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990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter Social Security numbers on this form as it may be made public. OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf. 07/01 , 2013, and ending 06/30, 2014 For calendar year 2013 or tax year beginning A Employer identification number Name of foundation ROBERT DELANEY AND PAMELA CRAIG FOUNDATION F/K/A ROBERT AND PAMELA DELANEY FOUNDATION 13-3984315 Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) (212) 440-0800C/O BCRS ASSOCIATES, LLC 77 WATER STREET, 9TH FLOOR City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here NEW YORK, NY 10005 G Check all that apply Initial return of a former public charity Initial return 1 Foreign organizations, check here Amended return Final return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization | X | Section 501(c)(3) exempt private foundation E if private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here . J Accounting method | X Cash I Fair market value of all assets at Accrual if the foundation is in a 60-month termination Other (specify) __ end of year (from Part II, col (c), line under section 507(b)(1)(B), check here . > 10,421,294. (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in income N/A expenses per purposes income books column (a) (see instructions)) (cash basis only) 3,034,238. Contributions, gifts, grants, etc., received (attach schedule).

Check I if the foundation is not required to attach Sch B 25. 25 ATCH 1 3 Interest on savings and temporary cash investments 124,760. ATCH 2 124,760. Dividends and interest from securities b Net rental income or (loss) 6,919,881. 6 a Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all 7,429,914. assets on line 6a 6,919,881. Capital gain net income (from Part IV, line 2) . 8 Net short-term capital gain Income modifications . 10 a Gross sales less returns and allowances · · · b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 10,078,904. 7,044,666. Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages Pension plans, employee benefits 15 Expen 16 a Legal fees (attach schedule) 1,700 1,700. 3,400. **b** Accounting fees (attach schedule)ATCH 3 RECEIVED Administrative c Other professional fees (attach schedule). . . 17 2,500 18 Taxes (attach schedule) (see instructions) ATCH . 4 19 Depreciation (attach schedule) and depletion. 20 Travel, conferences, and meetings 21 22 Printing and publications 1,712. 1,712 23 Other expenses (attach schedule) ATCH .5. . Total operating and administrative expenses 7,612. 3,412. 1,700. Add lines 13 through 23 345,000. 345,000. 25 Contributions, gifts, grants paid 346,700. 352,612. 3,412. 26 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 9,726,292 a Excess of revenue over expenses and disbursements 7,041,254. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-).

JSA For Paperwork Reduction Act Notice, see instructions

Form 990-PF (2013)

Part l		Balanca Shaata	Attached schedules and amounts in the	Beginning of year	E	nd of year		
نا	en t l	Baiance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bear	ıng					
	2		cash investments	259,191.	241,41	14. 241,414		
	3	Accounts receivable ▶			8	****		
		Less allowance for dou	btful accounts ▶					
	4					>		
	-		btful accounts ▶					
	5							
	6		officers, directors, trustees, and other					
	٥ ا		, , , , , , , , , , , , , , , , , , , ,					
	_		tach schedule) (see instructions)	95	· · · · · · · · · · · · · · · · · · ·			
	7		receivable (attach schedule)	~ ##	Mahaman a wara a	× 30.00		
	_		btful accounts ▶					
ssets	8		e					
155	9		eferred charges					
~			e government obligations (attach schedule).	1 020 424	0 600 74	10 170 000		
			stock (attach schedule) ATCH 6	1,839,434.	8,688,74	11. 10,179,880		
	4.4 C		bonds (attach schedule)	W/W				
	11	Investments - land, buildings and equipment basis Less accumulated deprecia (attach schedule)	· • •		A	and he seems a set h		
	12	,						
	12	Investments - other (atta	ach schedule)					
	14	Land buildings and	_			~ · · · · · · · · · · · · · · · · · · ·		
		Less accumulated deprecia	tion					
	15	(attach schedule) Other assets (describe	>)					
	16		completed by all filers - see the					
	10		age 1, item I)	2.098.625	8,930,15	55. 10,421,294.		
_	47			2,030,020.	0,000,10	3		
	17		ccrued expenses					
	18			-		- ` ` .		
ë	19					<u> </u>		
Liabilities	20		rs, trustees, and other disqualified persons					
į	21		tes payable (attach schedule)					
_	22	Other liabilities (describe	; ▶)			— ř :		
	23	Total liabilities (add line	s 17 through 22)	0				
			low SFAS 117, check here . ▶ 📖					
ű		and complete lines 2	24 through 26 and lines 30 and 31.					
ances	24	Unrestricted						
ā	25	Temporarily restricted				**		
ő	26	Permanently restricted .				· · · · · · · · · · · · · · · · · · ·		
Net Assets or Fund Bal			not follow SFAS 117, ▶ 🗓					
피			plete lines 27 through 31.			** * * * * * * * * * * * * * * * * * * *		
ō	27		cipal, or current funds	2,098,625.	8,930,15	55.		
띪	28		land, bldg , and equipment fund		.,,			
SS	29	•						
٦		•	ilated income, endowment, or other funds	2,098,625.	8,930,15	\$5		
Ž	30 31		het assets/fund balances (see	- 2,030,023.	0,550,15	'3 -		
			,	2,098,625.	8,930,15			
			nggo in Not Accets or Fund F		0,930,13	13.1		
			inges in Net Assets or Fund E					
1			alances at beginning of year - Part II					
			d on prior year's return)			<u>1</u> 2,098,625.		
		er amount from Part I,				9,726,292.		
3	Othe	er increases not includ	led in line 2 (itemize) ▶		 -	3		
4	Add	lines 1, 2, and 3				<u>4</u> 11,824,917.		
			line 2 (itemize) ► ATCH 7			5 2,894,762.		
			alances at end of year (line 4 minus l			6 8,930,155.		

