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Form 990-PF

SCANNED AUG 1 S 2014

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.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

2013

| | alendar year 2013 or tax year beginning | | , and ending | | |
|------------------------------|---|---------------------------------------|--|--|--|
| | ne of foundation | | | A Employer identification | number |
| זיף | HE BEACH FOUNDATION | | | 23-2897351 | |
| | ber and street (or P O box number if mail is not delivered to street | address) | Room/suite | B Telephone number | |
| | 00 BARR HARBOR DRIVE | , | 220 | (610)940-1 | 111 |
| City | or town, state or province, country, and ZIP or foreign po | | - | C If exemption application is p | ending, check here |
| | | Initial return of a fo | rmer public charity | D 1 Foreign organization: | s check here |
| G U | heck all that apply LI initial return Final return | Amended return | mer public chanty | o i i orongir organización. | 2 |
| | Address change | Name change | | 2 Foreign organizations me check here and attach co | eeting the 85% test, |
| H C | heck type of organization X Section 501(c)(3) ex | | | E If private foundation sta | |
| <u> </u> | | Other taxable private founda | tion | under section 507(b)(1 | |
| Fai | ir market value of all assets at end of year J Accounting | | Accrual | F If the foundation is in a | 60-month termination |
| | | ner (specify) | | under section 507(b)(1 | |
| | \$ 10,392,283. (Part I, colui | nn (d) must be on cash b | pasis.) | | η |
| Pa | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (f) Disbursements for chantable purposes (cash basis only) |
| | 1 Contributions, gifts, grants, etc., received | 0. | | N/A | |
| | 2 Check X if the foundation is not required to attach Sch. B | | | | |
| | interest on savings and temporary cash investments | | | | |
| 9 | 4 Dividends and interest from securities | 40,068. | 40,068. | | STATEMENT 1 |
| İ | 5a Gross rents | | | | |
| | Net rental income or (loss) | 27 | ************************************** | - Andrew - | |
| <u>a</u> | 62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | 27. | | | |
| Revenue | D assets on line 6a | | 27. | TEN TO THE TEN | |
| <u>&</u> | 7 Capital gain net income (from Part IV, line 2) | | | 2014 | |
| | Net short-term capital gain Income modifications | | 7 | 1 4 14 |) + |
| - | . Gross sales less returns | | 11/ | ME 1 | al profession and the second |
| | D Less Cost of goods sold | , | 131 | Was a second | |
| | c Gross profit or (loss) | | 15% | /c0// | |
| 1 | 11 Other income | | | 09/ | |
| | 12 Total Add lines 1 through 11 | 40,095. | 40,095 | | |
| | 13 Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | 14 Other employee salaries and wages | · · · · · · · · · · · · · · · · · · · | | | |
| တ | 15 Pension plans, employee benefits | | - | | |
| use | 16a Legal fees STMT 2 | 4,325. | 4,325. | | 0. |
| Expenses | 1 2 | 4,323. | 4,323. | | • |
| e E | c Other professional fees | 28. | 28. | | 0. |
| ativ | 17 Interest 18 Taxes STMT 3 | 1,538. | 846. | | 0. |
| istra | 19 Depreciation and depletion | | | - | |
| nin. | 20 Occupancy | | | | |
| Adr | 21 Travel, conferences, and meetings | , | | | |
| P | 22 Printing and publications | | | | |
| g B | 23 Other expenses STMT 4 | 302. | 302 | , | 0. |
| raţi | 24 Total operating and administrative | | | | |
| Operating and Administrative | expenses Add lines 13 through 23 | 6,193. | 5,501 | • | 0. |
| J | 25 Contributions, giπs, grants paid | 413,650. | | <u> </u> | 413,300. |
| | 26 Total expenses and disbursements | 110 012 | 5,501 | | 413,300. |
| | Add lines 24 and 25 | 419,843. | 3,301 | <u>'</u> | 413,300. |
| | 27 Subtract line 26 from line 12 | <379,748. | | | |
| | a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) | -3,3,7,20 | 34,594 | • | HT |
| | c Adjusted net income (if negative, enter -0-) | | | N/A | |
| | | | | | |

