

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Ī	
<u> </u>	
113	
2015	
JAN 27	

Form 990-PF	Form	990	-PF
--------------------	------	-----	-----

Return of Private Foundation

OMB No 1545-0052

		of the Treasury enue Service	 	Informatio	n about Form	n 990-PF and its sepa	rate ır	structions i	s at www.irs			pf.	Open to Public	Inspection
		lar year 2013	or tax year t	beginning	SEP	1, 2013		, and er	-	AUG 3		2014		_
		foundation								A Employ	yer ider	ntification	number	
				D PATI	RICIA	D. ATKINSO	N			2.2	275	2005		
		MOITADI										3685		
		d street (or PO							Room/suite	B Teleph		mber 375-	2076	
		OVERLO												<u> </u>
		wn, state or pr ICETON,		ntry, and ZIF 08540	or foreign pe	ostal code 		-n	_	C If exemp	otion app	lication is p	ending, check here	
G C	heck	all that apply		Initial return		Initial return o	of a for	mer public o	harity	D 1 Fore	eign org	anizations	s, check here	
				Final return		Amended retu	ım			2. Fore	ian organ	uzations me	etino the 85% test	
				Address cha		Name change				chec	k here ar	nd attach co	eting the 85% test emputation	
H C		type of organiz			· · · <u>- · - · </u>	empt private foundatio							tus was termina	ted
<u> </u>		tion 4947(a)(1				Other taxable private for				under	section	507(b)(1))(A), check here	
		rket value of al		nd of year	J Accounti	•	ish	Accı	rual				60-month termii	nation
•		art II, col. (c),	, line 16)	E C O		her (specify)	aah h	2010)		under	section	507(D)(1))(B), check here	
	_				(Part I, colu	mn (d) must be on c				(-)	۸ ساد		(d) Disburs	ements
Pa	ırt I	Analysis of R (The total of am necessanly equ	ounts in column ial the amounts	nns (b), (c), and s in column (a)	d (d) may not	(a) Revenue and expenses per boo	ks	\-, · · ·	vestment ome		Adjusted		for charitable (cash base	purposes
	1	Contributions,				1,500,00	0.				N/A			
	2	Check	if the foundation	is not required to	attach Sch B									
	3	Interest on savin cash investment	gs and tempor s	rary			1.		31.				STATEME	·····
	4	Dividends and	ınterest fror	m securities		963,98	8.	<u>96</u>	3,988.				STATEME	NT Z
	5a	Gross rents											ļ	
	b	Net rental incom	e or (loss)			0.5	_		 ,				ļ	
o	6a	Net gain or (loss)) from sale of a	ssets not on l	ine 10	2,861,32	2.							······································
nua	b	Gross sales processets on line 6a	e for all 1	0,988	,228.			2 06	1,322.	-	DE	CF#	VED -	1
Revenue	7	Capital gain net	income (from P	Part IV, line 2)				2,00	1,322.		111		18	
	į	Net short-term		ו						18		4 5	2015	1
		Income modif Gross sales less								100	J.f	M T 3	4014	!
	1 .	and allowances	-			-11-	-			199			1	
		Less Cost of go	_			<u> </u>				1	TH	iDE l	V. UI	
	i	Gross profit o Other income								<u> </u>			7	
		Total. Add In		h 11		5,325,34	1.	3,82	5,341.					
	13	Compensation of			a. etc	30,00		1	7,500.					0.
		Other employe												
	l .	Pension plans		-										
ses	16a	Legal fees								<u> </u>				
ë	b	Accounting fe	es	ST	MT 3	3,03	30.		3,030.	<u> </u>				0.
Expenses	C	Other profess	ional fees							ļ <u> </u>	-			
<u>š</u>	17	Interest							- 2	ļ				<u>~</u>
rat	18	Taxes		ST	MT 4	60,88	35.		L5 , 955.	<u> </u>				0.
nist	19	Depreciation a	and depletio	n						<u> </u>				
and Administrative	1	Occupancy								 			 	
Ă	1	Travel, confer						-		ļ			-	
anc	1	Printing and p			N.CO -	3 00) 5		3,095	+				0.
ing	23	Other expens			MT 5	3,09	,,,		3,093	+		-		<u> </u>
Operating	24	Total operati	-			97,0	10		39,580					0.
ŏ		expenses. Ad				1,662,5	20.	`	55,500	1			1.66	2,500.
_	25	Contributions				1,002,5	•	E		 				_,,
	20	Total expens		นเรียเเยกเรี.		1,759,5	10 -		39,580				1,66	2,500.
	27	Add lines 24 Subtract line		12				<u> </u>	,	1				, , , , , , , , , , , , , , , , , , ,
	1	Excess of rever			irsemente	3,565,8	31.							
		Net investme						3,7	85,761	•				
	1	Adjusted net									N/A	1		

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

Forr	n 99	THE DAVID R. AND PATRICI D-PF (2013) FOUNDATION		22-3	3753685 Page 2
P:	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	(c) Fair Market Value
			(a) book value	(D) DOOK VAIDE	(b) Tall Walket Value
		Cash - non-interest-bearing	230,780.	7,697,045,	7,697,045.
		Savings and temporary cash investments		1,051,75201	
		Accounts receivable	İ	1	
Ì		Less allowance for doubtful accounts			
		Pledges receivable ►		1	
		_			
Ì	-	Grants receivable Receivables due from officers, directors, trustees, and other			
	6	Ĭ			
	-	disqualified persons			
	1	Other notes and loans receivable		j	
		Less allowance for doubtful accounts			
ssets	-	Inventories for sale or use			· · · · · · · · · · · · · · · · · · ·
Ass		Prepaid expenses and deferred charges			
`		Investments - U.S. and state government obligations Investments - corporate stock STMT 7	25,668,376.	21.744.669	28,252,515.
		micestinents objected according	23,000,370.	21//11/0030	20/202/0101
	_	Investments - corporate bonds	, , , , , , , , , , , , , , , , , , , 	 1	, , , , , , , , , , , , , , , , , , , ,
	11	Investments - land, buildings, and equipment basis		İ	
		Less accumulated depreciation			
		Investments - mortgage loans			
	13	Investments - other			17 17 17 17 17 17
	14	Land, buildings, and equipment basis	ĺ	•	
		Less accumulated depreciation			
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the	25,899,156.	29,441,714.	35,949,560.
	4.5	instructions Also, see page 1, item 1)	25/055/150.	23/212//22	
	}	Accounts payable and accrued expenses		~	
	18	Grants payable			
ties	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21 22	Mortgages and other notes payable Other liabilities (describe)			
	22	Other namintes (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
auc	25	Temporarily restricted			
8ali	26	Permanently restricted			
힏	-	Foundations that do not follow SFAS 117, check here			
Ē	1	and complete lines 27 through 31			
٥	27	Capital stock, trust principal, or current funds	3,569,538.	3,569,538.	
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	22,329,618.	25,872,176.	
et,	30	Total net assets or fund balances	25,899,156.	29,441,714.	
Z	100	19421 1194 200040 OL 18118 MAIN. 444			

