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Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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 For calendar year 2013 or tax year beginning 6/1/2013 and ending 5/31/2014 Name of foundation A Employer Identification number STUPELL FOUNDATION, INC. Number and street (or PO box number if mail is not delivered to street address) Room/suite 13-6106669 B Telephone number (see instructions) City or town ZIP code State **SCARDSALE** NY 10583 (914) 472-6357 Foreign country name Foreign province/state/county Foreign postal code C If exemption application is pending, check here Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, Address change Name change check here and attach computation E If private foundation status was terminated under Check type of organization Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Fair market value of all assets at ☐ Cash X Accrual Accounting method F If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(8), check here line 16) ▶ \$ 218,066 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily expenses per income ıncome purposes books equal the amounts in column (a) (see instructions)) (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ ☐ If the foundation is **not** required to attach Sch B Interest on savings and temporary cash investments Dividends and interest from securities 2,035 2,035 2.035 Gross rents Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 SCANNEC MAY Revenue Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain ä Income modifications 10a Gross sales less returns and allowances Less Cost-of-goods.sold Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 2.035 2.035 2.035 13 Compensation of officers, directors, trustees, etc. Administrative Expenses 14 Other employee salaries and wages . 15 Pension plans, employee benefits Legal fees (attach schedule) 16a Accounting fees (attach schedule) . b 2,250 2,250 2.250 Other professional fees (attach schedule) C 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings Operating and 22 Printing and publications 23 Other expenses (attach schedule) 145 145 145 24 Total operating and administrative expenses. Add lines 13 through 23 2,395 2,395 2,395 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 2,395 2,395 2,395 0 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements -360 Net investment income (if negative, enter -0-) 0

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

 $I_i = c_i$

Form 990-PF (2013)

Par	+ 11	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End of	year
1 (1		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	a	(c) Fair Market Value
	1	Cash—non-interest-bearing	61,705	59	,405	59,405
	2	Savings and temporary cash investments	126,721	128	,661	128,661
	3	Accounts receivable				
		Less. allowance for doubtful accounts				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)			- [
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts				- · · · · · · · · · · · · · · · · · · ·
ফ	8	Inventories for sale or use			$\neg \uparrow$	
Assets	9	Prepaid expenses and deferred charges		 -		· · · · · · · · · · · · · · · · · · ·
As	10a	Investments—U S. and state government obligations (attach schedule)			$\neg +$	
1	b	Investments—corporate stock (attach schedule) .	30,000	30	,000	30,000
	c	Investments—corporate bonds (attach schedule)	30,000		,000	
- [.	11	Investments—land, buildings, and equipment basis		9.8	$\neg +$	~%\$i
	••	Less: accumulated depreciation (attach schedule)				<u> </u>
- 1.	12	Investments—mortgage loans			\dashv	
- 1	13	Investments—other (attach schedule)			\dashv	
	14	Land huldings and agreement have			\dashv	
	1-4	Less: accumulated depreciation (attach schedule)				
	15	Other assets (describe			\longrightarrow	
- 1		`			\longrightarrow	
	16	Total assets (to be completed by all filers—see the	240.400	040		040.000
+	17	Instructions. Also, see page 1, item I)	218,426		,066	218,066
		Accounts payable and accrued expenses	1,841	1	,841	
es	18 40	Grants payable			\dashv	
=	19	Deferred revenue				(₩
١٩	20	Loans from officers, directors, trustees, and other disqualified persons				
֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	21	Mortgages and other notes payable (attach schedule)	7			
	22	Other liabilities (describe)	1.011			
+	23	Total liabilities (add lines 17 through 22)	1,841	1	,841	
ဖွ		Foundations that follow SFAS 117, check here .				**
ၓၟႍ႞		and complete lines 24 through 26 and lines 30 and 31.				,
<u>a</u>	24 25	Unrestricted				
Ba	25	Temporanly restricted		_	—	
ַ פַ	26	Permanently restricted				
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here				
٦	^=	and complete lines 27 through 31.			i	
S	27 22	Capital stock, trust principal, or current funds				
ě	28	Paid-in or capital surplus, or land, bldg., and equipment fund				33. (· ·
l Si	29	Retained earnings, accumulated income, endowment, or other funds	216,585		,225	
7	30	Total net assets or fund balances (see instructions) .	216,585	216	,225	
ž	31	Total liabilities and net assets/fund balances (see			l	,
		instructions)	218,426	218	,066	
Par	_	Analysis of Changes in Net Assets or Fund Balances	·			
		net assets or fund balances at beginning of year—Part II, column (a)	, line 30 (must agree wi	th	- 1	
		of-year figure reported on prior year's return)		, [1	216,585
		amount from Part I, line 27a			2	-360
		r increases not included in line 2 (itemize)			3	
		ines 1, 2, and 3		. , [4	216,225
		eases not included in line 2 (itemize)		[5	
_ 6	ıotal	net assets or fund balances at end of year (line 4 minus line 5)—Part	t II, column (b), line 30	[6	216.225