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	and Losses for Tax on Inv		(b) How	(c) Date	(d) Data cold
2-story b	P - Purchase D - Donation	acquired (mo, day, yr)	(d) Date sold (mo , day, yr)		
1a SEE PART IV SCHE					
<u>b</u>					
<u>C</u>					
<u>d</u>					
<u>e</u>		(h) Gain or (lo	l lee)		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(e) plus (f) mini	
<u>a</u>					
<u>b</u>					
c d					
e					
	showing gain in column (h) and owne	d by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
а					
b					
С					
d					
е		<u> </u>			
2 Capital gain net income or	(net capital loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	6	919,881.
3 Net short-term capital gair	انا or (loss) as defined in sections 12	· · · · · · · · · · · · · · · · · · ·			<u> </u>
• •	t I, line 8, column (c) (see insti				
		i	3		0
		duced Tax on Net Investment li	ncome		
	the section 4942 tax on the distrib	outable amount of any year in the b	ase period	12	Yes X No
	not qualify under section 4940(e)	, see the instructions before making	any entre		
(a)	(b)	(c)	any entir	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2012	1,085,850.	5,986,457.			0.181384
2011	848,054.	4,092,534.			0.207220
2010	616,494.	4,283,196.			0.143933
2009	650,888.	3,891,048.			0.167278
2008	175,550.	3,572,834.		<u>.</u>	0.049135
2 Total of line 1, column (d)			2		0.748950
	for the 5-year base period - divide	the total on line 2 by 5 or by the			0.740330
•	dation has been in existence if less	• • •	3		0.149790
4 Enter the net value of non	charitable-use assets for 2013 fro	m Part X, line 5	4	8,	846,742.
5 Multiply line 4 by line 3			5	1,	325,153.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		70,413.
			7	1,	395,566.
8 Enter qualifying distributio	ns from Part XII, line 4		8 346,700.		
If line 8 is equal to or gre Part VI instructions	eater than line 7, check the box ii	n Part VI, line 1b, and complete t	nat part i	using a 1% tax	rate See the

JSA 3E1430 1 000

Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ection	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			4
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		70,	413.
	here ▶ X and enter 1% of Part I, line 27b			3%
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			*
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			112
3	Add lines 1 and 2		70,	413.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		7.0	0
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0- ,		70,	413.
6	Credits/Payments	. 2.3		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 576.	~~ ^		//\$
b	Exempt foreign organizations - tax withheld at source 6b Tax paid with application for extension of time to file (Form 8868) 6c 75,000.			Marie
С				,4094
d			75	576.
7	Total credits and payments Add lines 6a through 6d		/ , , .	570.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax and it the total of mice of an order to make their mice of an order to make their mice of the mice		5.	163.
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
_	rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		Х
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
~	definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			1,901,901
	distributed by the foundation in connection with the activities			*
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		^	T.
	(1) On the foundation \blacktriangleright \$ 0 (2) On foundation managers \blacktriangleright \$		43.0	1229s .
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			ļ
	foundation managers > \$0].	-	- ^>
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	ļ ,		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X	
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			V. 7.2
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		,	*****
	By language in the governing instrument, or			1.00
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict		v	32
	with the state law remain in the governing instrument?	6	X 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		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NJ,	٠,		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		X	1
_	of each state as required by General Instruction G? If "No," attach explanation	8b	Λ.	
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)? If "Yes," complete			X
	Part XIV	9		T
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and	40		l x
	addresses	10	O DE	

FOIL	1990-FF (2013) ROBERT BEHAVET THE TRIBETT CHARGE TOOKSTITION.			-3
Pa	rt 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			İ
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13			X	
	Website address ▶ N/A			
14	The books are in care of ▶ BCRS_ASSOCIATES, LLC Telephone no ▶ 212-440	-080	0	
	Located at ▶77 WATER STREET, 9TH FLOOR NEW YORK, NY ZIP+4 ▶ 10005			
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 authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16_	L	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			,
	the foreign country		434	X.00 x 0
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1 8	During the year did the foundation (either directly or indirectly)	١.		i
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	×,	, ever	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	^4,	#\ \ #>	
	disqualified person? Yes X No			,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	N.,		1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	* 5 * 56		
	the benefit or use of a disqualified person)?	XX.~		
	(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	'		1
	termination of government service, if terminating within 90 days), Yes X No			
t	of If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			<i>(</i> -
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b_		N/A
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2013?	1c		N/A
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			, 25 m
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			Î
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and			1
	6e, Part XIII) for tax year(s) beginning before 2013?			
	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		N/A
	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>	-		· '
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	ł		İ
	at any time during the year?			,
ŧ	olf "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	W 14		,,
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			٠
	foundation had excess business holdings in 2013)	3b		N/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	L	Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		A	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		X
	F	QC	N_DE	/2013\

5a	During the year did the foundation pay or incur any amou	int to					,		
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	1 4945(e))?	. Yes X N	lo				
	(2) Influence the outcome of any specific public ele	ction (see section 4	1955), or to carry or	n,					
	directly or indirectly, any voter registration drive?			. Yes X N	lo				
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No								
	(4) Provide a grant to an organization other than a						1 :		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (lo l		'		
	(5) Provide for any purpose other than religious, ch			•			,		
							,		
	purposes, or for the prevention of cruelty to children of			• — —					
b	If any answer is "Yes" to 5a(1)-(5), did any of the			xceptions described			N/A		
	Regulations section 53 4945 or in a current notice regard	•			5b	1/	N/A		
	Organizations relying on a current notice regarding disas				•□	1.55			
С	If the answer is "Yes" to question 5a(4), does the					ľ.	1		
	because it maintained expenditure responsibility for the g	rant?		A Yes N	lo		1		
	If "Yes," attach the statement required by Regulations sec	tion 53 4945-5(d)				٠.			
6a	Did the foundation, during the year, receive any fund	ds, directly or indire	ctly, to pay premium	s	20,014.7	'	;		
	on a personal benefit contract?			. Yes X N	lo	1 ~			
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a	personal benefit contrac	xt?	. 6b		Х		
_	If "Yes" to 6b. file Form 8870	· · · · · · · · · · · · · · · · · · ·					i		
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X N	ا ها		1 1		
	If "Yes," did the foundation receive any proceeds or have				. 7b	-	N/A		
	t VIII Information About Officers, Directors	. Trustees. Foun	dation Managers.	Highly Paid Emp	lovees.				
	and Contractors		-						
_1	List all officers, directors, trustees, foundation r	nanagers and thei (b) Title, and average							
	(a) Name and address	hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expen				
		devoted to position	enter -0-)	and deferred compensation	 				
			0	,	1		0		
ATC	н 8				1				
2	Compensation of five highest-paid employees	(other than thos	e included on line	e 1 - see instruct	ions). If n	one,	enter		
	"NONE."	 		(d) Contributions to					
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expen	se accor	unt, es		
		devoted to position		compensation	ļ				
NON	E								
			0	(1		0		
		,							
Teta	number of other employees paid over \$50,000 .								
iota	number of other employees paid over \$50,000 .	<u> </u>		<u> </u>	Form 99	∩_PE	(2012)		
					rom 33	U-F F	(∠∪13)		