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see instructions

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23-2897351 Form 990-PF (2013) THE BEACH FOUNDATION Page 2 End of year Beginning of year Attached schedules and amounts in the description **Balance Sheets** Part II column should be for end-of-year amounts only (c) Fair Market Value (a) Book Value (b) Book Value 1 Cash - non-interest-bearing 1,600,804. 155,693. 155,693. 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 Receivables due from officers, directors, trustees, and other 2,398. 2,398. disqualified persons 7 Other notes and toans 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 1,323,556. 2,379,213. 3,215,828. STMT 5 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 3,769,277. 3,769,277. 7,017,981. STMT 6 Investments - other 13 14 Land, buildings, and equipment basis Less accumulated depreciation 383. 383. Other assets (describe ► PREPAID EXCISE 0. 16 Total assets (to be completed by all filers - see the 6,306,964. 10,392,283. 6,693,637. 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 Mortgages and other notes payable 0. 22 Other liabilities (describe ► EXCISE TAX DUE 6,925. 0 6,925 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted $\triangleright [X]$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 494,441 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 5,812,523 6,192,271. Retained earnings, accumulated income, endowment, or other funds 6,686,712. 6,306,964 30 Total net assets or fund balances 6,693,637. 6,306,964 31 Total liabilities and net assets/fund balances

Part III Analysis of Changes in Net Assets or Fund Balances

| | 1 1 | |
|--|-----|------------|
| 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 | 6,686,712. |
| 2 Enter amount from Part I, line 27a | 2 | <379,748.> |
| 3 Other increases not included in line 2 (itemize) | _ 3 | 0. |
| 4 Add lines 1, 2, and 3 | 4 | 6,306,964. |
| 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_ | 6,306,964. |

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Net Assets or Fund Balances

| 23-2897351 | Page 3 |
|------------|--------|
| | |

| (a) List and desc | ribe the kind(: | es for lax on in s) of property sold (e g common stock, 200 shs | , real estate, | Income | (b) Hov | v acquired urchase | | ate acquired , day, yr) | (d) Date sold (mo , day, yr) |
|--|--|---|--------------------------------------|------------------------------------|------------|-----------------------|----------------|-----------------------------------|-----------------------------------|
| 1a HEALTHSOUTH CO | | | | <u>יי</u> ע | <u> </u> | onation P | `- | | , , , , , , , |
| b | | 101111011 01 | <u> </u> | | | | | | |
| C | | | | | | | | | |
| d | | | | | | | <u> </u> | | |
| <u>e</u> | | | | | ┸— | | <u> </u> | | <u> </u> |
| (e) Gross sales price | • • • • | reciation allowed r allowable) | | t or other basis xpense of sale | | | |) Gain or (loss plus (f) minus | (g) |
| <u>a</u> 27. | | | | | | | | | 27. |
| <u>b</u> | | | | | | | | | |
| <u>C</u> | | | | | | | | | |
| <u>d</u> | | | | | | | | | |
| e Complete only for assets showing | o gain in colu | imn (h) and owned by t | he foundation | on 12/31/69 | - | | (I) Gains | (Col (h) gair | minus |
| (i) F M V as of 12/31/69 | | djusted basis of 12/31/69 | (k) Ex | cess of col (i) col (j), if any | | C | col (k), b | ut not less thates (from col | ın -0-) or |
| a | | | | | | | | | 27. |
| <u> </u> | | | | | | | | ···- | |
| C | | | | | | | | | |
| d | | | | | | | | | |
| <u>e</u> | | | | | | | | | |
| 2 Capital gain net income or (net ca | pital loss) | { If gam, also enter If (loss), enter -0- | in Part I, line i in Part I, line | 7 7 | } 2 | 2 | | | 27. |
| 3 Net short-term capital gain or (los | ss) as defined | in sections 1222(5) an | d (6) | | | j | | | |
| If gain, also enter in Part I, line 8, column (c) | | | | | N7 / 70 | | | | |
| | If (loss), enter -0- In Part I, line 8 | | | | | N/A | <u> </u> | | |
| Was the foundation liable for the sec If "Yes," the foundation does not qual 1 Enter the appropriate amount in | lify under sect | tion 4940(e) Do not co | mplete this pa | rt | | | - | | Yes X No |
| (a) | Cacir Colditiii | (b) | istructions ber | ore making any t | (c) | | | | (d) |
| Base period years Calendar year (or tax year beginnii | na in) | Adjusted qualifying dis | tributions | Net value of no | | ble-use asse | ets | Distri (col (b) di | butión ratio vided by col (c)) |
| 2012 | | 44 | 1,965. | | 8,0 | 033,25 | 4. | | .055017 |
| 2011 | | | 3,210. | | | 188,21 | | | .054439 |
| 2010 | | | 0,490. | **. | 5, | 111,13 | 32. | | .052922 |
| 2009 | | | 1,010. | | | 299,94 | | | .056962 |
| 2008 | | | 9,161. | | 2,0 | 579,96 | 03. | | .059389 |
| 2 Total of line 1, column (d) | | | | | , | | 2 | | .278729 |
| 3 Average distribution ratio for the the foundation has been in existe | | | on line 2 by 5, | or by the numbe | r of years | ; | 3 | 3 | .055746 |
| 4 Enter the net value of noncharitat | ole-use assets | for 2013 from Part X, | line 5 | | | | 4 | . | 9,354,444. |
| 5 Multiply line 4 by line 3 | | | | | | | 5 | j | 521,473. |
| 6 Enter 1% of net investment incor | ne (1% of Pai | t I, line 27b) | | | | | <u> </u> | 6 | 346. |
| 7 Add lines 5 and 6 | | | | | | |]_7 | , | 521,819. |
| 8 Enter qualifying distributions from If line 8 is equal to or greater than | | | 1b, and comp | olete that part usi | ng a 1% | tax rate | | 3 | 413,300. |
| See the Part VI instructions | | - | | | | | | | |

