person	on to whom applica	ations should	be addressed
Samar	itan Hospital School of Nursing Alumni C	Office 2215 Burdett	Ave. Trov NY			
b	The form in which applications should	be submitted and	Information and	materials they sho	uld include.	
	THE FORM IN WHICH EXPENSES OF STREET			·		
There	is an application form and it must be acc	ompanied by a phys	sician's statement	and copies of any s	pecific medic	al bills
C	Any submission deadlines:					
	Tay Submission Coddinios					
none d	Any restrictions or limitations on av	vards, such as by	geographical ai	reas, charitable fie	elds, kınds d	of institutions, or other
u	factors:		99	,		,
		f mumair-				
none e	xcept must be an Alumni of the school of	r nursing				

Form **990-PF** (2013)

Par	XV Supplementary Information (con	tinued)			Page 11
3	Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	
•	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
а	Paid during the year				
25 Cli	Musco ford Drive on Spa, NY 12019	none	Ind	medical purposes	750
					į
	Total	<u> </u>		>	3a 750
b	Approved for future payment				
None					
					j
	Total				3b (

·	r gro	ss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
1	Prog	gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions)
	а						
	b					-	
	C .						
	d ,	··					
	e .						
	' - '		<u> </u>		ļ		
^		Fees and contracts from government agencies					
_		nbership dues and assessments			ļ		
3		rest on savings and temporary cash investments			14	457	
4		dends and interest from securities	SPACE OF BETTER NO.	14 a F 14 a 10 a 1 1 1 a 1	14	8823	W. M. C. C. C.
5		rental income or (loss) from real estate:			能的高級政态	经营业的	的。 對於 對 對 對 對 對 對 對 對 對 對 對 對 對
		Debt-financed property	<u> </u>				
_		Not debt-financed property			ļ		
		rental income or (loss) from personal property	ļ				
		er investment income	L				
		or (loss) from sales of assets other than inventory			ļ-		
		income or (loss) from special events					
		ss profit or (loss) from sales of inventory					
		er revenue: a	<u> </u>				
	b _		ļ — — — — — — — — — — — — — — — — — — —				
	С _. -						
	ď				 		
					1		
	e _	() () () () ()	Machine at the water of the		Charles one of Sec.		
		total. Add columns (b), (d), and (e)				9280	
13	Tota	al. Add line 12, columns (b), (d), and (e)				9280	9280
13 See	Tota work	al. Add line 12, columns (b), (d), and (e)	 ıs.)	ent of Exemp			9280
13 See Par	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	ıs.) Accomplishm		t Purposes	13	
13 See Par Line	Tota work	al. Add line 12, columns (b), (d), and (e) (sheet in line 13 instructions to verify calculation	ıs.) Accomplishm		t Purposes	13	
13 See Par Line	Tota work t XV e No.	al. Add line 12, columns (b), (d), and (e)	ıs.) Accomplishm		t Purposes	13	
13 See Par Line	Tota work t XV e No.	al. Add line 12, columns (b), (d), and (e)	ıs.) Accomplishm		t Purposes	13	
13 See Par Line	Tota work t XV e No.	al. Add line 12, columns (b), (d), and (e)	ıs.) Accomplishm		t Purposes	13	
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13 See Par Line	Tota work t XV e No.	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm		t Purposes	13	
13 See Par Line	Tota work t XV e No.	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm		t Purposes	13	
13 See Par Line	Tota work t XV e No.	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm		t Purposes	13	
13 See Par Line	Tota work t XV e No.	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm		t Purposes	13	