Part	V Capital Gains an	d Losses for Tax on Investr	ment Income				
		he kind(s) of property sold (e g , real estate ouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date ad (mo , da		(d) Date sold (mo , day, yr)
<u>1</u> a			···				
<u>b</u>							
<u>c</u>				<u> </u>			
d	· · · · · · · · · · · · · · · · · · ·			<u> </u>			
<u> </u>	-, ,,		,	<u>l. </u>			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale	_		n or (loss) (f) minus (g)
<u>a</u>							
<u> </u>							
<u> </u>							
<u>d</u>							
ее							
	Complete only for assets s	howing gain in column (h) and owner	d by the foundation	n on 12/31/69	(1)	Gains (Co	I. (h) gain minus
	(i) FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ssofcol (ı) I (j), ıfany	col		t less than -0-) or from ∞l (h))
<u>a</u>							
<u> </u>							
<u>c</u>							
<u>d</u>							
<u>e</u>			L				
2	Capital gain net income or	r (ner cabital loss)	, also enter in Pa i), enter -0- in Pa	7	2		0
3	. •	n or (loss) as defined in sections in the section in th	` ' '	er-0- ın)			
	Part I, line 8			. }	3		0
Part	V Qualification Une	der Section 4940(e) for Red	uced Tax on I	Net Investment	Income		
Wast	tion 4940(d)(2) applies, leavened the foundation liable for the s." the foundation does not a	ve this part blank section 4942 tax on the distributa qualify under section 4940(e). Do	able amount of a	ny year in the base	e period?		☐ Yes 🔀 No
1		ount in each column for each year			na any entr		
<u> </u>	(a)		, see the mistrac		ig any enu		(d)
0-1	Base period years	(b) Adjusted qualifying distribution	s Net value	(c) of noncharitable-use as	ssets		stribution ratio
Cal	endar year (or tax year beginning in 2012	2	32,000		9,178	(col (b)	divided by col (c))
	2012		52,000	213	9,170		0 146000
	2010						0 000000
	2009		1,000	250	0,917		0 000000
	2008		37,866		0,403		0 259321
	2000		77,0001		3,403	1	0 230981
2	Total of line 1, column (d)				. 2		0 636303
3	. ,	for the 5-year base period—divid		 a.2 hv.5. or hv.the		 -	0 636302
		dation has been in existence if les			3_		0 212101
4	Enter the net value of non	charitable-use assets for 2013 fro	om Part X, line 5	· •	4	ļ	214,972
5	Multiply line 4 by line 3				. 5		45,596
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			. 6	ļ	
7	Add lines 5 and 6 .				7		45,596
8	Enter qualifying distribution				8	<u> </u>	0
	If line 8 is equal to or great Part VI instructions	iter than line 7, check the box in F	Part VI, line 1b, a	and complete that	part using a	a 1% ta:	x rate. See the