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3 Five highest-paid independent contractors for professional services (see instructions) If none, enter "NONE."
	(c) Compensation
N/A	NONE
NONE	NON1
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
- Commany of Direct Charles Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information organizations and other beneficianes served, conferences convened, research papers produced, etc.	on such as the number of Expenses
1 PLEASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY DIRECT	
CHARITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SUPPORT, BY	
CONTRIBUTIONS, OTHER ORGANIZATIONS EXEMPT UNDER INTERNAL	NONE
2 REVENUE CODE SECTION 501(C)(3).	
·,	
3 N/A	
3 N/A	
4 N/A	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
- N/D	NONE
2 N/A	
All other program-related investments See instructions	
3_N/A	
Total. Add lines 1 through 3	
Total. Add lines I dirough 5	Form 990-PF (2013)

Form	990-PF (2013)		rage 0
Par	see instructions)	gn foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes Average monthly four market value of cocurries	1a	8,738,976.
a	Average of monthly fair market value of securities	1b	242,488.
	Average of monthly cash balances	1c	NONE
C	Fair market value of all other assets (see instructions)	1d	8,981,464.
a	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and		0,301,404.
е		\	
2	1c (attach detailed explanation) 1e	2	
3	Acquisition indebtedness applicable to line 1 assets	3	8,981,464.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		0,301,404.
~		4	134,722.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,846,742.
6	Minimum investment return. Enter 5% of line 5	6	442,337.
Dar	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found		112,007.
rai	and certain foreign organizations check here ▶ and do not complete this part)	Gationo	
1	Minimum investment return from Part X, line 6	1	442,337.
	Tax on investment income for 2013 from Part VI, line 5		75.
b			
С	Add lines 2a and 2b	2c	70,413.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	371,924.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	371,924.
6	Deduction from distributable amount (see instructions)	6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	371,924.
Dog	XII Qualifying Distributions (see instructions)		
Гаг		,	
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	346,700.
b	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	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	346,700.
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	70,413.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	276,287.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years	alculating w	hether the foundation

Form 990-PF (2013)

Form 990-PF (2013)

Page 9

_	irt XIII Undistributed Income (see instru	ictions)		-	1 090 0
	Ondistributed income (see instit	(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part XI,	Corpus	Years prior to 2012	2012	2013
•	line 7	***************************************			371,924.
2	Undistributed income, if any, as of the end of 2013				
_	Enter amount for 2012 only	,	·	NONE	
	Total for pnor years 20,20,20	, , ,		*	
3	Excess distributions carryover, if any, to 2013				
а	From 2008 NONE				
	From 2009 463, 360.				
С	From 2010 418,346.				
	From 2011 651, 919.				
	From 2012 800, 927.	4.00	,		
	Total of lines 3a through e	2,334,552.			
4	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$ 346,700.				
а	Applied to 2012, but not more than line 2a				
b	Applied to undistributed income of prior years				
-	(Election required - see instructions)	~ .			
С	Treated as distributions out of corpus (Election		^ ~~	***.	
	required - see instructions)				346,700.
	Applied to 2013 distributable amount				3107:001
е 5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2013	25,224.			25,224.
3	(If an amount appears in column (d), the same	20,2211			
	amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:		`		*,`
2	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,309,328.			
	, ,				
D	Prior years' undistributed income Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has			j	
	been issued, or on which the section 4942(a) tax has been previously assessed	*			
A	Subtract line 6c from line 6b Taxable				
ŭ	amount - see instructions				
е	Undistributed income for 2012 Subtract line				
	4a from line 2a Taxable amount - see instructions			NONE	
			· —		
ī	Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2014				NONE
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2014.	0.000.000			
	Subtract lines 7 and 8 from line 6a	2,309,328.			
10	Analysis of line 9				
а	Excess from 2009 438, 136.				
b	Excess from 2010 418, 346.				
С	Excess from 2011 651, 919 .				
d	Excess from 2012 800, 927.				
<u>e</u>	Excess from 2013 NONE				Form 990-PF (2013)
					rom 330-FF (2013)

Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questio	on 9)	NOT APPLICABLE
_	If the foundation has					
	foundation, and the ruling				▶	
b	Check box to indicate wh				4942(j)(3) or 4942(j)(5)
2.	Enter the lesser of the ad	Tax year		Prior 3 years		(e) Total
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) total
	I or the minimum investment					
	return from Part X for each year listed					
.						
	85% of line 2a					
С	Qualifying distributions from Part					
d	XII line 4 for each year listed . Amounts included in line 2c not	,				
u	used directly for active conduct					
	of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
	2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"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 invest-					
	ment return shown in Part X,					
c	"Support" alternative test - enter					
·	(1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income.					
Pa	rt XV Supplemer	ntary Information (Complete this part	only if the found	ation had \$5,000	or more in assets
		during the year -s				
	Information Regarding					
а	List any managers of	the foundation who h	ave contributed more	e than 2% of the tota	l contributions receiv	ed by the foundation
	before the close of any	tax year (but only if th	ey have contributed n	nore than \$5,000) (Se	e section 507(a)(2))	
	ATTACHME	NT 9				
b	List any managers of	the foundation who	own 10% or more of	f the stock of a corpo	oration (or an equally	y large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	ınterest	
	NONE					
2	Information Regarding	g Contribution, Grant	Gift, Loan, Scholarsh	ip, etc., Programs:		
	Check here ► X if t	- he foundation only i	makes contributions	to preselected charit	table organizations a	and does not accept
	unsolicited requests for	or funds If the found	ation makes gifts, gra	ints, etc (see instructi	ions) to individuals of	r organizations under
	other conditions, comp			,	,	· ·
a	The name, address, a	nd telephone number	or e-mail address of t	he person to whom app	olications should be ad-	dressed
_	The name, address, a	to.op		•		
h	The form in which app	lications should be sub	mitted and information	on and materials they s	should include	
-						
	Any submission deadli	nes				
·	, Cabinioonon doddiii					
- A	Any restrictions or lii	mitations on awards	such as by dendra	phical areas charitah	ole fields kinds of i	nstitutions or other
u	factors	adono on awardo,	220 20 by googia		Heree, Kindo of I	