Part III Analysis of Changes in Net Assets or Fund Balances

31 Total liabilities and net assets/fund balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
•	(must agree with end-of-year figure reported on prior year's return)	1	25,8	399,156.
2	Enter amount from Part I, line 27a	2	3,5	65,831.
	Other increases not included in line 2 (itemize)	3		Ö.
-	Add lines 1, 2, and 3	4	29,4	64,987.
•	Decreases not included in line 2 (itemize) ► SEE STATEMENT	6 5		23,273.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	29,4	41,714.

Form **990-PF** (2013)

25,899,156.

29,441,714.

22-3753685

Part IV Capital Gains a	and Losses for Tax on I	nvestmen	t Income						
	ibe the kind(s) of property sold (e grehouse, or common stock, 200 sh			(b) I	How ac - Purc - Dona	nase i ') Date a (mo , da	icquired ay, yr)	(d) Date sold (mo , day, yr)
18 SEE SCHEDULE AT				۳		P			
b							_		
C							-		
d									
е	·								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					iin or (loss (f) minus	(g)
a 10,988,228.			8,126,90	6.					2,861,322
b									
С									
d									
e		Ab - 6	10/21/00	-					
Complete only for assets snowing	gain in column (h) and owned by			\dashv				ol (h) gain ot less tha	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any					from col	
	40 01 15/01/00	- 0001							2,861,322
<u>a</u>		 		-+					2,001,322
<u>b</u>		 		\dashv					
d d		 							
e				-					
6	C 16			7					
2 Capital gain net income or (net cap	oital loss) { If gain, also ente of If (loss), enter -0			\rightarrow	2				2,861,322
	(, , , , , , , , , , , , , , , , , , ,		,						
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, or		110 (0)							
If (loss), enter -0- in Part I, line 8	iolanii (o)				3			N/A	
Part V Qualification U	nder Section 4940(e) for	r Reduced	Tax on Net	Inv	estn	nent Inco	me		
Was the foundation liable for the sect f "Yes," the foundation does not quali	fy under section 4940(e). Do not co	omplete this pa	ırt						Yes X No
1 Enter the appropriate amount in e	ach column for each year, see the i	instructions be	fore making any e	ntries	<u> </u>				(4)
(a) Base period years Calendar year (or tax year beginnin			Net value of no		rıtable			Dıstrı (col (b) dı	(d) bution ratio vided by col (c))
2012		98,373.				7,292.			.04667
2011		74,980.				7,662.			.04563
2010		94,249.				6,201.			.04550
2009		34,117.	<u> </u>			8,911.			.04364
2008	1,04	15,572.	<u> </u>	19	,98	9,653.	 		.05230
2 Total of line 1, column (d)							2		.23376
3 Average distribution ratio for the 5 the foundation has been in existen	•	on line 2 by 5,	or by the number	of ye	ars		3		.04675
	·								
4 Enter the net value of noncharitable	e-use assets for 2013 from Part X,	, line 5					4		34,380,372
5 Multiply line 4 by line 3							5		1,607,420
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6_		37,858
7 Add lines 5 and 6							7		1,645,278
8 Enter qualifying distributions from	Part XII, line 4						8		1,662,500
If line 8 is equal to or greater than See the Part VI instructions	line 7, check the box in Part VI, lin	e 1b, and com	plete that part usin	g a 1	% tax	rate			
323521 10-10-13	·								Form 990-PF (201

Х

8b

NJ

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

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)

year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

s if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2013.)

had not been removed from jeopardy before the first day of the tax year beginning in 2013?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form **990-PF** (2013)

Х

3b

4a

Yes X No

N/A

during the year?

Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ıed)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	L Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ectly,			
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	}	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	<u></u>			
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?		Ye	s X No		
b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ier the exceptions described i	n Regulations	/-		
section 53 4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere		▶∟」│		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					
expenditure responsibility for the grant?	N	//A L Ye	s L No		
If "Yes," attach the statement required by Regulations section 53.4945	5-5 <i>(d</i>).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j	pay premiums on				
a personal benefit contract?		L Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		ļ.	6b	<u>X</u>
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trustore Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>1</i>		
1 List all officers, directors, trustees, foundation managers and their	compensation				
List all Officers, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Exc	nense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	ano deterred	(e) Exp account allowa	other
DAVID R. ATKINSON	TRUSTEE	Giller -U-)	compensation	anova	11003
100 OVERLOOK CENTER, 2ND FL.					
PRINCETON, NJ 08540	1.00	0.	0.	Ì	0.
	TRUSTEE				
100 OVERLOOK CENTER, 2ND FL.				İ	
PRINCETON, NJ 08540	1.00	0.	0.		0.
	TRUSTEE				
100 OVERLOOK CENTER, 2ND FL.					
PRINCETON, NJ 08540	3.00	20,000.	0.	.]	0.
PAUL D. ATKINSON	TRUSTEE				
100 OVERLOOK CENTER, 2ND FL.]				
PRINCETON, NJ 08540	1.00	10,000.	0.	,	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	(-n -	- r	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account allowa	t, other
NONE					
	<u> </u>	1	<u> </u>	<u> </u>	
Total number of other employees paid over \$50,000			>		0

Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
N/A		
		
All other program-related investments. See instructions		
Total. Add lines 1 through 3	▶	

	rm 990-PF (2013)		-3/33063 Fage 6
F	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a]	32,089,739.
	Average of monthly cash balances	1b	32,089,739. 2,814,192.
	Fair market value of all other assets	10	
d	Tota! (add lines 1a, b, and c)	1d	34,903,931.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	34,903,931.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	523,559.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	34,380,372.
6	Minimum investment return. Enter 5% of line 5	6	1,719,019.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part)	d certain	1
		1	1,719,019.
1	Minimum investment return from Part X, line 6 Tax on investment income for 2013 from Part VI, line 5 2a 37, 858.		1,110,010.
	· · · · · · · · · · · · · · · · · · ·		
		20	37.858
3 3	Distributable amount before adjustments. Subtract line 2c from line 1	3	37,858. 1,681,161.
3 4	Recoveries of amounts treated as qualifying distributions	4	0.
	Add lines 3 and 4	5	1,681,161.
5		6	0.
6	Deduction from distributable amount (see instructions)	7	1,681,161.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1		1,001,101.
	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	1,662,500.
b	Program-related investments - total from Part IX-B	1b	0.
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	1,662,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income Enter 1% of Part I, line 27b	5	37,858. 1,624,642.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,624,642.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies f	for the section
	4940(e) reduction of tax in those years		

22-3753685 Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,				1,681,161.
line 7 2 Undistributed income, if any, as of the end of 2013		- ,		
a Enter amount for 2012 only			1,314,068.	
b Total for prior years				- ,
b total for prior years		0.		
3 Excess distributions carryover, if any, to 2013				
a From 2008				
b From 2009				
c From 2010				
d From 2011				
e From 2012				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from				
Part XII, line $4 \triangleright \$ 1,662,500$.				
a Applied to 2012, but not more than line 2a			1,314,068.	
b Applied to undistributed income of prior				, , , ,
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				348,432.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2013	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		•		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		•		
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2013 Subtract				
lines 4d and 5 from line 1. This amount must				1 222 720
be distributed in 2014				1,332,729.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0			
section 170(b)(1)(F) or 4942(g)(3)	0.			·····
8 Excess distributions carryover from 2008	0.			
not applied on line 5 or line 7	0.			······································
9 Excess distributions carryover to 2014.	0.			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2009				
b Excess from 2010				
c Excess from 2011				
d Excess from 2012				
e Excess from 2013		1	<u> </u>	Form 990-PF (2013)

	ID R. AND PA	ATRICIA D.	ATKINSON	00 055	
Form 990-PF (2013) FOUNDAT		 		22-375	3685 Page 1
Part XIV Private Operating F	oundations (see ins	tructions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling o foundation, and the ruling is effective fo		,	>		
b Check box to indicate whether the found	lation is a private operating	g foundation described ii		4942(J)(3) or 494	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed	ļ	·			
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of				1	
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities	j]	
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties) (2) Support from general public					
and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization	L				
(4) Gross investment income					
Part XV Supplementary Info at any time during t			if the foundation	had \$5,000 or mo	re in assets
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh year (but only if they have contributed n	o have contributed more t		ributions received by the	foundation before the close	e of any tax
SEE STATEMENT 8					
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large portio	n of the ownership of a pa	rtnership or
NONE	·				
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions t	o preselected charitable	organizations and does n		
a The name, address, and telephone num	ber or e-mail address of th	he person to whom appli	cations should be addres	sed	
b The form in which applications should t	e submitted and informat	ion and materials they st	nould include		
c Any submission deadlines					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or c	other factors	

orm 990-PF (2013)	FOUNDAT:	

3 Grants	s and Contributions Paid During the Ye		Payment		
o Grant	Recipient	If recipient is an individual,	1	T	
Na	me 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	Tecipient		
a Paid	during the year				
SEE SCHEI	DULE ATTACHED	NONE	501(C)(3)	GENERAL	
					1,662,500.
		j			
					
Total	_	·*····································		▶ 3a	1,662,500.
	oved for future payment				
				i	
	NO.				
	NONE				
					}
					1
					1
Total		<u> </u>		▶ 3b	0.

22-3753685 Page 12

iter gross amounts unless otherwise indicated	0.1.7 0.0.10 0	usiness income		by section 512, 513, or 514	(e)
Drag	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue	code		- COOLE		
			+		
	1			·	
		 -			
e	- 		 -		
g Fees and contracts from government agencies			 		
Membership dues and assessments			+++		
Interest on savings and temporary cash			1		 -
Investments			14	31.	
Dividends and interest from securities			14	963,988.	
Net rental income or (loss) from real estate		_, _,			
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property	j				
Other investment income					
Gain or (loss) from sales of assets other		-			
than inventory			18	2,861,322.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a	_				
b	_				
C	_	~~~			
d	_				
e	_			2 005 241	
		()	•	3,825,341.	
Subtotal Add columns (b), (d), and (e)		<u></u>		4.0	2 025 27
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations			Exempt	13	3,825,34
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities	s to the Accon	nplishment of I		Purposes	3,023,36
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities ne No Explain below how each activity for which in	s to the Accon	nplishment of I		Purposes	3,023,36
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities ne No Explain below how each activity for which in	s to the Accon	nplishment of I		Purposes	3,023,36
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities the No Explain below how each activity for which in	s to the Accon	nplishment of I		Purposes	3,023,3
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities ne No Explain below how each activity for which in	s to the Accon	nplishment of I		Purposes	3,023,3
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities ne No Explain below how each activity for which in	s to the Accon	nplishment of I		Purposes	3,023,3
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities ne No Explain below how each activity for which in	s to the Accon	nplishment of I		Purposes	3,023,3
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities ne No Explain below how each activity for which in	s to the Accon	nplishment of I		Purposes	3,023,3

