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## Form **990-PF**Department of the Treasury

EXTENDED TO AUGUST 17, 2015
Return of Private Foundation

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

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

OMB No 1545-0052
2014
Open to Public Inspection

Internal Revenue Service For calendar year 2014 or tax year beginning , and ending Name of foundation A Employer identification number 65-0510147 ALPHA / OMEGA CHARITABLE FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 203-622-9360 31 BROOKSIDE DRIVE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 06836 GREENWICH, CT G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 5,927,208. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purpose (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income N/A 0. Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 141,405 141,405 STATEMENT Dividends and interest from securities 5a Gross rents Net rental income or (loss) 644,808 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 8a 3,414,513. 644,808 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sole c Gross profit or (loss) 502 502 STATEMENT 11 Other income 786 715. 786 715 Total. Add lines 1 through 12 Other employee salaries and wages DEN, U 0. 0. 0 15 Pension plans, employee benefits Expenses STMT 3 16,462 0 16,462. 16a Legal fees STMT 4 5,040. 2,520 2,520. **b** Accounting fees c Other professional fees Operating and Administrative 17 Interest STMT 5 12,774 1,686 0. 18 Taxes 19 Depreciation and depletion Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 6 50,175 49,031 1,144. 23 Other expenses Total operating and administrative 20,126. 84,451 53,237 expenses Add lines 13 through 23 299,000. 299,000 Contributions, gifts, grants paid 26 Total expenses and disbursements. 319,126. 383,451 53,237 Add lines 24 and 25 27 Subtract line 26 from line 12: 403,264 a Excess of revenue over expenses and disbursements 733,478 b Net investment income (if negative, enter -0-)

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

LHA For Paperwork Reduction Act Notice, see instructions

<u>Fo</u>	rm 99	0-PF(2014) ALPHA / OMEGA CHARITABLE	FOUNDATION	65-	0510147 Page 2
F	art	Balance Sheets   Attached schedules and amounts in the description   Column Should be for end-of-year amounts only	Beginning of year	End of	
<u>-</u>	1	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	309,814.	718,562.	718,562.
	1	Savings and temporary cash investments			<del></del>
	3	Accounts receivable >			
	١.	Less: allowance for doubtful accounts			<u></u>
	4	Pledges receivable >			
	_ ا	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	,	disqualified persons			
	7	Other notes and loans receivable  Less; allowance for doubtful accounts			
Assets		Inventories for sale or use		·	
	1	Prepaid expenses and deferred charges			<del></del>
	1	Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
	1 1	Investments - corporate bonds			
	1	Investments - land, buildings, and equipment basis			
	` `	Less accumulated depreciation			
	12	Investments - mortgage loans			<del></del>
	13	Investments - other STMT 7	4,452,878.	4,441,692.	5,201,535.
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			
	15	Other assets (describe ► STATEMENT 8 )	1,409.	7,111.	7,111.
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	4,764,101.	5,167,365.	5,927,208.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
lab	1	Mortgages and other notes payable			
_	22	Other liabilities (describe >)			
			0	0	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
Se	0.4	and complete lines 24 through 26 and lines 30 and 31.			
Š	24 25	Unrestricted			
3ala		Temporarily restricted Permanently restricted			
ğ	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
<b>Net Assets or Fund Balances</b>	27	Capital stock, trust principal, or current funds	4,764,101.	5,167,365.	
sets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
let	30	Total net assets or fund balances	4,764,101.	5,167,365.	
_					
_	31	Total liabilities and net assets/fund balances	4,764,101.	5,167,365.	
F	art	Analysis of Changes in Net Assets or Fund Bal	ances		
Ξ		net assets or fund balances at beginning of year - Part II, column (a), line 30		<del></del>	
•		st agree with end-of-year figure reported on prior year's return)			4,764,101.
2	•	r amount from Part I, line 27a		2	403,264.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	5,167,365.
		eases not included in line 2 (itemize)		5	<u> </u>
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (b), line 30	6	5,167,365.
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7

8

316,004.

319,126.