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Form **990-PF** (2013)

Page **11**

3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	-uture Payment	Т
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year SEE SCHEDULE ATTACHED				345,000.
Total			▶ 3a	345,000.
b Approved for future payment				
			▶ 3b	

Part XVI-A Analysis of Income-Produ	ucing Acti	vities			
Enter gross amounts unless otherwise indicated	Unrel	ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt
	(a)	(b)	(c)	(d)	function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a					
b			_		
c					
d					"-"
e				-,	
f	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments			14	25.	·
3 Interest on savings and temporary cash investments			14	241,351.	
4 Dividends and interest from securities				241,331.	
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			18	6,803,290.	
8 Gain or (loss) from sales of assets other than inventory	' 		-	0,003,230.	
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				7,044,666.	
12 Subtotal Add columns (b), (d), and (e)		<u> </u>		·	7,044,666.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calc				· · · · · · · · · · · · · · · · · · ·	., ,
Explain below how each activity accomplishment of the foundation					
N/A					
	NC	T APPLICABLE			

Form 9	90-PF (2	013)	ROBERT I	DELANEY AND PAMELA C	RAIG FO	UNDATION	13-398	4315	Pa	ege 13
Part	XVII	Information R Exempt Organ	egarding Tr	ansfers To and Transa			os With Non	chari	table	•
1	Did the			engage in any of the follow	ing with a	ny other organiza	tion described	-	Yes	No
				section 501(c)(3) organizati						\ \\
		ations?								×.
a ·	Transfe	ers from the reportin	ig foundation to	a noncharitable exempt org	anization of	f				` ^ «`
		· · · · · · · · · · · · · · · · · · ·	-					1a(1)		Х
								1a(2)		Х
		ransactions								٠.
((1) Sale	es of assets to a no	ncharitable exe	mpt organization				1b(1)		Х
				able exempt organization				1b(2)		_X
((3) Rer	ital of facilities, equi	pment, or other	r assets				1b(3)		Х
(4) Rei	mbursement arrange	ements					1b(4)		Х
((5) Loa	ns or loan guarantee	es					1b(5)		X
((6) Per	formance of service	s or members!	hip or fundraising solicitations				1b(6)		Х
				sts, other assets, or paid emp				1c		X
,	value o	f the goods, other	assets, or serv	es," complete the following rices given by the reporting gement, show in column (d)	foundation	If the foundation	n received less	than	faır m	narke
(a) Lin		(b) Amount involved	T	nonchantable exempt organization		scription of transfers, tr				
(4) 2		(2),	N/A		1					
			11,711							
				44-2						
					1					
						· · · · <u>·</u>		-		
 				· · ·						
		·								
			·-			-				
					~					
		· · ·								
			· · · · · · · · · · · · · · · · · · ·							
						*.**				
				ffiliated with, or related to, other than section 501(c)(3))				Ye	s X] No
<u>b</u> l	f "Yes,	complete the follow		# 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				hur		
		(a) Name of organization	1	(b) Type of organization		(c) De	scription of relations	ship		
				N/A						
	-									
					-	····				
Sign	Under	penalties of penury, I declaration of	re that I have exam preparer other than	ined this return including accompanying taxpayer) is based on all information of whi	ch preparer has	any knowledge	best of my knowledg			
Here	Sign	ature of officer or trustee	Jeley	Dake	Title	TEE	with the pr	eparer :		
D-:-I	1	Print/Type preparer's nai	me	Preparer's signature		Date 1	Check ıf F	PTIN		

Form **990-PF** (2013)

self-employed P01450182

212-440-0800

Firm's EIN ► 13-4078147

Paid

Preparer

Use Only

JOHN D. COOK

Firm's name

Fırm's address

▶ BCRS ASSOCIATES, LLC

NEW YORK, NY

▶ 77 WATER STREET, 9TH FLOOR

10005

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

Name of the organization	Employer identification number			
ROBERT DELANEY AND PAMELA CRAIG FOUNDATION				
F/K/A ROBERT AND PAMELA DELANEY FOUNDATION 13-3984315				
Organization type (check one)				
Filers of: Section:				
Form 990 or 990-EZ 501(c)() (enter number) organization				
4947(a)(1) nonexempt charitable trust not treated as a private fo	undation			
527 political organization				
Form 990-PF X 501(c)(3) exempt private foundation				
4947(a)(1) nonexempt charitable trust treated as a private foundate	ition			
501(c)(3) taxable private foundation				
Check if your organization is covered by the General Rule or a Special Rule . Note . Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a instructions	Special Rule See			
General Rule				
X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 property) from any one contributor. Complete Parts I and II	or more (in money or			
Special Rules				
For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form Complete Parts I and II	e year, a contribution of			
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from during the year, total contributions of more than \$1,000 for use exclusively for religious, charita or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II	ible, scientific, literary,			
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions of \$5,000 or more during the year.				
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file S	chedule B (Form 990.			
990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990-PF).	H of its Form 990-EZ or on its			
For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF Schedule	B (Form 990, 990-EZ, or 990-PF) (2013)			

JSA

Name of organization ROBERT DELANEY AND PAMELA CRAIG FOUNDATION F/K/A ROBERT AND PAMELA DELANEY FOUNDATION

Employer identification number 13-3984315

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1_	ROBERT V. DELANEY C/O BCRS ASSOC 77 WATER ST., 9TH FL. NEW YORK, NY 10005	\$2,034,969.	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2_	PAMELA J. CRAIG C/O BCRS ASSOC 77 WATER ST., 9TH FL. NEW YORK, NY 10005	\$999,269.	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

Name of organization ROBERT DELANEY AND PAMELA CRAIG FOUNDATION F/K/A ROBERT AND PAMELA DELANEY FOUNDATION

Employer identification number 13-3984315

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	11,800 SHS GOLDMAN SACHS GROUP, INC		
		\$2,063,112.	_12/18/2013
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_2	12,270 SHS ACCENTURE SCA CLASS I		
,		\$999,269.	_12/31/2013
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
· -			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		- - \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Employer identification number Name of organization ROBERT DELANEY AND PAMELA CRAIG FOUNDATION 13-3984315 F/K/A ROBERT AND PAMELA DELANEY FOUNDATION Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc contributions of \$1,000 or less for the year (Enter this information once See instructions) ▶\$ Use duplicate copies of Part III if additional space is needed (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

ROBERT DELANEY AND PAMELA CRAIG FOUNDATION 13-3984315
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of F			Desc	ription		0 Q	Date acquired	Date sold
Gross sale	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	H	Gain	
price less expenses of sale	aliowable	basis	12/31/69	12/31/69	adı basıs	Н	(loss)	
		TOTAL LONG-	TERM CAPITA	L GAIN DIVI	DENDS		116,591.	
7,313,323.		LTCG 510,033.					VAR 6,803,290.	VAR
TOTAL GAIN(L	oss)						6,919,881.	