| - - - | 990-PF(2013) THE BEACH FOUNDATION | 23- | -2897 | 351 | Pa | age 4 |
|---|--|---------|---------|--------|------|----------|
| | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or | 1948 | - see i | nstruc | tion | s) |
| | 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) | | | | | |
| h | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | 1 | | | 69 | 2. |
| | of Part I, line 27b | | | | | |
| | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) | | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | | _ | 0. |
| | Add lines 1 and 2 | 3 | | | 69 | 2. |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | | 0. |
| | Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | | 69 | 2. |
| | Credits/Payments | | | | | |
| | 2013 estimated tax payments and 2012 overpayment credited to 2013 6a 1,075 | | | | | |
| | Exempt foreign organizations - tax withheld at source | 7 | | | | • |
| | Tax paid with application for extension of time to file (Form 8868) | 7 | | | | |
| | Backup withholding erroneously withheld 6d | 7 | | | | |
| | Total credits and payments Add lines 6a through 6d | 7 | 1 | 1 | ,07 | 75. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | | | |
| | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | | |
| | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | 38 | 33. |
| | Enter the amount of line 10 to be Credited to 2014 estimated tax ► 383 . Refunded ► | 11 | | | | 0. |
| Pa | t VII-A Statements Regarding Activities | - 1 | | - | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver | e in | | | Yes | No |
| | any political campaign? | | | 1a | | X |
| h | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition | n)? | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis | | | | | |
| | distributed by the foundation in connection with the activities | | | | 1 | |
| C | Did the foundation file Form 1120-POL for this year? | | | 10 | | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | | | |
| • | (1) On the foundation ▶ \$ 0 - (2) On foundation managers ▶ \$ 0 | • | | | 1 | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | _ | | | 1 | |
| Ī | managers ▶\$O. | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | 2 | | X |
| | If "Yes," attach a detailed description of the activities | | | | 1 | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation | , or | | | 1 | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | | <u>X</u> |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | _ | 4a | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | 3 | N/A | 4b | | |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 5 | | X |
| | 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 | | | | | |
| | By language in the governing instrument, or | | | | 1 | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st | ate law | | | 1 | |
| | remain in the governing instrument? | | | 6 | Х | |
| 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 | KV . | | 7 | Х | |
| | | | | | | ; |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | |
| | PA | | | | | |
| ħ | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | | |
| _ | of each state as required by General Instruction G? If "No," attach explanation | | | 8b | X | |
| g | is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for c | alendar | | | | |
| - | year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9 | | _X_ |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | | | 10_ | | X |

Total. Add lines 1 through 3

Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form 990-PF (2013)