Page 4

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instru-	ctions)			
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)	_			لـــــــا
b		1		-	
_	here ▶ ☐ and enter 1% of Part I, line 27b				
C	Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2		0	
3	Add lines 1 and 2	3		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			
5	——————————————————————————————————————	5		0	
6	Credits/Payments ⁻				
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 223				į
b	Exempt foreign organizations—tax withheld at source			ļ	
C	Tax paid with application for extension of time to file (Form 8868)			ı	
_d	Backup withholding erroneously withheld				
7		7		223	
8		8			
9	_	9		0	
10 11		10 11		223 0	
	/II-A Statements Regarding Activities	·• I		0	
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
10	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		<u> </u>		
-	Instructions for the definition)?		1 _b		х
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials			\$.4.	
	published or distributed by the foundation in connection with the activities.				1
С	Did the foundation file Form 1120-POL for this year?		1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶\$, \$	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	:d	,	4	1
	on foundation managers. \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, artic	cles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		Х
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			. !	
	By language in the governing instrument, or				l `
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	t			
_	conflict with the state law remain in the governing instrument?	•	6		_X_
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	•	7	X	 -
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NY				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	al .			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	Х	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)				
	or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? It	l f			١.
40	"Yes," complete Part XIV		9	 	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the names and addresses	∌IF	10		x

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?

N/A

Х

3b

4a

Part	VII-B	Statements Regarding Activities	for Wi	<u>hich Form 4</u>	4720 N	lay Be Re	quire	(contin	ued)			
5a		e year did the foundation pay or incur any on propaganda, or otherwise attempt to in			section	4945(e))?		Yes	X No			
		nce the outcome of any specific public ele y or indirectly, any voter registration drive			•	to carry on	,	☐ Yes	X No			
		le a grant to an individual for travel, study,						Yes	⊠ No			
	(4) Provid	de a grant to an organization other than a n 509(a)(1), (2), or (3), or section 4940(d)	charital	ble, etc., orga	ınızatıor			Yes	—			
	(5) Provid	de for any purpose other than religious, ch ses, or for the prevention of cruelty to chili	antable	e, scientific, li	•	or education	nal	Yes	⊠ No			
b	If any ans	swer is "Yes" to 5a(1)–(5), did any of the tr	ansact	ions fail to qu	alify un	der the exc	eptions	describe	d in			
	Regulatio	ns section 53.4945 or in a current notice r	egardır	ng disaster as	ssistand	e (see instr	uctions)?		5b	N/A	
С	If the ans	tions relying on a current notice regarding wer is "Yes" to question 5a(4), does the fo it maintained expenditure responsibility for	undatio	on claim exen				Yes	► □ No			
	If "Yes," a	attach the statement required by Regulation	ns sec	tion 53 4945-	-5(d)							
6a		oundation, during the year, receive any fun onal benefit contract?	ds, dire	ectly or indire	ctly, to p	oay premiur	ns	☐ Yes	X No			
b		undation, during the year, pay premiums,	directly	or indirectly,	on a po	ersonal ben	efit con	tract?		6b		Х
		o 6b, file Form 8870							_			
7a b		e during the tax year, was the foundation a pa Iid the foundation receive any proceeds or					e transs	Yes	X No		N/A	
		nformation About Officers, Directo							aid Em			
		and Contractors										
1	List all o	fficers, directors, trustees, foundation r										
		(a) Name and address	hou	e, and average irs per week led to position	(lf r	mpensation not paid, iter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	nse ac	
	y Dorsen		Directo									
	nn Road S e Antin	carsdale, NY 10583	Directo	1 00		0						
		South Scarsdale, NY 10583	Directo	1 00		0						
												-
2	Compension NONE."	sation of five highest-paid employees (other t	han those in	cluded	on line 1—	see ins	structions	s). If no	ne, ent	er	
		nd address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	eek	(c) Comper	isation	(d) Contribution (d) Co	benefit deferred	(e) Expe	nse ac allowan	
NONE												
			-									-
						Ÿ						
Total	number of	other employees paid over \$50,000		<u>. </u>		<u> </u>		L				

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Er and Contractors (continued)	nployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO!	NE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	}
	_
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/a	
•••••••••••••••••••••••••••••••••••••••	
2	
3	
	1
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All others are all the same of	
All other program-related investments. See instructions	
3	
Tabel Add Incod About to 0	
Total. Add lines 1 through 3	<u> </u>