7 Add lines 5 and 6

See the Part VI instructions.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate

8 Enter qualifying distributions from Part XII, line 4

	n 990-PF (2014) ALPHA / OMEGA CHARITABLE FOUNDATION 65-05 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se			Page 4	
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%				
	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.	
3	Add lines 1 and 2		<u>   7                                 </u>	<u>335.</u>	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		<u>7, :</u>	335.	
6	Credits/Payments.				
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6,800.				
	Exempt foreign organizations - tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)  6c 3,000.				
	Backup withholding erroneously withheld 6d				
	Total credits and payments. Add lines 6a through 6d		9,1	<u>300.</u>	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			<u>4.</u>	
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	<del> </del>			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2,4	<u> 161.</u>	
	Enter the amount of line 10 to be: Credited to 2015 estimated tax			<u>0.</u>	
	rt VII-A Statements Regarding Activities		V-	. Na	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	Tes	No	
	any political campaign?	<u>1a</u>		<u> </u>	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1 <u>b</u>		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities			1,,	
	Did the foundation file Form 1120-POL for this year?	10	-	<u> </u>	
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .	ļ			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. > \$ 0.			7.7	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	+	<u> </u>	
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			₹.	
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "You" has it filed a tay return on Form 900. If for this year?	4a	<del></del>	<u> </u>	
	If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b 5		X	
J	If "Yes," attach the statement required by General Instruction T	-		+ <u>~</u>	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
٠	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	remain in the governing instrument?	6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	<del>                                     </del>	
•	bid the foundation have at least ψο,000 in assets at any time during the year. It is too foot of art in, cor (ο), and i art xiv	<u> </u>	1	+	
Ra.	Enter the states to which the foundation reports or with which it is registered (see instructions)				
vu	FL	-	1		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-			
J	of each state as required by General Instruction G? If "No," attach explanation	8ь	X		
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	100	† <del></del>	<del>                                     </del>	
•	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	1	$\frac{1}{x}$	
			A DE	(00 ( 1)	

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	990-PF (2014) ALPHA / OMEGA CHARITABLE FOUNDATION 65-051  Int VII-A   Statements Regarding Activities (continued)	0147	· · · · · · · · · · · · · · · · · · ·	Page <b>5</b>
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			Ι –
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		Χ_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► FRANK J. GILBRIDE II Telephone no. ► 203-6			
	Located at ► 31 BROOKSIDE DRIVE, GREENWICH, CT ZIP+4 ►0	<u> 6836</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	31	. /₃►	· []
40	and enter the amount of tax-exempt interest received or accrued during the year  At any time during color day year 2014, did the foundation because we have a section of the part to the section of the s	N	/A Yes	No
10	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	ا م	res	
	securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the	16	L	<u>X</u>
	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No	}		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No			
h	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
Ū		1b		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A  Organizations relying on a current notice regarding disaster assistance check here	"		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2014?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):	ŀ		
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2014?	Ì		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
D	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach	ĺ		
	statement - see instructions.)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		
·	•			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	İ		
b	If "Yes," did it have excess business holdings in 2014 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,			
	Form 4720, to determine if the foundation had excess business holdings in 2014 ) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			7.7
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b orm <b>99</b> 0	)_DE	X (2014)
	r	ハハ・コン	/-rr	(2014)