6

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years

| Part XIII Undistributed Income (see instruction |
|---|
|---|

| | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|--|---------------|----------------------------|-------------|--------------------------|
| 1 Distributable amount for 2013 from Part XI, | | | | 167 020 |
| line 7 | | , m | | 467,030. |
| 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 | | | | |
| b From 2009 | | | 1 | |
| c From 2010 d From 2011 | | | | |
| 20 207 | | | | |
| | 28,287. | | 1 | |
| f Total of lines 3a through e | 20,20 | | | ······ |
| Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ 413,300. | | | | |
| a Applied to 2012, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | 7 1 1 | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2013 distributable amount | | | | 413,300. |
| e Remaining amount distributed out of corpus | 0. | | | |
| 5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a)) | 28,287. | | | 28,287. |
| 6 Enter the net total of each column as indicated below: | | | | · · |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | | | |
| 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 | Ì | • | | |
| deficiency has been issued, or on which | 1 | | | |
| the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2012 Subtract line | | | _ | |
| 4a from line 2a Taxable amount - see instr | | | 0. | |
| f Undistributed income for 2013 Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | 05 440 |
| be distributed in 2014 | | | | 25,443. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2008 | 0 | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2014 | _ | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2009 | | | | |
| b Excess from 2010 | | | | |
| c Excess from 2011 | | | | |
| d Excess from 2012 | | | | |
| e Excess from 2013 | | | | Form 990-PF (2013 |

| | CH FOUNDATI | | | | 39 / 35 L Page 10 |
|--|-----------------------------|------------------------------|-----------------------------|---------------------------------------|--------------------|
| Part XIV Private Operating Fo | | | II-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling or | | | Í | | |
| foundation, and the ruling is effective for | | | ▶ ∟ | | |
| b Check box to Indicate whether the found | | ng foundation described | | 4942(J)(3) or 4 | 942(J)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | (1) 0040 | Prior 3 years | (4) 0010 | (a) Total |
| 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 | | <u></u> | | · · · · · · · · · · · · · · · · · · · | |
| 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 | | | 1 | | |
| exempt activities | | | | | <u> </u> |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities | | | | | |
| Subtract line 2d from line 2c | | | | | <u> </u> |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a "Assets" alternative test - enter | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year | | | | | |
| listed | | | | | <u> </u> |
| c "Support" alternative test - enter | | | | 1 | |
| (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 | | <u> </u> | | | <u> </u> |
| Part XV Supplementary Info | | | if the foundatio | n had \$5,000 or m | ore in assets |
| at any time during t | | ructions.) | | | |
| 1 Information Regarding Foundatio | - | | | | |
| a List any managers of the foundation wheyear (but only if they have contributed meaning that it is a supplied to the foundation of the foundation where | | | tributions received by th | ie foundation before the cl | ose of any tax |
| | 1010 than \$5,0007 (006. | 30001011 307 (4)(2) / | | | |
| THOMAS E. BEACH | 100/ | | (| | |
| b List any managers of the foundation when other entity) of which the foundation has | | | (or an equally large por | tion of the ownership of a | partnership or |
| NONE | ou to to of grouter intere | | | | |
| | 0 4 0 4 1 | 0.1.1 | <u> </u> | | _ |
| 2 Information Regarding Contributi Check here ► X if the foundation o | | · | | not accept upoplicated rea | waata far funda If |
| the foundation makes gifts, grants, etc | | | | | |
| | | | | | |
| a The name, address, and telephone num | oei oi e-iliali audiess ()! | me herson to whom abt | moations stroug be addi | 5335U | |
| | | | | | |
| b The form in which applications should b | e submitted and informa | ation and materials they | should include | | |
| c Any submission deadlines | | | | | |
| <u> </u> | | | - loads of 144 t | | |
| d Any restrictions or limitations on awards | s, such as by geographic | cai areas, charitable field: | s, kinds of institutions, o | r other factors | |
| | | | | | |

| Part XV S | Supplementary Information | n (continued) | | | |
|-------------------|-------------------------------|--|----------------------|----------------------------------|---------|
| 3 Grants and | Contributions Paid During the | Year or Approved for Future | Payment | | |
| | Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name ar | nd address (home or business) | or substantial contributor | recipient | Contribution | |
| a Paid durin | g the year | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| SEE SCHEDULE | ATTACHED | NONE | 501(C)(3) | GENERAL FUND | |
| | | | | | 413,300 |
| | | | | | |
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| | | | | | |
| | | | | | |
| Total | | | | ► 3a | 413,300 |
| b Approved | for future payment | | | | |
| | | | | | |
| NO | NF. | | | | |
| 110 | | | | | |
| | | | | | |
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| | | | | | |
| Total | | | • | ▶ 3b | (|

| Part XVI-A | Analysis | of income- | Producing | Activities |
|------------|----------|------------|------------------|------------|
| | | | | |

| Enter gross amounts unless otherwise indicated | Unrelated | business income | | ed by section 512, 513, or 514 | (e) |
|---|--------------------|-----------------|---------------|--------------------------------|-------------------|
| | (a) | (b) | (c) Exclu- | (d) | Related or exempt |
| 1 Program service revenue | Business | Amount | sion code | Amount | function income |
| a | | | | | |
| b | | | | | |
| C | | | | | |
| d | 1 | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| 4 Dividends and interest from securities | | | 14 | 40,068. | |
| 5 Net rental income or (loss) from real estate | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | 18 | 27. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue | | | | | |
| a | _ | | | | |
| b | _ | | | | |
| c | | | | | |
| d | _ | | | | |
| e | - _ | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | (|). | 40,095. | 0. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 40,095. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |

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

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) |
|---------------|--|
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323621 10-10-13

| Part XVII | Information Regarding Tran | nsfers To a | and Transactions a | nd Relationsh | ips With Noncha | aritable | : | |
|---------------------|--|-------------------|-----------------------------------|---------------------------------------|---------------------------------------|----------------|------------|------------|
| 1 Did the or | ganization directly or indirectly engage in any | v of the followin | a with any other organization | n described in section | on 501(c) of | 1 | Yes | No |
| | other than section 501(c)(3) organizations) | | | | 301(0) 01 | | | |
| | from the reporting foundation to a noncharit | | | | | | | |
| (1) Cash | | , p , | . | | | 1a(1) |] | X |
| (2) Other | assets | | | | | 1a(2) | | Χ |
| b Other tran | | | | | | | | |
| (1) Sales | of assets to a noncharitable exempt organiz | ation | | | | 1b(1) | | <u>X</u> |
| (2) Purch | ases of assets from a noncharitable exempt | organization | | | | 1b(2) | | X |
| (3) Renta | I of facilities, equipment, or other assets | | | | | 1b(3) | | <u>X</u> _ |
| (4) Reimi | oursement arrangements | | | | | 1b(4) | | <u>X</u> |
| | s or loan guarantees | | | | | 1b(5) | | X |
| • • | rmance of services or membership or fundra | | | | | 1b(6) | | X |
| • | facilities, equipment, mailing lists, other ass | | | | | 10 | | <u>X</u> _ |
| | ver to any of the above is "Yes," complete the | | | | | | ets, | |
| | s given by the reporting foundation If the fo) the value of the goods, other assets, or set | | eu 1855 tilali iali ilialket valu | e iii aliy tialisaction | or snaming arrangement, | 2110W III | | |
| | | | exempt organization | (d) Description | of transfers, transactions, and | shanng arr | angeme | nts |
| 1-7-11-01-0 | (2) | N/A | | , , , , , , , , , , , , , , , , , , , | | | | |
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| | | | | | | | | |
| 2a Is the four | ndation directly or indirectly affiliated with, o | r related to one | or more tax-exempt organi | zations described | | | _ | |
| | 501(c) of the Code (other than section 501(| | | |] | Yes | X |] No |
| | emplete the following schedule | 5/(5// 5/ ··· 556 | | | | | | |
| | (a) Name of organization | | (b) Type of organization | (| c) Description of relation | ship | | |
| | N/A | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | <u> </u> | | | | | |
| l and b | penalties of perjury, I declare that I have examined blief, it is true, correct, and complete. Declaration of | | | | Non- and translation IN | fay the IRS of | discuss | this |
| Sign Here | TO 57 | | Alcher | | | hown below | (see ins | str)? |
| i 🚩 | home Seach | | 10/6/14 | Title | | X Yes | | _ No |
| Sigi | Restat Company of the second o | Dropararia a | Date | Title Date | Check If PTIN | <u> </u> | | |
| | Print/Type preparer's name | Preparer's s | - | Date | self- employed | | | |
| Paid | WALTER E. RAMICK, JR. | Walt | to a damil | 8/1/14 | | 00038 | 012 | ł |
| Preparer | Firm's name ► ZWEIG, RAMI | | | 0.1017 | Firm's EIN ► 23- | | | |
| Use Only | | ON a AD | ,DOCTUTIO | | FILLIS EIN F 25 | | 0 1 | |
| | Firm's address ► 2320 FAUNC | E ST. | | | | | | |
| | | | 19152-4112 | | Phone no (215 | 333– | 824 | 6 |
| | | | | | 1 | Form 99 | | |