.Part	XVII		n Regarding Tra	nsfers T	o and Tran	sacti	ons and	Relationsh	ps With i	Noncha	ritabl	e Pa	age 13
· ₁	Did t		rganizations							<u> </u>			
•	Diu i	organization	directly or indirectly	engage i	n any of the f	ollow	ing with an	y other organ	nization de	scribed		Yes	No
	Orga	nizations?	ne Code (other than	section 5	601(c)(3) orga	nizatio	ons) or in s	section 527, r	elating to p	oolitical	100	12 E	The same
_	_										To the	製作 湯	を記る
а			porting foundation to	o a nonch	naritable exer	npt or	rganızatıon	of:			100		
		Cash									1a(1)		√
		Other assets									1a(2)		1
b		r transactions:									16179 511532	7 7	718 7 194 100 100 100 100 100 100 100 100 100 100
	(1) S	sales of assets to	a noncharitable exe	empt orga	anızatıon .						1b(1)		1
			ets from a noncharit								1b(2)		✓
			, equipment, or othe								1b(3)		✓
			rrangements								1b(4)		✓
		oans or loan gua									1b(5)		1
			ervices or membersh								16(6)		√
С			quipment, mailing li								1c	✓	
d	If the	answer to any	of the above is "Ye	s," comp	lete the follo	wing s	schedule.	Column (b) s	hould alwa	ays shov	v the f	aır m	arket
	value	of the goods, o	ther assets, or servi	ces giver	by the repo	rting f	foundation	. If the found	ation recei	ved less	than f	aır m	arket
			on or sharing arrang										
(a) Line	no	(b) Amount involved	(c) Name of nonc	hantable exe	empt organizatio	n	(d) Desc	nption of transfer	s, transaction	s, and sha	rıng arra	ngeme	ents
С		0	Samaritan Hospital S	School of	Nursing Alum	ni, Inc	share off	ice and mailin	g address				
								_	_				
							1	_					
									_				
		· · · · · · · · · · · · · · · · ·			· · · · · ·				 				
													
	-+												
						•••							
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							+		~				
							 						
													
													
							 						
													
2 a			ectly or indirectly af								_	_	
			501(c) of the Code (d		n section 501	(c)(3))	or in secti	on 52/?		· · [4	' Yes	Ш	No
b	If "Y	es," complete the	e following schedule	·									
		(a) Name of organ	nization		(b) Type of orga	Inization	n		(c) Description	n of relation	nship		
Samari	itan H	ospital School of	Nursing Alumni, Inc	501(c)(6)				share same o	lirectors, of	ficers an	d mem	bersh	ıip
					<u></u>								
	Und	er penalties of perjury,	I declare that I have examin	ed this return	, including accom	panying	schedules an	d statements, and	to the best of	my knowled	ige and b	elief, rt	is true,
Sign	com	ect, and complete Dec	laration of preparer (other th	ian taxpayer)	is based on all inf	ormatio	n or which pre	parer has any kno	wieage	May the If			
Here	1 1	Carleson			18/12/14 Ircsidex+					with the p			
		nature of officer or tru	stee		Date	Titl	le			(See Histia	ouona). [∖ լ բջ	
	تـــــــــــــــــــــــــــــــــــــ	Print/Type prepare	r's name	Preparer	's signature			Date / /	Check	k 📝 ıf F	PTIN		
Paid		1			\mathcal{L}_{a}	~ ·	Phis	B) 8/4/14		mployed	PO1	5157	86
Prep		Joanne Case Ch		No Mine	nae a	استك	· / was	~ ~ / // /	Firm's EIN ▶	<u> </u>		3.07	
Use (Only		Joanne Case Chwied						Phone no		8-656-	3002	
		Firm's address	5 Boathouse Road C	arcensuu	19,141 12004		<u>-</u>		. 1.010 10		orm 99 0		(2013)

Samaritan Hospital School of Nursing Alumni Association Charitable Foundation
14-1684557
Form 990-PF
Part VIII-1:
Officers and Directors:
Joan Gemmill McReavy
Christine Yerdon
Ellen Nicpon
Directors:
Joy Aloan
Claudia Graham
Anne Coonrad
Karen Henchey
Christine Lutringer
Kathleen Borge
Susan Quinn
Donna Breault
Eleonor Hill
Gail Moore
Florence Strang

Samaritan Hospital School of Nursing Alumni Association Charitable Foundation

14-1684557 Form 990-PF

Book	FMV
15438	14684
10737	10147
26175	24831
6072	5973
11899	12255
13772	6963
10619	5994
3548	3235
13276	5407
12463	10804
15400	11429
3024	2829
10160	10168
94162	68684
	10737 26175 6072 11899 13772 10619 3548 13276 12463 15400 3024 10160