1 Dud the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other thin section 501(c)) organizations) or in section 527, resting to policical organizations? 1 Ital(1)	Part XVII	Information Regarding Exempt Organizations	Transfers To	and Transactions a	and Relationsl	nips With Noncha	ritable	•	
the Coder (other than sections 501(c)(3) organizations of an accession 527, misting to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets (3) Sites of assets to a noncharitable exempt organization (3) Purchase of assets from a noncharitable exempt organization (3) Purchase of assets from a noncharitable exempt organization (3) Rental of facilities, ecupiment, or other assets (4) Seminary of tendities, ecupiment, or other assets (5) Consist of the noncharitable exempt organization (5) Consist of the noncharitable exempt organization (5) Consist of the noncharitable exempt organization (5) Consist of the noncharitable exempt organization (5) Consist of the noncharitable exempt organization (5) Consist of the noncharitable exempt organization (5) Consist of the noncharitable exempt organization (6) Peacemption or sharing arrangement, show in column (4) the value of the poose, other assets, or past employees 2s is the foundation directly or indirectly affinized with, or related to, one or more tax-exempt organization described in a section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) or in code (other than section 501(c)(3)) or in section 501(c) or in code (other than section 501(c)(3)) or in section 501(c) or in code (other than section 501(c)(3)) or in section 501(c) or in code (other than section 501(c)(3)) or in section 501(c) or in code (other than section 501(c)(3)) or in section 501(c) or in code (other than 501(c) or in code (other than 501(c) or in cod	1 Did the or		in any of the following	no with any other organization	on described in section	on 501(c) of	7	Yes	No
a Transfers from the seporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets 14(1) X 14(2) X 15(2) X 15(3) Assets of sasets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of ficilities, equipment, or other assets (4) Rembursement arrangements (5) Cansor of lang quarantees (5) Cansor of lang quarantees (6) Performance of services or membership or financiang solicitations (6) Performance of services or membership or financiang solicitations (6) Performance of services or membership or financiang solicitations (6) Performance of services or membership or financiang solicitations (6) Asset of 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 properly the epocines good undation if the foundation received less than fair market value in any transaction or channing arrangement, show in column (c) the value of the goods, other assets, or services received (9) Amount involved (9) Name of roparization (9) Amount involved (1) Name of roparization (1) N/A (1) Ossesphere of beautiful, transferror, services properly (1) Amount involved (1) N/A (1) Ossesphere of beautiful, transactions, services received (1) N/A (1) Ossesphere of beautiful, transactions, services received (1) N/A (1) Ossesphere of beautiful, transactions, services received (2) N/A (3) N/A (4) Ossesphere of beautiful, transactions, services received (1) N/A (3) Ossesphere of beautiful, transactions, services received (1) N/A (3) Ossesphere of beautiful, transactions, services properties of prepared to a service of services properties of prepared to a service of services properties of prepared to a service of services properties of prepared to a service of services properties of prepared to a service of services properties of prepared to a service of services properties of prepared to a service of services properties of prepared to a service of servic						011 00 1(0) 01			
(2) Other assets 5 Other transactions (1) Sales of assets from a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental organization arrangements (5) Loans or loan guarantees (5) Performance of services or membership or fundinating solicitations (5) Performance of services from milling lists, but assets, or paid employees (6) Performance of services from milling lists, but assets, or paid employees (7) If the answer to any of the above is "Yes," complete the following schedule Column (6) should always show the fair market value of the goods, other assets, or services received or services by the reporting foundation if the foundation secreted less than fair market value in any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services received in section (6) Amount involved (6) Name of noncharitable exampl organization (9) Amount involved (1) Amount involved (1) Name of noncharitable exampl organization (1) Oescription of transless, transaccious, and sharing arrangement, show in section 501(c) of the Code (fine) and the code (fine) and t			•	- · · · · · · · · · · · · · · · · · · ·	1124110113				
22 University of States 14(2) X Description of relationships 15(2) X Description of relationships 15(2) X		nom the reporting realidation to a ner	ionaritable exempt of	gamzation of			12(1)	1	Х
0 Other transactions 1b(1)		accate							
(2) Purchases of assets from a noncharatable exempt organization (2) Purchases of assets from a noncharatable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental of facilities, equipment, or other assets (5) Loans or floating, equipment, mailing lists, other assets, or paid employes (6) Ferformance of services or membership or fundarising solicitations (7) Loans or floating, equipment, mailing lists, other assets, or paid employes (8) Ferformance of services or membership or fundarising solicitations (9) Loans or floating, equipment, mailing lists, other assets, or paid employes (1) It is X (1) It is X (1) It is X (2) It is a services grown by the exporting foundation if the foundation coerved less than fair market value in any transaction or sharing arrangement, show in column ((i) the value of the goods, other assets, or services growned in asset loss of the latest of the goods, other assets, or services growned in asset loss of the latest of the goods, other assets, or services growned in asset loss of the latest of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services growned in asset loss of the goods, other assets, or services							19(2)		
(2) Purchases of assets from a monchandable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursament arrangements (5) Loans of loan guarantees (6) Performance of services or memberably or fundasing solicitations (6) Performance of services or memberably or fundasing solicitations (6) Performance of services or memberably or fundasing solicitations (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (8) Performance of services or the system of the following schedule Column (b) should always show the fair market value of the goods, other assets, or services received (9) Live no (10) Amount involved (10) Name of noncharfable exempt organization (10) Description or transfer, immacritors, and sharing immograments (8) Live no (10) Amount involved (10) Name of noncharfable exempt organization (10) Description or transfer, immacritors, and sharing immograments (9) Live no (10) Amount involved (10) Name of noncharfable exempt organization (10) Description of relationship (9) Description of relationship (10) Name of organization (10) Description of relationship (11) Performance (11) Response to the following schedule (11) Response			raznization				15/1)	1	x
(3) Rental of facilities, equipment, or other assets (4) Rembrusement arrangements (5) Loans or loan quarantees (6) Performance of services or memberathy or fundacing solicitations (7) Loans or loan quarantees (8) Performance of services or memberathy or fundacing solicitations (8) Performance of services or complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services growing by the reporting foundation of the mess than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Amount movibed (b) Amount movibed (c) Fiame of concharitable exempt organization (d) Description of transfers, transactions, and ahaming arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations (d) Description of transfers, transactions, and ahaming arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations (d) Description of transfers, transactions, and ahaming arrangements 8 In International Column (d) Description of transfers, transactions, and ahaming arrangements 8 International Column (d) International Column (d) Description of relationship 9 In 17'es: complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship 10 International Column (d) International Column (d) Description of relationship 11 International Column (d) International Column (d) Description of relationship 12 International Column (d) International Column (d) Description of relationship 13 International Column (d) International Column (d) Description of relationship 14 International Column (d) International Column (d) International Column (d) International Column (d) International Column (d) International Column (d) International Column (d) International Column (d) International Column (d) International Column (d) International									
(e) Reimbursement arrangements (3) Loans or loan guarantees (3) Coans or loan guarantees (3) Performance of services or membership or fundraising solicidations (4) Performance of services or membership or fundraising solicidations (5) Performance of services or membership or fundraising solicidations (6) Performance of services or services guyen by the reporting foundation if the fundration neceword less than fair market value in any transaction or sharing arrangement, show in column (gl) the value of the goods, other assets, or services guyen by the reporting foundation if the fundation neceword less than fair market value in any transaction or sharing arrangement, show in column (gl) the value of the goods, other assets, or services geower by the reporting foundation if the fundation neceword less than fair market value in any transaction or sharing arrangements, show in column (gl) the value of the goods, other assets, or services geower by the reporting fundation of the goods, other assets, or services guyen by the reporting fundation of the goods, other assets, or services guyen by the reporting fundation in the fundation in grant parameters, show in column (gl) the value of the goods, other assets, or services guyen by the reporting fundation of the goods, other assets, or services guyen by the reporting fundation of the good of the goods of goods of the goods of the goods of the goods of the goods of the goods of the goods of the goods of the goods of the goods of the	` '		. •						