| FORM 990-PF | DIVIDENDS | S AND INTEREST FROM SECUR | | SECUR | ITIES STATEMENT 1 | | |
|---|-----------------|------------------------------|---------------------------|---------------------------------|-------------------------------|--------------------------|----|
| SOURCE | GROSS AMOUNT | | | (B) NET INVEST MENT INCOM | | | |
| JP MORGAN - NOMINEE | 40,068. | | 0. 4 | 0,068. | 40,068 | • | |
| TO PART I, LINE 4 | 40,068. | | 0. 4 | 0,068. | 40,068 | · | |
| FORM 990-PF | | ACCOUNTI | NG FEES | Av | | STATEMENT | 2 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | (B) NET INV MENT IN | EST- | (C) ADJUSTED NET INCOME | (D) CHARITA PURPOS | |
| PREPARATION OF FORM | 990-PF | 4,325. 4,325. | | | | 0. | |
| TO FORM 990-PF, PG | l, LN 16B | 4,325. | 4 | ,325. | | | 0. |
| FORM 990-PF | V | TAX | ES | | | STATEMENT | 3 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | (B) NET INV MENT IN | EST- | (C) ADJUSTED NET INCOME | (D) CHARITA PURPOS | |
| FEDERAL FORM 990-PF TAX FOREIGN TAX PA CHARITABLE REGIST | | 692. 831. | | 0. 831. | | | 0. |
| FEE | 114111014 | 15. | | 15. | | | 0. |
| TO FORM 990-PF, PG | 1, LN 18 | 1,538. | | 846. | | | 0. |

| FORM 990-PF | ОТНЕ | ER EXI | EXPENSES | | | STATEMENT | |
|--|--|-------------|----------------|-------------|--|--|-------------------|
| DESCRIPTION | (A) (B) EXPENSES NET INVES PER BOOKS MENT INCO | | | | | | |
| ADR DEPOSITORY FEE OFFICE EXPENSE | 2 | 60. 242. | ; | 60. 242. | | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 3 | 302. | | 302. | | | 0. |
| FORM 990-PF | CORPC | ORATE | STOCK | E | | STATEMENT | 5 |
| DESCRIPTION | | | | вос | OK VALUE | FAIR MARKE VALUE | T |
| BANCORP.COM, COMMON & PREFERENCE S.A. TEEKAY CORPORATION BANK OF AMERICA CORP CITIGROUP INC UNITED CONTINENTAL HLDGS INC | RED | | - | | 422,188. 137,601. 763,767. 353,223. 351,544. 350,890. | 561,8 187,9 1,270,8 418,5 374,1 402,5 | 65. 25. 22. |
| TOTAL TO FORM 990-PF, PART I | I, LINE 1 | 10B | : | | 2,379,213. | 3,215,8 | 28. |
| FORM 990-PF | OTHER | INVE | STMENTS | | | STATEMENT | 6 |
| DESCRIPTION | | | UATION THOD | вос | OK VALUE | FAIR MARKE VALUE | ĒΤ |
| GARDEN LANE INVESTMENT FUND INNOVATION PLUS PLUS, LLC | | | OST OST | ; | 3,769,277. | 6,942,9 | |
| TOTAL TO FORM 990-PF, PART I | I, LINE 1 | 13 | | | 3,769,277. | 7,017,9 | 81. |

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| | | Con | Contributions |
|--------------------------------------|---|---|-------------------------|
| Public Policy: | | | |
| Atlas Economic Research Found. | 1201 L Street NW, Washington, DC 20005 | \$ | 25,000 |
| The Atlas Society | 1001 Conn. Ave., NW, Ste 830, Wash., DC 20036 | ❖ | 200 |
| CATO Institute | 1000 Mass. Ave., N.W., Wash., DC 20001 | ❖ | 25,000 |
| Competitive Enterprise Institute | 1001 Conn. Ave., NW, Ste 1250, Wash., DC 20036 | ❖ | 24,750 |
| FIRE (Found. For Ind. Rights in Edu) | 601 Walnut St., Ste 510,Phila., PA 19106 | ❖ | 15,000 |
| Foundation for Educational Choice | One Am. Square, Ste. 2420, Indianapolis, IN 46282 | \$ | 20,000 |
| Foundation for Govt. Accountability | 15275 Collier Blvd, Suite 201-279, Naples, FL 34119 | \$ | 20,000 |
| Free to Choose Network | 2002 Filmore Ave., Ste. 1, Erie, PA 16506-9982 | \$ | 25,000 |
| GMU Found. (George Mason) | Enterprise Hall, Rm. 354, 4400 Univ. Dr. MS3G4, Fairfax, VA 22030 | ب | 1,000 |
| Heritage Foundation | 214 Mass. Ave., NE, Wash., DC 2002-4999 | \$ | 200 |
| Institute for Justice | 901 N. Glebe Rd., Ste 900, Arlington, VA 22203 | ❖ | 25,000 |
| LEAP | 121 Mystic Ave., Medford, MA 02155 | ❖ | 3,000 |
| Mackinac Center for Public Policy | 140 W. Main St., POBox 568, Midland, MI 48640-9943 | ❖ | 3,000 |
| Manhattan Institute | 52 Vanderbilt Ave., NY, NY 10017 | \$ | 2,000 |
| Marijuana Policy Project Found. | P. O. Box 77492, Capitol Hill, Wash., DC 20013 | \$ | 25,000 |
| Reason Foundation | 3415 S. Sepulveda Blvd., Ste. 400, L.A., CA 90034-6064 | ⋄ | 000'09 |
| Students for Liberty | P. O. Box 17321, Arlington, VA 22216 | ❖ | 25,000 |
| Media Trackers, Commonwealth Found. | 225 State Street, Suite 302, Harrisburg, PA 17101 | ❖ | 50,000 |
| Independent Institute | 100 Swan Way, Oakland, CA 94621-1428 | ❖ | 10,000 |
| ŢŎĨĄĹŖŨŖŰĢŖŨĻſĊĶŢŢ | | \$ 15 P. S. | ોહુંક <u>ે,7</u> ,કુછે; |
| | | | |