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Form 996-PF (20		CHARITABLE	FOUNDATION Form 4720 May Be I	Required (contin	65-05101	47	Page 6
5a During the y (1) Carry c (2) Influen any voi (3) Provide 4945(d (5) Provide the pre b If any answ section 53.4 Organization c If the answe expenditure If "Yes," at	Statements Regarding Activity year did the foundation pay or incur any amount propaganda, or otherwise attempt to influence the outcome of any specific public election the registration drive?  The a grant to an individual for travel, study, or one a grant to an organization other than a charmal (1)(4)(A)? (see instructions)  The for any purpose other than religious, charmal electron of cruelty to children or animals?  The ris "Yes" to 5a(1)-(5), did any of the transact and the responsibility for the grant?  The responsibility for the grant?	ties for Which I unt to:  unt to:  nce legislation (section in (see section 4955); of their similar purposes table, etc., organization in the scientific, literary, it ions fail to qualify uncassistance (see instructer assistance check in the claim exemption from section 53 4945	Torm 4720 May Be in 4945(e))? In 4945(e))? In to carry on, directly or indirectly or indirectly or indirectly or indirectly or indirectly or educational purposes, or the exceptions described actions)?  Here is a second of the exceptions described actions)?  Here is a second of the exceptions described actions of the exception of the exce	ectly,  You  for  Regulations	es X No	5b	. 490
a personal to b Did the four If "Yes" to 7a At any time	ndation, during the year, receive any funds, di penefit contract? ndation, during the year, pay premiums, direct 6b, file Form 8870 during the tax year, was the foundation a part the foundation receive any proceeds or have	tly or indirectly, on a p	ersonal benefit contract?		es X No	6b	X
Part VIII	Information About Officers, D Paid Employees, and Contract	irectors, Trusto		nagers, Highl		7b	
1 List all offic	ers, directors, trustees, foundation m		compensation.				
	(a) Name and address	_	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acc a'	Expense count, other llowances
GEOFFREY 12 HEATH	Z DE LESSEPS		PRESIDENT				
	ARBOR, NY 11743		1.00	0.	0.		0.
	GILBRIDE, II		SECRETARY/TRE	<del></del>	0.	+	
31 BROOK							
	CH, CT 06836		1.00	0.	0.		0.
ANITA L.			VICE PRESIDEN				
AIKEN RI							
GREENWIC			1.00	0.	0.		0.
	/ERDERBER		VICE PRESIDEN				
104 LEE							
	ITY, NY 11530		1.00	0.	0.		0.
	tion of five highest-paid employees (ot	her than those inc					
(a) Nam	ne and address of each employee paid more th	han \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	l acc	e) Expense count, other llowances
NC	NE		<del></del>				
Total number of	other employees paid over \$50,000			I	<b></b>	4	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		Amount
4		
3		0.
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro	tical information such as the duced, etc.	Expenses
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		▶ 0
NONE	(b) Type of Service	(c) Compensation
(a) Name and address of each person paid more than \$50,000	r "NONE." (b) Type of service	(c) Compensation

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P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·		1a	5.603.459.
b		1b	5,603,459. 457,738.
c		1c	20,7,000
d		1d	6,061,197.
_	Reduction claimed for blockage or other factors reported on lines 1a and		0/002/2011
•	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,061,197.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	90,918.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,970,279.
6	Minimum investment return Enter 5% of line 5	6	298,514.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certair	
	foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	298,514.
2a	Tax on investment income for 2014 from Part VI, line 5		
b			
C	Add lines 2a and 2b	2c	7,335.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	291,179.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	291,179.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	291,179.
<u> </u>	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	319,126.
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:		
a	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	319,126.
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	7,335.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	311,791.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	jualifies	for the section

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### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	( <b>d</b> ) 2014
1 Distributable amount for 2014 from Part XI,	Oorpus	1 cars prior to 2010	2010	2014
line 7				291,179.
2 Undistributed income, if any, as of the end of 2014				201,1100
a Enter amount for 2013 only			196,380.	
<b>b</b> Total for prior years:			230/3000	
		σ.		
3 Excess distributions carryover, if any, to 2014:			***************************************	<del></del>
<b>a</b> From 2009				
<b>b</b> From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from	•		, , , , , , , , , , , , , , , , , , , ,	
Part XII, line 4: ► \$ 319,126.				
a Applied to 2013, but not more than line 2a			196,380.	
b Applied to undistributed income of prior			190,300.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		U •		
•	0.			
(Election required - see instructions)	0.			122 746
d Applied to 2014 distributable amount	0			122,746.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2014  (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& 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	<del></del>			
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				•
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				168,433.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				
423581 11-24-14		· · <u>-</u> · -	···············	Form <b>990-PF</b> (2014)