(6) Performance of services or membership or fundrasing solicitations (a) Performance of services or membership or fundrasing solicitations (b) Reformance of services or membership or fundrasing solicitations (c) 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 received (a) Line 70 (b) Amount involved (c) Name of nonchartable exempt organization (d) Description of transless, massections, and sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line 70 (b) Amount involved (c) Name of nonchartable exempt organization (d) Description of transless, massections, and sharing arrangements N / A (a) Reme of organization (b) Type of organization (c) Description of relationship (a) If an ed organization (b) Type of organization (c) Description of relationship N / A (b) Type of organization (c) Description of relationship (c) Description of relationship (d) Name of organization (e) Type of organization (c) Description of relationship (e) Type of organization (e) Type of organization (e) Description of relationship (e) Description of relationship (f) Description of relationship (g) Type of organization (e) Description of relationship (e) Description of relationship N / A Sign Under sensities of service, deduce that I have examined this neturn, including accompanying schedules and statements, and to the best of my strowledge with the prepare of the best of the following schedules and statements, and to the best of my strowledge with the prepare of the best of the propare of the best of the following schedules and statements, and to the best of my strowledge with the prepare of the best of the following schedules and statements, and to the best of my strowledge with the prepare of the best of the following schedules and statements, and to the best of my			15				——————————————————————————————————————		
(6) Performance of services or membership or fundraising solicitations © Sharing of facilities cupment, mailing lists, other assets, or paid employees 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 (b) the value of the goods, other assets, or services govern by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) and other sharing arrangements, show in Column (b) and other sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more bac-exempt organization N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more bac-exempt organizations described in section 501(c) of the Code (other than section 501(c) 3i) or in section 527? If yes, complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Videor penalties the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Videor penalties in penalties of penalty, ideduce that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge when the property is not best in penalties and information of which prepared any knowledge when the property is not best in penalties and information of which prepared any knowledge when the property is not best in penalties any knowledge when the property is not best in penalties and information of which prepared any knowledge when the penalties any knowledge when the penalties and information of which prepared any knowledge when the penalties any knowledge when the penalties and information of which prepared any knowledge when	• •	<u> </u>							
to Sharing of facilities, equipment, mailing lists, other assets, or paid employees It Is X 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 greated to see that fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received N	• •	•	fundraining calinitatio	200					
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 (b) the value of the goods, other assets, or services received.	* *	·	•						
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 (a) the value of the goods, other assets, or services received (a) Amount involved (b) Amount involved (c) Riame of noncharitable exempt organization (d) Description of ministers, reassactions, and sharing arrangements N/A (d) Description of ministers, reassactions, and sharing arrangements N/A (d) Description of ministers, reassactions, and sharing arrangements N/A (d) Description of ministers, reassactions, and sharing arrangements N/A (e) Riame of noncharitable exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? ∨es	•	• •		· •	wave about the four m	arket value of the goods		l	
column (a) the value of the goods, other assets, or services received (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a 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? (a) Name of organization (b) Type of organization (c) Description of relationship N/A (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign and peind. It jumes, cornect, and complete Declarated this return, including accompanying schedules and statements, and to the best of my knowledge N/A Paid Paid Preparer Signature of officer or truster WALTER E. RAMICK, JR. Preparer's Signature Preparer Use Only Firm's address > 2320 FAUNCE ST. PHILADELPHIA, PA 19152-4112 Phone no (215) 333-8246		-	-		-	-		eis,	
Signature of organization (a) Description of transfers, transactions, and shaning arrangements N/A				eu iess tilali iali tilaiket valu	ie ili aliy transaction	or snaming arrangement, s	MOW III		
N/A 2a 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 52?? □ Yes □ No □ H'Yes, "complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign and belief, it guines, correct, and complete Declaracy of preparer (other then taxpeyed is based on all information of which preparer has any knowledge limit that the examined this return, including accompanying schedules and statements, and to the best of my knowledge limit that the examined this return, including accompanying schedules and statements, and to the best of my knowledge limit that the examined this replace in the following accompanying schedules and statements, and to the best of my knowledge limit that the examined this return, including accompanying schedules and statements, and to the best of my knowledge limits that the examined this return, including accompanying schedules and statements, and to the best of my knowledge limits that the examined this return, including accompanying schedules and statements, and to the best of my knowledge limits that the examined this return, including accompanying schedules and statements, and to the best of my knowledge limits that the examined this return, including accompanying schedules and statements, and to the best of my knowledge limits that the examined this return, including accompanying schedules and statements, and to the best of my knowledge limits that the examined this return, including accompanying schedules and statements, and to the best of my knowledge limits that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the examined that the exa				a evemnt organization	(d) Consenting	of transfer transactions and			
2a 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? □ If Yes, "complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign Here Jav 8, 215 Trunstee Trunstee Jav 8, 215 Trunstee Trunste	(a) Line no	(b) Amount mivolved (c)		e exempt organization	(u) Description	of transfers, transactions, and	Snanng an	angeme	nts
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th			N/A						
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th									
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th									
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th									
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th				-	 				
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th						 			
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th			-						
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th				 	 				
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th					 -				
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th				_	- 				
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th									
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th					 				
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th			·	- 					
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th									
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign 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 like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of organization of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is like, correct, and complete Declarate of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of the preparer shown below (see inst 1?) In the like of the following schedules and statements, and to the best of my knowledge and belief in the like of my knowledge and belief in the like of my th		<u></u>							
b if "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A 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 dece, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge JAN 8, 216 TRUSTEE TRUSTE					zations described	_			7
(a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and statements, and to the b		, ,	1 501(c)(3)) or in sec	tion 527?		L	Yes	LX.	J No
N/A Sign Here 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 the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is the preparer shown below (see instr.)? Yes No	b If "Yes," co			·					
Sign Here Vinder penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is tree, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is tree, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and belief, it suffers as any knowledge and selection of the last of the last of the last of my knowledge and statements, and to the best of my knowledge and selection of the last of my knowledge and selection of my knowledge and selection of my knowledge and selection of the last of my knowledge and selection of my knowledge and selection of my knowledge and selection of my knowledge and selection of my knowledge and selection of my knowledge and selection of my knowledge and selection of my knowledge and selection of my knowledge and selection of my knowledge and selection of my knowledge and selection of my knowled				(b) Type of organization		c) Description of relations	hip		
Sign Here Signature of officer or trustee Signature Signat		N/A							
Sign Here Signature of officer or trustee Signature Signat									
Sign Here Signature of officer or trustee Signature Signat									
Sign Here Signature of officer or trustee Signature Signat									
Sign Here Signature of officer or trustee Signature Signat				<u> </u>	<u> </u>				
Sign Here Signature of officer or trustee						Ma	y the IRS	discuss	this
Print/Type preparer's name WALTER E. RAMICK, JR. Firm's name ► ZWEIG, RAMICK & ASSOCIATES Firm's address ► 2320 FAUNCE ST. Phone no (215) 333-8246	Sign 📐	erier, it is trae, correct, and complete Declara	port of preparer (other tha	in taxpayer) is based on all inform	nation of which preparer	ret	um with th	e prepar	er
Print/Type preparer's name WALTER E. RAMICK, JR. Firm's name ► ZWEIG, RAMICK & ASSOCIATES Firm's address ► 2320 FAUNCE ST. PHILADELPHIA, PA 19152-4112 Pote Check if PTIN self-employed P00038013 Firm's EIN ► 23-1994281 Phone no (215)333-8246	Here	Stor K H	1	JAN 8, 2015	TRUSTE				7
Paid Preparer Use Only WALTER E. RAMICK, JR. Firm's name ► ZWEIG, RAMICK & ASSOCIATES Firm's address ► 2320 FAUNCE ST. PHILADELPHIA, PA 19152-4112 Phone no (215)333-8246	Sigr	nature of officer or trustee / V	_	Date	Title				
Paid Preparer Use Only Firm's address ► 2320 FAUNCE ST. PHILADELPHIA, PA 19152-4112 P00038013 Firm's EIN ► 23-1994281 Phone no (215)333-8246		Print/Type preparer's name	Preparer's s	ignature	Date	Check If PTIN			
Preparer Use Only Firm's name ► ZWEIG, RAMICK & ASSOCIATES / Firm's address ► 2320 FAUNCE ST. PHILADELPHIA, PA 19152-4112 Phone no (215)333-8246		WALTER E. RAMICH	(, , ,) 1	L-1. 1	1. 110	self- employed			
Preparer Use Only Firm's name ► ZWEIG, RAMICK & ASSOCIATES / Firm's address ► 2320 FAUNCE ST. PHILADELPHIA, PA 19152-4112 Phone no (215)333-8246	Paid	JR.	$\mathcal{U}_{\mathcal{U}}$	tu 7/1 mus	11/12/9	P0	0038	013	
Use Only Firm's address ► 2320 FAUNCE ST. PHILADELPHIA, PA 19152-4112 Phone no (215)333-8246	Preparer		MICK & AS	SOCIATES	· · · · · · · · · · · · · · · · · · ·				
Firm's address > 2320 FAUNCE ST. PHILADELPHIA, PA 19152-4112 Phone no (215)333-8246	Use Only	[- -		
PHILADELPHIA, PA 19152-4112 Phone no (215)333-8246	•	Firm's address ► 2320 FAU	JNCE ST.			 			
				19152-4112		Phone no (215)	333-	824	6
									