. .

ROBERT DELANEY & PAMELA CRAIG FOUNDATION FKA: ROBERT AND PAMELA DELANEY FOUNDATION

13-3984315

SUPPLEMENTARY STATEMENTS

PART: XV

LINE: 2

SUPPLEMENTAL INFORMATION

THE ORGANIZATION'S PRIMARY ACTIVITY IS TO SUPPORT, BY CONTRIBUTIONS, OTHER ORGANIZATIONS QUALIFYING FOR EXEMPTION UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE. THE TRUSTEES CHOOSE THESE ORGANIZATIONS BASED UPON THEIR KNOWLEDGE OF THE ORGANIZATIONS' ACTIVITIES. NO CONTRIBUTIONS, GRANTS, GIFTS, LOANS OR SCHOLARSHIPS ARE MADE TO INDIVIDUALS. THE ORGANIZATION DOES NOT PRESENTLY RECEIVE APPLICATIONS OR CONDUCT PROGRAMS FOR DONATIONS IN ITS ACTIVITIES

ATTACHMENT 1

- INTEREST ON TEMPORARY CASH INVESTMENTS FORM 990PF, PART I

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	24.	25.
REVENUE AND EXPENSES PER BOOKS	24.	25.
		TOTAL
DESCRIPTION	INTEREST ON CHECKING ACCOUNT INTEREST ON GS ACCOUNT	

ATTACHMENT 1 PAGE 19

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1 SECURITIES	-
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INTEREST	
AND	
DIVIDENDS	
PART I -	
990PF,	
FORM	

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	113,349.	124,760.
REVENUE AND EXPENSES PER BOOKS	113,349.	124,760.
		TOTAL
DESCRIPTION	GOLDMAN SACHS DIVIDENDS ACCENTURE DIVIDENDS	

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FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1,700.	1,700.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	1,700.	1,700.
REVENUE AND EXPENSES PER BOOKS	3,400.	3,400.
		TOTALS
DESCRIPTION	BCRS ASSOCIATES, LLC	

ATTACHMENT 3 PAGE 21

4	
ATTACHMENT	

- TAXES FORM 990PF, PART I

DESCRIPTION

EXPENSES PER BOOKS REVENUE AND

INVESTMENT INCOME

CHARITABLE PURPOSES

FEDERAL EXT PMT FYE 6/30/2013

2,500.

ADJUSTED NET INCOME

TOTALS

2,500.

ATTACHMENT 4 PAGE 22

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REVENUE	AND	RXPENSES

FORM 990PF, PART I - OTHER EXPENSES

ADJUSTED	NET	INCOME		
NET	INVESTMENT	INCOME	1,712.	1,712.
AND	EXPENSES	PER BOOKS	1,712.	1,712.
				TOTALS
		DESCRIPTION	FOREIGN TAX PAID	

CHARITABLE PURPOSES

PART II - CORPORATE STOCK

FORM 990PF,

ATTACHMENT 6

ENDING <u>FMV</u>	9,187,973. 991,907.	10,179,880.
ENDING BOOK VALUE	8,688,741.	8,688,741.
BOOK VALUE	1,839,434.	1,839,434.
DESCRIPTION	SEE LONG POSITION ATTACHED ACCENTURE SCA CLASS I STOCK	TOTALS

ATTACHMENT 6 PAGE 24

ROBERT DELANEY AND PAMELA CRAIG FOUNDATION 13-3984315

ATTACHMENT 7

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

AMOUNT DESCRIPTION

EXCESS OF FMV OVER DONOR'S COST BASIS OF SECURITIES DONATED TO THE FOUNDATION ROUNDING

2,894,762.

TOTAL

2,894,762.

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	ERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 8
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ROBERT V. DELANEY C/O BCRS ASSOCIATES, LLC 77 WATER STREET, 9TH FLOOR NEW YORK, NY 10005	TRUSTEE/PART-TIME	0	0	0
PAMELA J. CRAIG C/O BCRS ASSOCIATES, LLC 77 WATER STREET, 9TH FLOOR NEW YORK, NY 10005	TRUSTEE/PART-TIME	0	0	0
MATTHEW DELANEY C/O BCRS ASSOCIATES, LLC 77 WATER STREET, 9TH FLOOR NEW YORK, NY 10005	TRUSTEE/PART-TIME	0	0	0
	GRAND TOTALS	0	0	0

ATTACHMENT 9

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

ROBERT V. DELANEY; C/O BCRS ASSOCIATES, LLC 77 WATER STREET, 9TH FLOOR, NEW YORK, NY 10005 PAMELA CRAIG; C/O BCRS ASSOCIATES, LLC 77 WATER STREET, 9TH FLOOR, NEW YORK, NY 10005

SCHEDULE D (Form 1041)

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at www irs.gov/form1041.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