Form 990-PF (2014) ALPHA /	OMEGA CHAR	ITABLE FOU	NDATION	65-05	10147 Page 10
Part XIV Private Operating F	oundations (see ins	structions and Part V	'II-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the fuling is effective fo		*	<b>▶</b>	· · · · · · · · · · · · · · · · · · ·	
<b>b</b> Check box to indicate whether the found		g foundation described		4942(J)(3) or 49	)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1,0044	
income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
<b>b</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					
exempt activities					
e Qualifying distributions made directly		- · · · · · · · · · · · · · · · · · · ·			1.2.
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:	1				
<ul><li>a "Assets" alternative test - enter:</li><li>(1) Value of all assets</li></ul>					
, ,					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</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					
(4) Gross investment income		· · · · · · · · · · · · · · · · · · ·			
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	ore in assets
at any time during t				40,000 0	
1 Information Regarding Foundation	n Managers:	<del> </del>			
a List any managers of the foundation wh		han 2% of the total cor	atributions received by the	foundation before the clos	se of any tay
year (but only if they have contributed r			in battone received by the	Touridation botore the cic.	so or arry tax
NONE					
b List any managers of the foundation wh	in own 10% or more of the	stock of a corneration	/or an equally large portion	on of the ownership of a n	artnership or
other entity) of which the foundation ha			i (or air equally large portion	on or the ownership of a pr	artificially of
NONE	•				
2 Information Regarding Contribut	ion Grant Gift Loon	Sahalarahin ata E	Programe:		***
Check here X if the foundation of				not account uncollected requi	acta for fundo. If
the foundation makes gifts, grants, etc.					
		•			
a The name, address, and telephone num	ider or e-mail address of the	te person to whom app	nications should be addres	sseu.	
<b>b</b> The form in which applications should l	pe submitted and informat	ion and materials they	should include:		
. An an harmon deadless					
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields	s, kinds of institutions, or o	other factors:	
					5 000 PE (0044)

Form 990-PF (2014) / OMEGA CHARITABLE FOUNDATION 65-0510147 Page 11 ALPHA Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ADOPT A DOG NONE PUBLIC CHARITY GENERAL 849 LAKE AVENUE 10,000. GREENWICH, CT 06830 NONE PUBLIC CHARITY GENERAL ALEX FOUNDATION 415 SOUTH STREET 5,000, WALTHAM, MA 02454 PUBLIC CHARITY GENERAL **AMERICARES** NONE 88 HAMILTON AVENUE PO BOX 4921 7,500. STAMFORD CT 06907 PUBLIC CHARITY GENERAL ANIMAL RESUCE FUND OF THE HAMPTONS NONE 90 DANIELS HOLE RD 5,000, EAST HAMPTON, NY 19137 PUBLIC CHARITY GENERAL CAUMSETT FOUNDATION NONE 25 LLOYD HARBOR RD 500 LLOYD HARBOR NY 11743 SEE CONTINUATION SHEET(S) **▶** 3a Total 299 000 **b** Approved for future payment NONE

Form **990-PF** (2014)

Total

#### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)	
	(a) Business	<b>(b)</b> Amount	(C) Exclu- sion	(d)	Related or exempt	
1 Program service revenue:	code	Amount	code	Amount	function income	
a		<u> </u>				
	1					
<u> </u>						
e		·	~		·	
1						
g Fees and contracts from government agencies						
2 Membership dues and assessments					12	
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	141,405.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory			18	644,808.		
9 Net income or (loss) from special events		···				
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a DISCOUNT ACCRETION	_		14	502.		
b	_					
C	· [					
d	_					
e	_			786,715.	0.	
13 Total Add line 12, columns (b), (d), and (e)	<del>l </del>		· · · · · ·	13		
(See worksheet in line 13 instructions to verify calculations.)	1			,,	. 50, 125	

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

423621 11-24-14		Form <b>990-PF</b> (2014)
		,
		<u> </u>
		<u>-</u>
		<del></del>
▼	the foundation's exempt purposes (other than by providing funds for such purposes).	
Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishing	ment of