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

2013

Name of the organization

THE DAVID R. AND PATRICIA D. ATKINSON FOUNDATION

22-3753685

Employer identification number

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

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer 'No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA 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)

Name of organization
THE DAVID R. AND PATRICIA D. ATKINSON
FOUNDATION

Employer identification number 22-3753<u>6</u>85 ____

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	DAVID R. ATKINSON 2111 NORTH CRESCENT BLVD. YARDLEY, PA 19067	\$ 1,500,000.	Person X Payroll
(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 Payroli Oncash Occash If for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.

Name of organization

Employer identification number

THE DAVID R. AND PATRICIA D. ATKINSON

(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given	Description of noncash property given (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Description of noncash property given (e) (b) Description of noncash property given (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions)

Employer identification number

THE DAVID R. AND PATRICIA D. ATKINSON

F١	٦ſ	IN	D	ΔT	T	ON	
L١	J	JIN	$\boldsymbol{\nu}$		1	\sim r $_{\rm I}$	

22-3753685

art III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and th the total of exclusively religious, charitable, etc	e following line entry. For organization	c)(7), (8), or (10) organizations that total more than \$1,000 for the completing Part III, enter rithe year (Enter this information once.) \$
	Use duplicate copies of Part III if additional		
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
— :			
		(e) Transfer of git	ft
-	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ft
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee
-			
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gi	ft
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
irt I			
		(e) Transfer of gi	ift
	Transferee's name, address, ar		Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVII	NGS AND TEM	PORARY CAS	H IN	VESTMENTS	STATEME	NT 1
SOURCE		(A REVEI PER BO	NUE NE'	r in	(B) VESTMENT COME	(C) ADJUS NET IN	
BANK OF AMERICA			31.	·	31.		-
TOTAL TO PART I, LI	NE 3		31.		31.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM S	ECUR	ITIES	STATEME	NT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVEN S PER BO		(B) NET INVES MENT INCC	ST- ADJ	C) USTED INCOME
GOLDMAN SACHS - NOM	963,988		0. 963,	988.	963,98	88.	
TO PART I, LINE 4	963,988	. (963,	988.	963,98	88.	
FORM 990-PF		ACCOUNTI	NG FEES			STATEME	NT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM	CHAR	D) ITABLE POSES
ACCOUNTING	_	3,030.	3,0	30.	· · · · · · · · · · · · · · · · · · ·		0.
TO FORM 990-PF, PG	1, LN 16B	3,030.	3,0	30.			0.
FORM 990-PF		TAX	ES			STATEME	NT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM	CHAR	D) ITABLE POSES
FEDERAL 990-PF EXCI WITHHELD FOREIGN TA		44,930. 15,955.	15,9	0. 55.	······································	·····	0.
TO FORM 990-PF, PG	1, LN 18	60,885.	15,9	55.			0.
							