| Philadelphia: | | | |
|-----------------------------------|--|----|--------|
| Legacy Youth Tennis & Education | 4842 Ridge Ave., Phila., PA 19129 | S | 12,500 |
| Foreign Policy Research Institute | 1528 Walnut St., Ste 610, Phila., PA 19102 | ❖ | 1,000 |
| Platt Caddie Scholarship | 1974 Sproul Road, Suite 400, Broomall, PA 19008, | ❖ | 250 |
| Prostate Cancer Foundation | 1617 JFK Blvd., Suite 1840, Philadelphia, PA 19103 | \$ | 1,000 |

TOTAL PHILADELPHIANS OF THE STATE OF THE STA

| The Beach Foundation | | 2013 Contributions | 113 ' |
|---|--|--|---|
| Squam: Bald Peak Community Fund Camp Hale, Friends of Castle Preservation Society Chocorua Chapel Lakes Region Conservation Trust Loon Preservation Committee Squam Lakes Association Squam Lakes Conservation Society Squam Lakes Natural Science Center Moultonborough Historial Society The Wright Museum | P.O. Box 201, Melvin Village, NH 03850 566 Columbus Ave., Boston, MA 02118-1195 P. O. Box 687, Moultonborough, NH 03245-0356 156 Dane Rd. (Rt 25B), P.O. Box 766, Center Harbor, NH 03226 P. O. Box 604, Moultonborough, NH 03254-0604 P. O. Box 204, Holderness, NH 03245-0204 P. O. Box 696, Holderness, NH 03245-0696 P. O. Box 696, Holderness, NH 03245-0696 P. O. Box 173, Holderness, NH 03245- | <u> </u> | 1,000 1,800 1,000 200 25,000 2,400 250 250 |
| TOTALISAUAM | | State of State of the State of | 32/250}` |
| Florida: Naples Botantical Garden Naples Yacht Club Blue Gavel Scholar. | 4820 Bayshore Dr., Naples, FL 34112-7337 700 Fourteenth Ave., South, Naples, FL 34102-7303 | ‹ › ‹› | 1,000 |
| HOTALELORIDA | | SECTION SECTION AND ASSESSMENT OF THE PROPERTY | 2,000 |
| Miscellaneous: Beth Tortolini Foundation JDRF/Juvenile Diabetes Research Foundation Tamworth Community Nurse Association The Barnstormers Theatre Tamworth Outing Club | P. O. Box 1004, Manhasset, NY 11030 240 Southern Blvd., Chatham, NJ 07928 Solders Field, Boston, MA 02163-9904 520 8th Ave., 7th Floor, New York, NY 10018 P.O. Box 311, Tamworth, NH 03886 | ፞ | 250 4,000 100 100 |
| ADTRABINISCEPPANEOUS | というのでは、これには、これには、これには、これには、これには、これには、これには、これに | THE SECTION AND THE SECTION AND THE SECTION AND THE SECTION ASSESSMENT OF THE SECTION ASSESSMENT | 4,550 |