Part XV	II Information Re Exempt Organ		To and Transactions a	nd Relationships W	th Noncharitab	le	
1 Did the	<del></del>		lowing with any other organization	n described in section 501(c)	of	Yes	No
			on 527, relating to political organization		01	100	<del>                                     </del>
		ation to a noncharitable exem		Lationo			
(1) Ca	, •	ation to a nononanapio exem	pr or gamzanom or,		1a(1	a	x
	her assets				1a(2		X
	ransactions:				1012	+	1
	iles of assets to a noncharita	ible exempt organization			1b(1	a	X
		oncharitable exempt organizati	on		1b(2		X
	ental of facilities, equipment,				1b(3		X
	eimbursement arrangements				1b(4		X
( <b>5</b> ) Lo	ans or loan guarantees				1b(5		X
(6) Pe	erformance of services or me	embership or fundraising solic	eitations		1b(6		X X X X
c Sharing	haring of facilities, equipment, mailing lists, other assets, or paid employees 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, r services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, olumn (d) the value of the goods, other assets, or services received.						
<b>d</b> If the a	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,						
				e in any transaction or sharing	arrangement, show in		
	<u> </u>	-		T - 7 n			
(a) Line no	(b) Amount involved		<del></del>	(0) Description of transfers	transactions, and sharing	arrangeme	ents
		<u>N/</u>	<u>A</u>				
+	***						
-							
	•						
				<u> </u>	······································		
			<del></del>				
2n Ic the f	oundation directly or indirec	the affiliated with or related to	, one or more tax-exempt organize	ations described			
	•	er than section 501(c)(3)) or in		ations described	☐ Ye	s 🕱	O No
	" complete the following sch		1 SOCION SET !			,	
<u> </u>	(a) Name of org		(b) Type of organization	(c) Descrip	tion of relationship		
	N/A						
_							
		41-11					
Cian an	d belief, it is true, correct, and co	mplete Declaration of preparer (oth	cluding accompanying schedules and s er than taxpayer) is based on all informa	statements, and to the best of my k ation of which preparer has any kno	May the IRS	discuss	this rer
Sign and Here	V2. 00	M. 11. 05			DIREC shown belo	w (see ins	str )?
	Signature of officer or trustee	Numas.	Date	TOR Title	X Ye	.s ∟_	⊔ No
	Print/Type preparer's na	<del></del>	er's sagnature	Date Check	If PTIN		
	WILLIAM K.	1//		AY 1 8 2015 self- emp			
Paid	JR.	wa	wan acy	רו ויט צטוטן	P0003	9693	j
Prepare		ER, DONTEN, I	EVINE ET AL, P	·A· Firm's E	N ► 59-2831		
Use On	ly						
		5 SOUTH FLAGI					
	WE	ST PALM BEACH	I, FL 33401-5948	Phone n	<u>o. 561-832-</u>		
					Form <b>9</b> 9	}0-PF	(2014)

Part XV Supplementary Informat  Grants and Contributions Paid During th	·			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
COLD SPRING HARBOR LABORATORIES	NONE	PUBLIC CHARITY	GENERAL	
BUNGTOWN RD COLD SPRING HARBOR, NY 11724				25,000
CRADLE OF AVIATION	NONE	PUBLIC CHARITY	GENERAL	
CHARLES LINDBERGH BLVD				
GARDEN CITY, NY 11530				5,000
DISABLE AMERICAN VETERANS L150 SW CALIFORNIA BLVD	NONE	PUBLIC CHARITY	GENERAL	
PORT ST LUCIE, FL 34953				5,000
DOMINICAN VILLAGE	NONE	PUBLIC CHARITY	GENERAL	
565 ALBANY AVE				
AMITYVILLE, NY 11701				20,000
CARM CANCERIARY	NONE	PUBLIC CHARITY	CENEDAL	
FARM SANCTUARY 3100 AIKENS ROAD	NONE	PUBLIC CHARITY	GENERAL	
WATKINS GLEN, NY 14891				5,000
FRIENDS OF NATHANIEL WITHERELL	NONE	PUBLIC CHARITY	GENERAL	
70 PARSONAGE RD GREENWICH, CT 06830				7,500
•				
FRONT LINE EQUINE RESCUE	NONE	PUBLIC CHARITY	GENERAL	
Р О ВОХ 307				
LARKSPUR CO 80118		1		5,000
GREEN VALE SCHOOL 250 VALENTINE'S LANE	NONE	PUBLIC CHARITY	GENERAL	
OLD BROOKVILLE, NY 11545				1,000
GREENWICH LAND TRUST	NONE	PUBLIC CHARITY	GENERAL	
132 E. PUTNAM AVE				10,000
GREENWICH, CT 06807			-	10,000
GREENWICH RIDING ASSOC	NONE	PUBLIC CHARITY	GENERAL	
GREENWICH RIDING ASSOC	NOME	CHARITY		
STAMFORD, CT 06907			J	10,000
Total from continuation sheets			`	271 000