FORM 990-PF	OTHER E	XPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST			
BANK CHARGES CUSTODY FEE	95. 3,000.	3,00	5.).		0.
TO FORM 990-PF, PG 1, LN 23	3,095.	3,09	5.		0.
FORM 990-PF OTHER DECREASE	S IN NET AS	SETS OR FUN	D BALANCES	STATEMENT	6
DESCRIPTION				AMOUNT	
RECLAIMABLE FOREIGN TAX				21,2	
TOTAL TO FORM 990-PF, PART II	I, LINE 5			23,2	73.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7
DESCRIPTION		:	BOOK VALUE	FAIR MARKE VALUE	т
SECURITIES - SEE SCHEDULE ATT	ACHED	 .	21,744,669.	28,252,5	15.
TOTAL TO FORM 990-PF, PART II	, LINE 10B		21,744,669.	28,252,5	15.
	PART XV - L	INE 1A ON MANAGERS		STATEMENT	8

NAME OF MANAGER

DAVID R. ATKINSON PATRICIA D. ATKINSON Contribution

		i	i	i	;	
Organization	Street	City	State	dı7		Amount
ALPHA House	701 Fifth Avenue North	St. Petersburg	딮	33701	❖	2,000 00
Alzheimer's Association	225 N. Michigan Avenue - Floor 17	Chicago	긆	60601-7633		25,000
American Cancer Society	P.O. Box 1918	Morristown	Z	07962		8,000
Anchor House	482 Centre Street	Trenton	Z	08611		6,000
Angel's Wings	601 Hamilton Avenue - Floor 7	Trenton	Z	08629		6,000
APAW	P.O. Box 162	Princeton Jct	Z	08550		6,000
ARC of Westchester	265 Saw Mill River Road	Hawthorne	ž	10532		3,000
Bard Prison Initiative	P.O. Box 5000	Annandale-on-Hut NY	uc N∀	12504-5000		30,000
Boys and Girls Club of Trenton	212 Centre Street	Trenton	Z	08611		2,000
Bucks County Children's Museum	P.O. Box 516	Doylestown	ΡA	18901		30,000
Canine Partners for Life	P.O Box 170	Cochranville	ΡA	19330-0170		6,000
Cape May City Volunteer Fire Dept	P O Box 375	Cape May	Z	08204		2,000
CARE	114 Forrest Avenue - Room 106	Narbeth	PA	19072		340,000
Center for Discovery, The	P O. Box 840	Harris	Ž	12742		15,000
College Possible	450 N. Syndicate - Suite 325	St. Paul	Z	55104		25,000
Cornell University - Atkinson Forum in Am Studies	130 E Seneca Street	Ithaca	ž	14850		20,000
Cornell University - ACSF/CARE	130 E Seneca Street	Ithaca	ž	14850		75,000
Doctors Without Borders	333 Seventh Avenue - Floor 2	New York	ž	10001-5004		170,000
Dogs for the Deaf	10175 Wheeler Road	Central Point	OR	97502		6,000
Earth Vision Trust c/o The Wild Foundation	717 Poplar Avenue	Boulder	8	80304		25,000
Elixir Fund	P.O. Box 326	Princeton Jct.	2	08220		15,000
Environmental Defense	257 Park Avenue South	New York	ž	10010		175,000
Free Library Fdn of Philadelphia (George S Pepper Society)	1901 Vine Street Suite 111	Philadelphia	ΡA	19103-1189		3,000
Fresh Air Fund	633 Third Avenue	New York	Ž	10017		2,000
Friends of Princeton Open Space	57 Mountain Avenue	Princeton	2	08540		15,000
Habitat for Humanity	601 N. Clinton Avenue	Trenton	₹	08638-3446		8,000
Heifer Project International	1 World Avenue	Little Rock	AR	72202		15,000
Homefront	1880 Princeton Avenue	Lawrenceville	2	08648		79,000
Isles	10 Wood Street	Trenton	Z	08618		12,000
Learning Ally Inc. (Rec for Blind)	20 Roszel Road	Princeton	Z	08540		2,000
Lymphoma Resarch Foundation	115 Broadway - Surte 1301	New York	ž	10006		6,000
Madison Valley Hospital Foundation	P.O. Box 993	Enis	M	59729		2,500

Atkinson Foundation 2014 Charitable Contributions EIN 22-3753685

					Contribution
Organization	Street	City	State	Zip	Amount
Make-A-Wish Foundation	512 Township Line Road - Suite 133	Blue Bell	PA	19422	2,000
Marine Mammal Stranding Center	P O Box 773	Brigantine	₹	08203	4,000
McCarter Theater	91 University Place	Princeton	Z	08540	2,000
Mosts on Wheels c/o American Red Cross	707 Alexander Road - Suite 101	Princeton	Z	08540	18,000
Memorial Sloan Kettering Cancer Center	633 Third Avenue - 28th Floor	New York	ž	10017	30,000
Mercer County Wildlife Center	P O. Box 161	Titusville	Z	08260	2,000
Mid Atlantic Center for the Arts (MAC)	P.O Box 340	Cape May	Z	08204-0340	2,000
The Nature Conservance	15 E. Ridge Pike - Suite 500	Conshohocken	ΡA	19428	30,000
New Fevot United Methodist Church Trustees' Fund	38 North Main Street	New Egypt	Z	08533	000′9
New Hope Arts Inc	2 Stockton Avenue	New Hope	ΡA	18938	2,000
New Hope Arts, His	93 West Ferry Street	New Hope	ΡΑ	18938-1332	10,000
New Tippe Cibrary School District	180 West Bridge Street	New Hope	ΡA	18938	20,000
New Jersey Audubon Society	9 Hardscrabble Road	Bernardsville	2	07924	2,000
New York Times Needlest	4 Chase Metrotech Center - 7th Floor East, Lock Brooklyn	ock Brooklyn	ž	11245	25,000
Princeton HealthCare System Foundation	3626 U S Route One	Princeton	Z	08540	10,000
Project Forward Leap	100 N. 18th Street - Suite 300	Philadelphia	ΡA	19103	000'09
Project Freedom at Hamilton	223 Hutchinson Road	Robbinsville	Z	08691	2,000
Reason Foundation	5737 Mesmer Avenue	Los Angeles	5	90230	3,000
Rocky Mojintain Institute	2317 Snowmass Creek Road	Snowmass	8	81654-9199	12,000
Salvation Army - National Division	615 Slaters Lane	Alexandria	Α>	22314	80,000
Sound Eve The	P.O. Box 375	Morristown	Z	07963-0375	10,000
Stelling Lyt, mic St. Mary Medical Center Foundation	One Summit Square -Suite 300	Langhorne	ΡA	19047	15,000
CTRIVE	240 East 123rd Street	New York	ž	10035-2038	15,000
Trenton Area Soup Kitchen	72 1/2 Escher Street	Trenton	Z	08605	25,000
Heilton Alca Soup Michell	102 East Mermaid Lane	Philadelphia	ΡΑ	19118	3,000
Visitation Home	P.O Box 11242	Hamilton	Z	08620	10,000
VISIGNES 17 17	150 North Sixth Street	Philadelphia	ΡA	19106	25,000
World Wildlife Fund	1250 24th Street N.W.	Washington	20	20037-1193	10,000
vardlev-Makefield FMS	1140 Edgewood Road	Yardley	ΡΑ	19067	3,000
Yardley-Makefield Fire	105 South Main Street	Yardley	ΡΑ	19067	2,000