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

 If yo 	u are	filing for an Additional (Not Automatic) 3-Mo	onth Exter	nsion, complete onl	v Part II (on page 2 c	of thic	form).	▶ [J	
a corp 8868 t Return	onic to control of the control of th	nplete Part II unless you have already been of the filling (e-file). You can electronically file Form on required to file Form 990-T), or an addition uest an extension of time to file any of the formsfers Associated With Certain Persona For more details on the electronic filing of the	8868 if your sald (not autoforms lister) Benefit (ou need a 3-month a omatic) 3-month ext d in Part I or Part II Contracts, which m	utomatic extension of ension of time. You of with the exception of the sent to the left has s	f time an el	e to file ectron m 887	e (6 months f lically file For 70, Informatio	m on	
Part	n.	Automatic 3-Month Extension of Time	Only sul	hmit original (no co	nies needed)	- Oria	Q			
A cor	poration	on required to file Form 990-T and reques	sting an a	utomatic 6-month	extension—check th	is ho	y and	complete	_	
Parti	oniy							. ▶ г	7	
All oth	er cor	porations (including 1120-C filers), partnersh	ips, REMIC	ວs, and trusts must ເ	use Form 7004 to req	uest	an ext	ension of tim	 וe	
to file i	ncom	e tax returns.								
		Nome of women to the Clark			Enter filer's identifyin				าร	
Type o	or	Name of exempt organization or other filer, see in			Employer identification	number (EIN) or				
print		Samaritan Hospital School of Nursing Alumni A Number, street, and room or suite no. If a P.O. bo	Association	Charitable Foundat		16845				
File by the			ox, see instr	uctions.	Social security number	r (SSN)			
filing you		2215 Burdett Avenue City, town or post office, state, and ZIP code. For	r a foreign a	ddress see instruction						
return S		Troy, New York 12180	a loreign a	adicas, see mandenon	3.					
			-						_	
Enter t	he Re	turn code for the return that this application is	s for (file a	separate application	for each return) .			. 0 4	L	
Appli		1	Return	Application				Return	_	
Is Fo			Code	Is For				Code		
		r Form 990-EZ	01	Form 990-T (corpo	ration)	ration)				
Form			02	Form 1041-A					_	
		(individual)	03	Form 4720 (other t	han individual)	09				
	990-F		04	Form 5227				10	_	
		(sec. 401(a) or 408(a) trust)	05	Form 6069	11					
Form	990-1	(trust other than above)	06	Form 8870				12	_	
Telep	ohone orgat s is foi	No ► 518-301-3722 Initiation does not have an office or place of but a Group Return, enter the organization's four a group, check this box ► □ . If I	 usiness in f r digit Groi	ax No. ▶ the United States, ch up Exemption Numb	er (GEN)		If	. ►□ this is attach		
a list w	ith the	e names and EINs of all members the extensi	on is for.						_	
1	until for th	lest an automatic 3-month (6 months for a co August 15 , 20 14 , to file the exen e organization's return for: calendar year 20 13 or	orporation r	required to file Form zation return for the o	990-T) extension of ti organization named a	me bove	. The e	extension is		
	▶□	tax year beginning	, 20	, and ending			, 2	20		
2	If the	□ tax year beginning, 20, and ending, 20 he tax year entered in line 1 is for less than 12 months, check reason: □ Initial return □ Final return								
	Lf thin	ange in accounting period application is for Forms 990-BL, 990-PF, 99	0-T 4720	or 6069, enter the te	entative tax. less any	T	Γ			
	nonre	efundable credits. See instructions.				3a	\$		0	
	estim	s application is for Forms 990-PF, 990-T, atted tax payments made. Include any prior y	ear overpa	yment allowed as a	credit.	3b	\$		_	
С	Bala	nce due. Subtract line 3b from line 3a. Includ S (Electronic Federal Tax Payment System).	e your pay See instruc	ment with this form, ctions.	if required, by using	3c	\$		0	
O=1-4!-		u are going to make an electronic funds withdrawa			see Form 8453-FO and				_	
instruct	n. II yo IIons -	u are going to make an electronic fullos withdrawa	(aeo. aen	,	, and and			F.s.yo.	_	