/ OMEGA CHARITABLE FOUNDATION 65-0510147 ALPHA Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to status of contribution Amount any foundation manager Name and address (home or business) recipient or substantial contributor HOLT-ELWELL MEMORIAL FOUNDATION NONE PUBLIC CHARITY GENERAL RR 3 BOX A EAST HEBRON, NH 03232 5,000. HOUR CHILDREN PUBLIC CHARITY GENERAL NONE 13-07 37TH AVE NEW YORK, NY 11101 15,000. PUBLIC CHARITY GENERAL INTERFAITH NUTRITIONAL NETWORK NONE 211 FULTON AVE HEMPSTED, NY 11550 10,000, INTERNATIONAL CRANE FOUNDATION NONE PUBLIC CHARITY GENERAL E-11376 SHADY LANE RD PO BOX 447 BARABOO, WI 53913 5,000, PUBLIC CHARITY GENERAL NONE ISLAND HARVEST 199 2ND STREET 5,000, MINEOLA, NY 11501 LEO ZOO CONSERVATION NONE PUBLIC CHARITY GENERAL 404 TACONIC ROAD 5,000, GREENWICH CT 06831 PUBLIC CHARITY GENERAL LEUKEMIA AND LYMPHOMA SOCIETY NONE 1311 MAMARONECK AVE, SUITE 310 10,000. WHITE PLAINS, NY 10605 LONG BEACH WATERFRONT WARRIORS NONE PUBLIC CHARITY GENERAL PO BOX 210 10,000. LONG BEACH, NY 11561 PUBLIC CHARITY GENERAL NATIONAL MULTIPLE SCLEOROSIS SOCIETY NONE 733 THIRD AVE 3RD FLOOR NEW YORK, NY 10017 5 000.

NONE

5,000.

PUBLIC CHARITY GENERAL

Total from continuation sheets

NORTHPORT VA HOSPITAL

79 MIDDLEVILLE ROAD

NORTHPORT NY 11768

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor NORTHWESTERN UNIVERSITY NONE PUBLIC CHARITY GENERAL 720 UNIVERSITY PL EVANSTON, IL 60208 5,000. OPERATION HEARTS AND HOME NONE PUBLIC CHARITY GENERAL BUNGTOWN ROAD COLD SPRING HARBOR, NY 11724 2,500. PANTHERA NONE PUBLIC CHARITY GENERAL 8 WEST 40TH STREET NEW YORK, NY 10018 5.000. RETURN TO FREEDOM PUBLIC CHARITY GENERAL NONE PO BOX 926 LOMPOC CA 93438 5,000, ST JOHN EPISCOPAL CHURCH NONE PUBLIC CHARITY GENERAL PO BOX 266 1670 ROUTE 25A 5,000. COLD SPRING HARBOR, NY 11724 ST MICHAEL'S ROMAN CHATHOLIC CHURCH NONE PUBLIC CHARITY GENERAL 1445 NORTH SECOND STREET PHILADELPHIA, PA 19122 5,000, THE HECKSHERS MUSEUM NONE PUBLIC CHARITY GENERAL 2 PRIME AVE 5,000. HUNTINGTON, NY 11743 THE HOTCHKISS SCHOOL NONE PUBLIC CHARITY GENERAL 11 INTERLAKEN ROAD 15,000. LAKEVILLE CT 06039 THE MISSION WOLF SANCTUARY OF SILVER NONE PUBLIC CHARITY GENERAL CLIFF PO BOX 211 SILVER CLIFF, CO 81252 10,000. THE RIGHT TO DREAM NONE PUBLIC CHARITY GENERAL PO BOX 21040 OLD ARKRADE GHANA 5,000, Total from continuation sheets