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Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	n foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	T	
	purposes:		
а	Average monthly fair market value of securities	1a	30,000
b	Average of monthly cash balances	1b	188,246
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	218,246
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	ll	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	218,246
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	3,274
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	214,972
6	Minimum investment return. Enter 5% of line 5	6	10,749
Part :			
1	Minimum investment return from Part X, line 6	1	10,749
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013 (This does not include the tax from Part VI) . 2b	1 1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	10,749
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	10,749
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,		
	line 1	7	10,749
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0
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		
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	0
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	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe qualifies for the section 4940(e) reduction of tax in those years	ther the fou	ındatıon

art	VIII Undistributed Income (see instructions	5)			
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
	line 7		· · · · · · · · · · · · · · · · · · ·		10,749
2	Undistributed income, if any, as of the end of 2013				
а	Enter amount for 2012 only			0	
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2013				
а	From 2008 93,000				
b	From 2009				∢
C	From 2010				
d	From 2011				Sq.
е	From 2012				*
f	Total of lines 3a through e	216,000			· · · · · · · · · · · · · · · · · · ·
4	Qualifying distributions for 2013 from Part XII,			·	<i>'</i>
	line 4. ▶ \$.*,
	Applied to 2012, but not more than line 2a .				
b	Applied to undistributed income of prior years				*
	(Election required—see instructions)				· 3
С	Treated as distributions out of corpus (Election				
	required—see instructions)		₹\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1	· Min
d	Applied to 2013 distributable amount				
е	Remaining amount distributed out of corpus		· · · · · · · · · · · · · · · · · · ·	š .	
5	Excess distributions carryover applied to 2013	10,749		*	10,749
	(If an amount appears in column (d), the same		4) \$,- ≪	
	amount must be shown in column (a))		~*,3, ×	·	
6	Enter the net total of each column as			%	
	Indicated below:			* **	
a	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	205,251			
b	Prior years' undistributed income. Subtract	,		`\}	
	line 4b from line 2b		0		<u> </u>
С	Enter the amount of prior years' undistributed	<i>ii.</i> .		` \$	>
	income for which a notice of deficiency has	ĺ			
	been issued, or on which the section 4942(a)	^* ~		* ^;	` r
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable			4	į ;
	amount—see instructions .		· · · · · · · · · · · · · · · · · · ·		<u> </u>
е	Undistributed income for 2012 Subtract line		,		
	4a from line 2a. Taxable amount—see				79
	Instructions		· · · · · · · · · · · · · · · · · · ·	0	
T	Undistributed income for 2013 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2014				_
7	Amounts treated as distributions out of corpus				0
•	· '				
	to satisfy requirements imposed by section				
8	170(b)(1)(F) or 4942(g)(3) (see instructions)				
0	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) .	00.054			
9	Excess distributions carryover to 2014.	82,251			
J	Subtract lines 7 and 8 from line 6a	400.000			
10	Analysis of line 9.	123,000			
а	•	İ			1
a b	Excess from 2009	l			,
C	Excess from 2010				
d					'
	Excess from 2012	İ			
	LAGGG HOITI 2010				'

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

None

None

factors:

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	XV Supplementary Information (continuation)	nued)			
3_	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ture Payment	· _r ···
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
		or substantial contributor	recipient		
а	Name and address (home or business) Paid during the year	or substantial contributor	recipient		
b	Total			▶ 3 a	C
	Total .				

	ILAVI-	A Analysis of Income-Producing Ac					
Ente	er gross	amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by secti	on 512, 513, or 514	
							(e) Related or exempt
			(a)	(b)	(c)	(d)	function income
1	Progra	am service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
	a						
						·	
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	g Fe	ees and contracts from government agencies					
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3	Interes	st on savings and temporary cash investments					2,035
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6		ental income or (loss) from personal property					
7		investment income .					
8		or (loss) from sales of assets other than inventory					
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STUPELL FOUNDATION, INC. Form 990-PF (2013) Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described No Yes in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a noncharitable exempt organization of. (1) Cash . 1a(1 (2) Other assets Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization . . . 1b(2) (3) Rental of facilities, equipment, or other assets . 1b(3) (4) Reimbursement arrangements 1b(4) 1b(5) (6) Performance of services or membership or fundraising solicitations Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☐ No b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return with the preparer shown below Here Foundation Manager (see instructions)? X Yes No Signature of officer or trustee

Print/Type preparer's name

Firm's name > Jeffrey D Shapiro, CPA

Firm's address > 2380 Route 9 South, Suite 12

Jeffrey Shapiro

Paid

Preparer

Use Only

Pred

Check X If

Firm's EIN

Phone no

self-employed P00389220

20-0101193

732-252-6613

Form 8868

(Rev January 2014)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.
Information about Form 8868 and its instructions is at www.irs.gov/form8868.