ROBERT DELANEY AND PAMELA CRAIG FOUNDATION

Employer identification number

F/K/A ROBERT AND PAMELA DELANEY FOUNDATION

13-3984315

Note	e: Form 5227 filers need to complete only Parts I and II		-			
Par		ets Held One Yea	r or Less			
See the I	instructions for how to figure the amounts to enter on nes below	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss f Form(s) 8949, P	rom	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with
	form may be easier to complete if you round off cents note dollars	(sales price)	(or other basis)	line 2, column		column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and			* .		
	for which you have no adjustments (see instructions)			* * .	2	
	However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b			*	•	
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4	
5	Net short-term gain or (loss) from partnerships, S cor	porations, and other	estates or trusts		5	
6	Short-term capital loss carryover Enter the amount Carryover Worksheet	nt, if any, from lin	e 9 of the 2012	Capital Loss	6	()
7	Net short-term capital gain or (loss). Combine line	es 1a through 6 in	column (h) Enter	here and on	7	,
Par	line 17, column (3) on the back	ets Held More Tha	an One Year			
See	nstructions for how to figure the amounts to enter on			(g)		(h) Gain or (loss)
This	nes below form may be easier to complete if you round off cents note dollars	(d) Proceeds (sales pnce)	(e) Cost (or other basis)	Adjustments to gain or loss f Form(s) 8949, Pa line 2, column	rom art II,	Subtract column (e) from column (d) and combine the result wth column (g)
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b			* * * * * * * * * * * * * * * * * * *		
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	7,313,323.	510,033.			6,803,290.
	Totals for all transactions reported on Form(s) 8949 with Box E checked					
	Totals for all transactions reported on Form(s) 8949 with Box F checked					
	LONG-TERM CAPITAL GAIN DIVIDENDS		ATTACHMENT 1			116,591.
11	Long-term capital gain or (loss) from Forms 2439, 46	84, 6252, 6781, and	1 8824		11	
12	Net long-term gain or (loss) from partnerships, S corp	orations, and other e	states or trusts		12	
13	Capital gain distributions,				13	
14 15	Gain from Form 4797, Part I				14	
	Carryover Worksheet				15	()
16	Net long-term capital gain or (loss). Combine lines line 18a, column (3) on the back	8a through 15 in	column (h) Enter i	here and on	16	6,919,881.
						

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2013

Page 2 Schedule D (Form 1041) 2013 Part III Summary of Parts I and II (1) Beneficiaries' (2) Estate's (3) Total Caution: Read the instructions before completing this part (see instr) or trust's 17 Net short-term gain or (loss) 18 Net long-term gain or (loss): 6,919,881. 18a 18b b Unrecaptured section 1250 gain (see line 18 of the wrksht) 18c 6,919,881 Total net gain or (loss). Combine lines 17 and 18a..... 19 Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and do not complete Part IV If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as **Capital Loss Limitation** Part IV Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of Tax Computation Using Maximum Capital Gains Rates Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if • Either line 18b, col (2) or line 18c, col (2) is more than zero, or • Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col (2) or line 18c, col (2) is more than zero Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34). . . 21 21 Enter the smaller of line 18a or 19 in column (2) 22 23 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified 23 dividends included in income in Part I of Form 990-T) 24 24 If the estate or trust is filing Form 4952, enter the 25 amount from line 4g, otherwise, enter -0-... ▶ 26 Subtract line 25 from line 24 If zero or less, enter -0-27 Subtract line 26 from line 21 If zero or less, enter -0-27 28 28 Enter the smaller of the amount on line 21 or \$2,450 . . . Enter the smaller of the amount on line 27 or line 28 29 29 30 Subtract line 29 from line 28 If zero or less, enter -0- This amount is taxed at 0%. 30 31 31 32 32 33 Enter the smaller of line 21 or \$11,950 33 34 34 35 Subtract line 34 from line 33 If zero or less, enter -0- 35 36 36 37 37 38 38 39 39 Subtract line 39 from line 38 If zero or less, enter -0-40 41 41 Figure the tax on the amount on line 27 Use the 2013 Tax Rate Schedule for Estates 42 and Trusts (see the Schedule G instructions in the instructions for Form 1041) 42 43 43 Figure the tax on the amount on line 21 Use the 2013 Tax Rate Schedule for Estates 44 and Trusts (see the Schedule G instructions in the instructions for Form 1041) 45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule

G, line 1a (or Form 990-T, line 36)

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side.)

Social security number or taxpayer identification number 13-3984315

ROBERT DELANEY AND PAMELA CRAIG FOUNDATION

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a, you are not required to report these transactions on Form 8949 (see instructions)

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(E) Long-term transactions (F) Long-term transactions 1 (a) Description of property	(b) Date acquired	, ,	-	(e) Cost or other basis See the	Adjustment, if a	any, to gain or loss amount in column (g), de in column (f) irate instructions	(h) Gain or (loss) Subtract column (e from column (d) an
(Example 100 sh XYZ Co)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
LTCG			7,313,323.	510,033.			6,803,290
2 Totals. Add the amounts in coli (subtract negative amounts) E include on your Schedule D, lin checked), line 9 (if Box E above (if Box F above is checked)	inter each tota ne 8b (if Box D	I here and above is	7,313,323.	510,033.			6,803,290.

(If Box F above is checked) ► 7,313,323. 510,033. 6,803,290.

Note If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

FEDERAL CAPITAL GAIN DIVIDENDS

ATTACHMENT 1

15% RATE CAPITAL GAIN DIVIDENDS LONG-TERM CAPITAL GAIN DIVIDENDS TOTAL 15% RATE CAPITAL GAIN DIVIDENDS TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS

116,591.

116,591.

116,591.

THE ROBERT & PAMELA DELANEY FOUNDATION CHARITABLE CONTRIBUTIONS FYE 6/30/2014

EIN: 13-3984315

DATE	CONTRIBUTION / CITY, STATE	 AMOUNT
10/22/2013	DELBARTON SCHOOL MORRISTOWN, NJ	\$ 25,000 00
12/19/2013	ST PAUL'S EPISCOPAL CHURCH WESTFIELD, NJ	\$ 25,000 00
12/19/2013	SMITH COLLEGE NORTHAMPTON, MA	\$ 50,000 00
12/19/2013	COMPREHENSIVE DEVELOPMENT INC NEW YORK, NY	\$ 35,000 00
12/19/2013	JUNIOR ACHIVEMENT MONMOUTH, NJ	\$ 10,000 00
4/15/2014	NBT NATIONAL ASSOCIATION, HAMILTON COLLEGE CLINTON, NY	\$ 200,000 00
	TOTAL CONTRIBUTIONS PAID *	\$ 345,000.00

^{*}ALL CONTRIBUTIONS WERE MADE TO THE GENERAL PURPOSE FUND OF PUBLIC CHARITABLE ORGANIZATIONS THAT WERE CLASSIFIED UNDER SECTION 501 (C) (3) OF THE INTERNAL REVENUE CODE