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 you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, wist www.irs gov/efile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file incorme tax returns Enter filer's identifying number Type or print THE BEACH FOUNDATION Name of exempt organization or other filer, see instructions THE BEACH FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO 220 City, town or post office, state, and ZIP code For a foreign address, see instructions | on | | | | |
|---|------------|--|--|--|--|
| Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, wist www.irs gov/efile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Type or or original (no copies needed) Name of exempt organization or other filer, see instructions THE BEACH FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions | on | | | | |
| Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filling of this form, wish www.irs gov/efile and click on e-file for Charities & Nonprofits Part I only Automatic 3-Month Extension of Time. Only submit original (no copies needed). Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Interpret or original (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns The BEACH FOUNDATION The BEACH FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) 300 BARR HARBOR DRIVE, NO. 220 | on | | | | |
| required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Chanties & Nonprofits Part I | on | | | | |
| of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, wist www.irs gov/efile and click on e-file for Chanties & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time income tax returns Type or Name of exempt organization or other filer, see instructions Type or Drint THE BEACH FOUNDATION THE BEACH FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO. 220 | | | | | |
| Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filling of this form, wisit www.irs gov/efile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time for file income tax returns Type or Name of exempt organization or other filer, see instructions THE BEACH FOUNDATION THE BEACH FOUNDATION A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Enter filer's identifying number (Employer identification number (SSN)) Number, street, and room or suite no. If a P.O. box, see instructions 3 0 0 BARR HARBOR DRIVE, NO 2 2 0 | N) or | | | | |
| Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of file income tax returns Type or Name of exempt organization or other filer, see instructions THE BEACH FOUNDATION 23-2897351 Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO 220 | N) or | | | | |
| A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete art I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time income tax returns Type or Name of exempt organization or other filer, see instructions THE BEACH FOUNDATION THE BEACH FOUNDATION Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO. 220 | N) or | | | | |
| A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time for file income tax returns Type or Name of exempt organization or other filer, see instructions THE BEACH FOUNDATION THE BEACH FOUNDATION Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO 220 | N) or | | | | |
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| All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time Enter filer's identifying number Employer identification number (E THE BEACH FOUNDATION THE BEACH FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO. 220 | N) or | | | | |
| Type or print THE BEACH FOUNDATION THE BEACH FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO. 220 | N) or | | | | |
| THE BEACH FOUNDATION 23-2897351 Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO. 220 300 BARR HARBOR DRIVE, NO. 220 | N) or | | | | |
| THE BEACH FOUNDATION 23-2897351 Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO. 220 23-2897351 Social security number (SSN) | , | | | | |
| THE BEACH FOUNDATION 23–2897351 Number, street, and room or suite no. If a P.O. box, see instructions 300 BARR HARBOR DRIVE, NO 220 THE BEACH FOUNDATION 23–2897351 Social security number (SSN) | | | | | |
| Tile by the due date for library our etum See and Toom or suite no. If a P.O. box, see instructions and security number (SSN) Social security number (SSN) | | | | | |
| 300 BARR HARBOR DRIVE, NO. 220 | | | | | |
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| | | | | | |
| WEST CONSHOHOCKEN, PA 19428 | | | | | |
| | | | | | |
| Enter the Return code for the return that this application is for (file a separate application for each return) | 4 | | | | |
| | | | | | |
| Application Return Application Ret | urn | | | | |
| | de | | | | |
| Form 990 or Form 990-EZ 01 Form 990-T (corporation) 0 | 7 | | | | |
| | 8 | | | | |
| | 9 | | | | |
| | 0 | | | | |
| Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 | 1 | | | | |
| | 2 | | | | |
| THOMAS E. BEACH - C/O 300 BARR HARBOR DRIVE, STE 220 - | | | | | |
| ● The books are in the care of ▶ WEST CONSHOHOCKEN, PA 19428 | | | | | |
| Telephone No ► 610-940-1111 Fax No ► | | | | | |
| If the organization does not have an office or place of business in the United States, check this box | | | | | |
| If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) | this | | | | |
| box > If it is for part of the group, check this box > and attach a list with the names and EINs of all members the extension is for | | | | | |
| 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until | | | | | |
| AUGUST 15, 2014 , to file the exempt organization return for the organization named above. The extension | | | | | |
| is for the organization's return for | | | | | |
| ► X calendar year 2013 or | | | | | |
| tax year beginning , and ending | | | | | |
| | | | | | |
| 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return | | | | | |
| Change in accounting period | | | | | |
| 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any | | | | | |
| | | | | | |
| | 97. | | | | |
| b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and | | | | | |
| estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 1.0 | 97. 75. | | | | |
| estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 1,0 c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required. | | | | | |
| estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions 3b \$ 1,0 | | | | | |