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, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits 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 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 Enter filer's identifying number, see instructions Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print STUPELL FOUNDATION, INC 13-6106669 Number, street, and room or suite no. If a PO box, see instructions Social security number (SSN) File by the due date for 79 PENN ROAD filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return See instructions SCARDSALE, NY 10583 Enter the Return code for the return that this application is for (file a separate application for each return) 04 **Application** Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A NR Form 4720 (individual) Form 4720 (other than individual) 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of ► AUDREY DORSEN Telephone No ▶ 914-472-6357 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) If this is ▶ If it is for part of the group, check this box for the whole group, check this box . . . and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 1/15/2015 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ▶ calendar year ____ or ► X tax year beginning 6/1/2013 , and ending 5/31/2014 If the tax year entered in line 1 is for less than 12 months, check reason 2 Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a 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 223 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 0 Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for

Form 8868 (Re	v 1-2014)				Page 2
• If you are Note. Only	e filing for an Additional (Not Automatic) complete Part II if you have already been e filing for an Automatic 3-Month Extens	granted an a	utomatic 3-month extension on a		► X
Part II	Additional (Not Automatic) 3-Mon	th Extens	ion of Time. Only file the original	ginal (no copies needed)	
				ler's identifying number, see ir	
Type or	Name of exempt organization or other filer,	see instruction	ns.	Employer identification number (EIN)	or
print	STUPELL FOUNDATION, INC			13-6106669	
	Number, street, and room or suite no. If a P	O box, see in	structions	Social security number (SSN)	
File by the due date for	79 PENN ROAD			<u> </u>	
filing your return See instructions	City, town or post office, state, and ZIP code SCARDSALE, NY 10583	For a foreigi	n address, see instructions.		
Enter the R	eturn code for the return that this applicate	on is for (file	a separate application for each r	eturn)	04
Application	n	Return	Application		Return
Is For		Code	Is For		Code
Form 990 c	or Form 990-EZ	01	Control of the Contro		300
Form 990-E	3L	02	Form 1041-A		08
Form 4720	(individual)	03	Form 4720 (other than individual	al)	09
Form 990-F	PF	04	Form 5227		10
Form 990-	T (sec 401(a) or 408(a) trust)	05	Form 6069		_ 11
Form 990-	T (trust other than above)	06	Form 8870		12
	ot complete Part II if you were not already ks are in the care of Audrey Dorsen	granted an a	automatic 3-month extension on a	a previously filed Form 8868.	
	ne No ▶ 914-472-6357		Fax No. ▶		
•	ganization does not have an office or place	of business	•	box	. ▶ □
	for a Group Return, enter the organization				nis Is
for the whol		. If it is for p	part of the group, check this box.		attach a
•	uest an additional 3-month extension of tin		4/15/2015	5/04/904	_
J FOLG	alendar year, or other tax year t	Jegiririing	6/1/2013 ,	and ending 5/31/2014	ŧ

Signature and Verification must be completed for Part II only.

State in detail why you need the extension Information necessary to complete an accurate and complete return has not yet

Under penalties of penury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using

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 and any

If the tax year entered in line 5 is for less than 12 months, check reason

EFTPS (Electronic Federal Tax Payment System). See instructions

Change in accounting period

nonrefundable credits See instructions.

amount paid previously with Form 8868.

been compiled.

Signature >	Title ► CPA	Date ▶	1/13/2015
			0000

0

223

Initial return Final return

8a

8b

Part I, Line 16b (990-PF) - Accounting Fees

	2,250	2,250	2,250	0
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1 Jeffrey D Shapiro, CPA	2,250	2,250	2,250	

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

		145	145	145	0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Registration fees	50	50	50	
2	Investment fund fees	95	95	95	

Part II, Line 10b (990-PF) - Investments - Corporate Stock

		30,000	30,000	30,000	30,000
	Num. Shares/	Book Value	Book Value	FMV	FMV
Description	Face Value	Beg of Year	End of Year	Beg. of Year	End of Year
Lord Abbot Bond C (BDLAX)	3,759	30,000	30,000	30,000	30,000

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

Expense
Avg Hrs Comnencation
Transition Country
n Code
State 7 7in Code
45
"X"
Check X*
News