Robert & Pamela Delaney Foundation From 01-Jul-2013 To 30-Jun-2014

Base Currency USD

Realized Garns/Losses Description	Trade Date	Frade Date Date Sold / Qty	Proceeds (Base)	Cost (Base)	Proceeds (Base) Cost (Base) Gain/Loss (Base) Gain Type	Gain Type
GOLDMAN SACHS GROUP, INC (THE) CMN	26-Nov-94	26-Nov-94 19-Jun-14 6,000	1,016,91631	70,920 00	0,	345,996 31 Long-Term
GOLDMAN SACHS GROUP, INC (THE) CMN	26-Nov-94	26-Nov-94 19-Jun-14 5,350		63,237 00		843,513 38 Long-Term
GOLDMAN SACHS GROUP, INC (THE) CMN	26-Nov-94	26-Nov-94 19-Jun-14 20,000 (I)	3,389,721 05	336,400 00	3,153,321 05	,153,321 05 Long-Term
GOLDMAN SACHS GROUP, INC (THE) CMN	26-Nov-94	26-Nov-94 19-Jun-14 11,800	1,999,935 42	139,476 00	•	1,860,459 42 Long-Term
TOTAL			7,313,323.16	510,033.00	•	





ROBERT & PAMELA DELANEY FDN Holdings

Period Ended June 30, 2014

CASH, DEPOSITS & MONEY MARKET FUNDS							מוסק בוומפר	פווסק רוומפת סמופ סמ' 201
	Quantity	Market Price	Market Value / Accrued Income	Unit Cast	Adjusted Cost / Original Cost	Unrealized Gain (Loss)	Yield to Maturity / Current Yield	Estimated Annual Income
DEPOSITS & MONEY MARKET FUNDS								
MONEY MARKET FUNDS				:				
GS FINANCIAL SQUARE FEDERAL FUND - FST SHARES Moody's Aaa	0 030	1 0000	0 03	1 0000	0.03	00 0	0 0100	00 0
GS FINANCIAL SQUARE MONEY MARKET FUND - FST SHARES Moody's Aaa	2,333,083 710	1 0000	2,333,083 71	1 0000	2,333,083 71	00 0	00000	1,633 16
TOTAL MONEY MARKET FUNDS			2,333,083 74		2,333,083 74	00 0		1,633 16
FIXED INCOME								
	Quantity /	Market Drive	Market Value /	last Cost	Adjusted Cost /	Unrealized / Economic	Yield to Maturity	Estimated
INVESTMENT GRADE FIXED INCOME						(222)	200	
GS SHORT DURATION INCOME FUND								
GS SHORT DURATION INCOME INSTITUTIONAL MUTUAL FUND	269,684 542	10 1900	2,748,085 48	10 2000	2,750,781 56	(2,696 08)		44,767 63
OTHER FIXED INCOME								
GS HIGH YIELD FLOATING RATE FUND								
GS HIGH YIELD FLOATING RATE FUND INSTITUTIONAL SHARES	90,648 561	10 0300	914,643 98	10 1000	915,549 93	(905 95)		33,539 97
TOTAL FIXED INCOME			3,662,729.46		3,666,331.49	(3,602.03)		78,307.60
PUBLIC EQUITY								
	Quantity	Market Price	Market Value / Accrued Income	Unit Cost	Cost Basis	Unrealized / Economic Gain (Loss)	Dividend Yield	Estimated Annual Income
US EQUITY								:
GS RISING DIVIDEND GROWTH FUND								
GS RISING DIVIDEND GROWTH FUND MUTUAL FUND STOCK CLASS I (GSRLX)	56,909 214	21 1900	1,205,906 24	21 0602	1,198,518 04	7,388 20 10,906 24	1 0996	13,259 85





ROBERT & PAMELA DELANEY FDN Holdings (Continued)

Period Ended June 30, 2014

PUBLIC EQUITY (Continued)			Market Value			Unrealized /	Pachaid	
	Quantity	Market Price	Accrued Income	Unit Cost	Cost Basis	Gain (Loss)	Yield	Annual Income
US EQUITY								
GS STRATEGIC GROWTH FUND								
GS STRATEGIC GROWTH FUND INSTITUTIONAL SHARES (GSTIX)	17,649 435	13 5300	238,796 86	10 0781	177,872 90	60,923 95 313,296 85	0 7834	1,870 84
GS LARGE CAP VALUE FUND								
GS LARGE CAP VALUE FUND INSTITUTIONAL SHARES (GSLIX)	12,394.620	18 2800	226,573 65	11 1543	138,252 72	88,320 93	0 9464	2,144 27
						212,173 64		
GS GROWTH OPPORTUNITIES FUND								
GS GROWTH OPPORTUNITES FUND INSTITUTIONAL SHARES	17,906 640	31 9600	572,296 21	21 7563	389,581 62	182,714 60	0.0125	71 63
(XIO99)						608,096 22		
GS MID CAP VALUE FUND								
GS MID CAP VALUE FUND INSTITUTIONAL SHARES (GSMCX)	12,009.369	48 3000	580,052 52	34 9811	420,100 34	159,952 18	0 8592	4,983 89
						580,052 54		
GS SMALL/MID CAP GROWTH FUND								
GS SMALL/MID-CAP GROWTH FUND INSTITUTIONAL SHARES	16,828 031	21 9000	368,533 88	21 6900	365,000 00	3,533 88	:	
(GSMYX)						3,533 88		
TOTAL US EQUITY			3,192,159.36		2,689,325.62	502,833.74	0.7908	22,330.47
					Adjusted Cost / 6	Unrealized		Estimated
			Market Value		Original Cost	Gain (Loss)	:	Annual Income
TOTAL PORTFOLIO			9,187,972.56		8,688,740.85	499,231.71		102,271.23

FIRST AMENDMENT TO AMENDED AND RESTATED TRUST INDENTURE OF THE ROBERT AND PAMELA DELANEY FOUNDATION

This Amendment is made as of the <u>ZZ</u> day of January, 2014, to a trust indenture created by Robert V. Delaney, as Donor, and dated December 22, 1997, as amended and restated on March 20, 2009 (herein called the "Trust").

WHEREAS, Article VII of the Trust provides that the Trust can be amended by unanimous vote of the Trustees; and

WHEREAS the undersigned Trustees wish to change the name of the Trust.