Total

\$ 1,662,500 00

THE DAVID R. AND PATRICIA D. ATKINSON FOUNDATION

GOLDMAN SACHS

CAPITAL GAINS (LOSS) 09/01/13 - 8/31/14

		Date	Date	Sales	Cost	
Security	Shares	Acquired	Sold	Price	Basis	Gain or Loss
MNST	. 10,000	7/17/2013	10/4/2013	522,628.89	. 622,063.00	\$ (99,434,11)
1. 152.1						
PNR	20,000	9/17/2012	10/13/2013	1,351,176.47	859,482.00	491,694.47
JCI -	20,000	11/19/2012	11/26/2013	1,009,808.41	517,360.00	492,448.41
				True in March 1 1 1 1 1 1 1 1 1 1 1		
JCI	20,000	11/19/2012	12/23/2013	1,011,848.37	517,360.00	494,488.37
JPM	25,000	:::10/30/2013;;;	1/23/2014	.: 1,417,562,81	1,324,685,00	92,877.81
WY	70,000	VARIOUS	6/12/2014	2,188,844.54	1,239,602.00	949,242.54
				a nyamona general antonia di nomina di nasara di nasara di nasara di nasara di nasara di nasara di nasara di n	مياديان بالرويان بيداسيد واستراسي والمسارسين والمسارسين	فاسترمه بتجاهيه واسترساه واستري المساورة والمساورة والمساورة
ÉL	23,000	4/1/2013	6/16/2014	1,755,219,98	1,461,817.90	293,402.08
40.00			4 54 5 5 5 5 5	A PORT OF THE PROPERTY OF THE	Managaran Maria and Maria Maria	
CCL	45,000	VARIOUS	6/16/2014	1,731,138.70	1,584,536.00	146,602.70
			_			
TOTAL			<u>-</u>	10,988,228.17	8,126,905.90	2,861,322.27

ATKINSON FOUNDATION

Holdings

Period Ended August 31, 2014

PUBLIC EQUITY

	on O	Market Brice	Market Value /	llnit Cost	Pool Booin
US EQUITY					
US STOCKS					
COCA-COLA COMPANY (THE) CMN (KO)	82,000 00	41 7200	3,421,040 00	27 9553	2,292,335.80
COLGATE-PALMOLIVE CO CMN (CL)	40,000 00	64 7300	2,589,200 00	37 7504	1,510,017 00
CSX CORPORATION CMN (CSX)	45,000 00	30 9100	1,390,950 Q0 7,200 00	28 3133	1,274,098 50
GENERAL ELECTRIC CO CMN (GE)	130,000.00	25 9800	3,377,400 00	18 2841	2,376,930.00
J M SMUCKER CO CMN (SJM)	100 00	102.6000	10,260.00		751.50
			64 00		
MCCORMICK & CO NON VTG SHRS CMN (MKC)	25,000 00	0069 69	1,742,250 00	39 9331	998,327 50
NORDSTROM INC CMN (JWN)	28,000 00	69 2500	1,939,000.00	62 9760	1,763,329 20
			9,240 00		
PROCTER & GAMBLE COMPANY (THE) CMN (PG)	37,000 00	83 1100	3,075,070 00	49 8042	1,842,756 04
THE FRESH MARKET, INC CMN (TFM)	10,000 00	33 3500	333,500 00	50 6191	506,191 00
TWITTER, INC CMN (TWTR)	250 00	49 7500	12,437 50	26 0000	6,500.00
UNITED PARCEL SERVICE, INC. CLASS B COMMON STOCK	28,000 00	97 3300	2,725,240 00	73 1764	2,048,937 80
(UPS)	:	i	18,760 00		
VERIZON COMMUNICATIONS INC CMN (VZ)	25,000 00	49 8200	2,740,100 00	50 1185	2,756,517.50
TOTAL US STOCKS			23,356,447 50 35,264 00		17,376,691.84
NON-US EQUITY					
NON-US STOCKS					
GLAXOSMITHKLINE PLC SPONSORED ADR CMN (GSK)	30,000 00	49 1000	1,473,000 00	45 3750.	1,361,250 00
			19,446 12		

His represents a bank deposit of an affiliated bank reflected here for your convenience and is not cash held in your brokerage or custody account. Please see the enclosed Bank Statement page(s) for specific information related to your bank deposit Not a Deposit. Not a Deposit

Page 7 of 23

Brokerage and securities services provided by Goldman, Sachs & Co. Bank Deposit Account and Certificate of Deposit Account offered by Goldman Sachs Bank USA, Member FDIC Portfolio No. XXX-XX573-1

ATKINSON FOUNDATION Holdings (Continued)

Period Ended August 31, 2014

PUBLIC EQUITY (Continued)

			Market Value/		
	Quantity	Market Price	Market Price Accrued Income	Unit Cost	Cost Basis
NON-US EQUITY					
NON-US STOCKS					
NESTLE SA SPONSORED ADR (REP 1/20 CHF 10 REGD SHS)	44,000 00	77 7970	77 7970 3,423,068 00	68 3347	3,006,726 80
TOTAL NON-US STOCKS			4,896,068 00		4,367,976 80
_			19,446 12		
TOTAL PUBLIC EQUITY			28,252,515.50 54,710.12		21,744,668.64

6 Original Cost is price paid by purchaser adjusted for amual original issue discount inclusions and/or return of capital adjustments, if applicable Adjusted Cost reflects adjustments for market discount accretion and/or premium amortization Adjusted cost for GMS Portfolios and Alternative Investments are determined by inception to date contributions minus inception to date distributions

Portfolio No XXX-XX573-1



Page 8 of 23

7)-2

MARKA AMA AMA MARKA MARKA MA