NOW, THEREFORE, Article I, paragraph 1 of the trust is amended to read as follows:

(1) Name: The trust governed by the terms of this Indenture of Trust shall be called "The Robert Deláney and Pamela Craig Foundation."

The Trust is hereby ratified and confirmed in every other respect.

IN WITNESS WHEREOF, we have each hereunto set our hand and seal this and day of January, 2014.

ROBERT V. DELANEY, Donor and Trustee

PAMELA J. CRAIG, Trustee

MATTHEW F. DELANEY, Trustee

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

Retur	ronic filing (e-file). You can electronically file F poration required to file Form 990-T), or an add to request an extension of time to file any of n for Transfers Associated With Certain Pers ctions). For more details on the electronic filing	litional (not aut the forms liste sonal Benefit of of this form, vi	comatic) 3-month exted in Part I or Part I or Part I Contracts, which make is it www.irs.gov/efile	tension of time. You of I with the exception of must be sent to the I and click on e-file for	can el of For IRS II	ectro m 88 n pag	nically file Forn 370, Information per format (see
A cor Part I All oti	Automatic 3-Month Extension of Troporation required to file Form 990-T and reconly	equesting an a	automatic 6-month	extension—check th			▶ □
to me	income tax returns.			Enter filer's identifyir		mhar	ooo instruction
	Name of exempt organization or other filer, s	oo instructions	······································	Employer Identification			
Type	or j			13-3984315	····	DC: (L	
print	Number, street, and room or suite no If a P.		ructions	Social security number	r (SSN	1)	
File by	the (l social sociality mannes	. (00.	٠,	
due dat				L			
retum :	500	y vo. a loloigh a					
Enter Enter	the Return code for the return that this applicat	ion is for (file a	separate application	n for each return) .		•	04
Appl Is Fo	ication r	Return Code	Application Is For	<u> </u>			Return Code
Form	990 or Form 990-EZ	01	Form 990-T (corpo	oration)			07
Form	990-BL	02	Form 1041-A				08
Form	4720 (individual)	03	Form 4720 (other	than individual)			09
	990-PF	04	Form 5227				10
Form	1 990-1 1	1 01					
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form	990-T (sec. 401(a) or 408(a) trust) 990-T (trust other than above)	05 06					11 12
Form Form The If the	books are in the care of ► BCRS ASSOCIAT phone No. ► 212-440-0811 corganization does not have an office or place is for a Group Return, enter the organization's whole group, check this box ► □ with the names and EINs of all members the ext I request an automatic 3-month (6 months for until FEBRUARY 16 , 20 15 , to file the off or the organization's return for: Label Calendar year 20 or	05 06 TES, LLC Fof business in a four digit Gro . If it is for par ension is for. a corporation i	Form 6069 Form 8870 ax No. N/A the United States, c up Exemption Numb t of the group, check required to file Form	per (GEN) k this box 990-T) extension of the	► [and	▶□ If this is d attach
Form Form The Tele If the If thi for the a list v	990-T (sec. 401(a) or 408(a) trust) 990-T (trust other than above) books are in the care of ▶ BCRS_ASSOCIAT phone No. ▶ 212-440-0811 e organization does not have an office or place is for a Group Return, enter the organization's whole group, check this box ▶ □ with the names and EINs of all members the ext I request an automatic 3-month (6 months for until FEBRUARY 16 , 20 15 , to file the office the organization's return for: ▶ □ calendar year 20 or ▶ ☒ tax year beginning JULY 1 If the tax year entered in line 1 is for less than □ Change in accounting period	of 05 06 FES, LLC Fof business in a four digit Grown a corporation is for. a corporation is exempt organized, 20 12 months, chemical of the corporation is the corporation is exempt organized.	Form 6069 Form 8870 Fax No. ► N/A the United States, c up Exemption Numb t of the group, check required to file Form zation return for the 13 , and ending eck reason: ☐ Initial	per (GEN) k this box 990-T) extension of the organization named a JUNE 30 all return Final return	▶ [ime ibove	and	▶□ If this is d attach extension is
Form Form Tele If the If thi for the a list v 1	990-T (sec. 401(a) or 408(a) trust) 990-T (trust other than above) books are in the care of ▶ BCRS ASSOCIAT phone No. ▶ 212-440-0811 e organization does not have an office or place is is for a Group Return, enter the organization's whole group, check this box ▶ □ with the names and EINs of all members the ext I request an automatic 3-month (6 months for until FEBRUARY 16 , 20 15 , to file the office of the organization's return for: ▶ □ calendar year 20 or ▶ ☒ tax year beginning JULY 1 If the tax year entered in line 1 is for less than □ Change in accounting period If this application is for Forms 990-BL, 990-PF nonrefundable credits. See instructions.	of Description of Des	Form 6069 Form 8870 fax No. ► N/A the United States, c up Exemption Numb t of the group, check required to file Form zation return for the 13 , and ending eck reason: ☐ Initial or 6069, enter the te	per (GEN) k this box 990-T) extension of the organization named a JUNE 30 all return Final return entative tax, less any	ime bove	and	▶□ If this is d attach extension is
Form Form Tele If the If thi for the a list v 1	990-T (sec. 401(a) or 408(a) trust) 990-T (trust other than above) books are in the care of ▶ BCRS ASSOCIAT phone No. ▶ 212-440-0811 e organization does not have an office or place is is for a Group Return, enter the organization's whole group, check this box ▶ □ with the names and EINs of all members the ext I request an automatic 3-month (6 months for until FEBRUARY 16 , 20 15 , to file the office of the organization's return for: ▶ □ calendar year 20 or ▶ ☒ tax year beginning JULY 1 If the tax year entered in line 1 is for less than □ Change in accounting period If this application is for Forms 990-BL, 990-PF	05 06 FES, LLC Fof business in a four digit Grown is for a corporation is for a corporation rexempt organizing the corporation in the corporation is possible to the corporation of the corporation in the corporation in the corporation is possible to the corporation of the corporation in the corpo	Form 6069 Form 8870 Fax No. ► N/A the United States, c up Exemption Numb t of the group, check required to file Form zation return for the 13 , and ending eck reason: ☐ Initia or 6069, enter the te	per (GEN) k this box 990-T) extension of the organization named a JUNE 30 all return	ime ibove	The	12 ▶□ If this is d attach extension is