ALPHA Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient THINKING ANIMAL, INC NONE PUBLIC CHARITY GENERAL 311 E 72ND ST 5,000. NEW YORK, NY 10021 UNION COLLEGE NONE PUBLIC CHARITY GENERAL 807 UNION STREET 5,000. SCHENECTADY, NY 12308 PUBLIC CHARITY GENERAL WILDLIFE CONSERVATION SOCIETY OF NY NONE 2300 SOUTHERN BOULEVARD BRONX NY 10460 20,000. WOUNDED WARRIOR PROJECT, INC NONE PUBLIC CHARITY GENERAL 7020 AC SKINNER PARKWAY 10,000. JACKSONVILLE, FL 32256 Total from continuation sheets

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM S	SECUR	ITIES S	TATEMENT	1
GROSS DURCE AMOUNT		CAPITAL GAINS DIVIDEND	REVEN	WE	(B) NET INVEST- MENT INCOME		
DIVIDENDS - BNY INTEREST - BNY INTEREST ON US	169,503. 25,488.	54,83		667. 488.			
TREASURY NOTE	1,250.		0. 1,	250.	1,250.		
TO PART I, LINE 4	196,241.	54,83	36. 141,405		141,405.		
FORM 990-PF		OTHER I	NCOME		S	TATEMENT	2
DESCRIPTION			(A) REVENUE PER BOOKS		(B) ET INVEST- ENT INCOME	(C) ADJUSTED NET INCOM	
DISCOUNT ACCRETION			50	)2.	502.		
TOTAL TO FORM 990-P	F, PART I,	LINE 11	50	)2.	502.		
FORM 990-PF		LEGAL	FEES		S	TATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
LEGAL FEES		16,462.	0.			16,46	2.
TO FM 990-PF, PG 1,	LN 16A	16,462.		0.		16,46	2.

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING FEES	5,040.	2,520.		2,520.		
TO FORM 990-PF, PG 1, LN 16B	5,040.	2,520.		2,520.		
FORM 990-PF	TAX	ES	S	ratement 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
FOREIGN TAXES - BNY MELLON EXCISE TAX	1,686. 11,088.			0.		
TO FORM 990-PF, PG 1, LN 18	12,774.	1,686.		0.		
FORM 990-PF	OTHER E	XPENSES	S	ratement 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
INVESTMENT FEES - BNY ADR FEES BANK CHARGES STORAGE FEE - ARTWORK	48,807. 59. 165. 1,144.	59. 165.		0. 0. 0. 1,144.		
TO FORM 990-PF, PG 1, LN 23	50,175.	49,031.		1,144.		

FORM 990-PF	THER INVESTMENTS	STATEMENT 7	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS - BNY MELLON	COST	4,441,692.	5,201,535.
TOTAL TO FORM 990-PF, PART II, L	INE 13	4,441,692.	5,201,535.
FORM 990-PF	OTHER ASSETS		STATEMENT 8
FORM 990-PF  DESCRIPTION	OTHER ASSETS  BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	STATEMENT 8 FAIR MARKET VALUE
	BEGINNING OF		FAIR MARKET

#### Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No 1545-1709

If you are fining for an Automatic 3-Month Extension, complete only Part I and check this pox   I   I   I   I   I   I   I   I   I					ŀ		
Do not complete Part II unless	If you are filing for an Automatic 3-Month Extension, complete	te only Pa	rt I and check this box		)	<u> </u>	
Electronic Niling (er-fle). You can electronically file Form 8868 if you need a 3-month automatic advance or time to file (fle months for a corporation regulared to the Form 900 Tp. or an advanced file form 900 Tp. or an advanced file form 900 Tp. or an advanced file form 900 Tp. or advanced file for 10 Tp. or 10 T	<ul> <li>If you are filing for an Additional (Not Automatic) 3-Month Ex</li> </ul>	tension, c	complete only Part II (on page 2 of	this form)			
required to file Form 990-T), or an additional joint automatic) 3-month extension of time. Yolu can electronically file Form 9888 to request an extension of time to file any of the form states in Part of Part I with the exception of Form 8970. Information Father 1 Part I in Murber 2 Part I in Murber 2 Part I in Murber 3 Part I in Murber 4 Part I in Murber 5 Part I in Murber 5 Part I in Murber 5 Part 1 Part I in Murber 5 Part 1 Part I in Murber 6 Part 1 Part I Part I Part 1 Part 1 Part I Part I Part 1 P	Do not complete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed For	m 8868.		
of time to life any of the forms listed in Part I in Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Barnetic Contracts, which must be sent to the IIS on paper format (see instructions). For more details on the electronic filling of this form, well view vir govintifie and click on a ride for Charles & Alexaporetes.    Part I   Automatic 3-Month Extension of Time. Only submit original (no copies needed).	Electronic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (6	months for a cor	poration	
Personal Barrelit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic fling of this form, were strawn and provide and cauck on an electronic fling of this form, were strawn and provided and cauck on an electronic fling of this form, were strawn and provided and cauck on a reflect of Cantes & Nonprovide.  An other corporation required to the Form 950-T and requesting an automatic 6-month extension - check this box and complete Part I only.  All other corporations (including 1120-C fliers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time.  Interest the reflect of the reflect of the reflect of the income tax refurns.  Interest the Reflect of the reflect of the reflect of the reflect of the income tax reflects.  Interest the Reflect of the refl	required to file Form 990-T), or an additional (not automatic) 3-moi	nth extens	sion of time. You can electronically f	ile Form 88	68 to request an	extension	
Personal Barrelit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic fling of this form, were strawn and provide and cauck on an electronic fling of this form, were strawn and provided and cauck on an electronic fling of this form, were strawn and provided and cauck on a reflect of Cantes & Nonprovide.  An other corporation required to the Form 950-T and requesting an automatic 6-month extension - check this box and complete Part I only.  All other corporations (including 1120-C fliers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time.  Interest the reflect of the reflect of the reflect of the income tax refurns.  Interest the Reflect of the reflect of the reflect of the reflect of the income tax reflects.  Interest the Reflect of the refl	of time to file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers A	Associated With C	ertain	
wist wave re goverêlée and click on e-rêle for Chantes 8 Nonprotos Part I   Automatio 3-Month Extension of Time. Only submit original (no copies needed).  A corporation required to file Form 9901 and requesting an automatic 6 month extension - check this box and complete Part I only  A corporation required to file Form 9901 and requesting an automatic 6 month extension - check this box and complete Part I only  A corporation is (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 for request an extension of time to file income tax returns  Enter filer's identification number Type or Name of exempt organization or other filer, see instructions.  ALPHA / OMEGA CHARTTABLE FOUNDATION FRANK J. GLIBRIDE II  65-0510147  Number, streat, and room or sucte no lif a P O box, see instructions 31 BROOKSIDE DRIVE  Code Is Form 990 or Form 990-EZ  Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Return la For Code Is Form 990 or Form 990-EZ  90 or Form 99							
Part I	·		•		•		
A corporation required to file Form 990 T and requesting an automatic 6-month extension - check this box and complete Part I only Part I o			submit original (no copies ne	eded).	<del>-</del>		
All other comporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time for filer income tax returns.  Type or Name of exempt organization or other filer, see instructions.  ALPHA / OMBGA CHARITABLE FOUNDATION File by the file of the return of the							
to file income tax returns   Name of exempt organization or other filer, see instructions.   Name of exempt organization or other filer, see instructions.   ALPHA / OMBGA CHARITABLE FOUNDATION   FRANK J. GILBRIDE II   65-0510147	Part I only			,	)	<b>▶</b> □	
to file income tax returns   Name of exempt organization or other filer, see instructions.   Name of exempt organization or other filer, see instructions.   ALPHA / OMBGA CHARITABLE FOUNDATION   FRANK J. GILBRIDE II   65-0510147	All other corporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time		
ALPHA / OMEGA CHARITABLE FOUNDATION FRANK J. GILBRIDE II  Mumber, street, and room or suite no if a P O box, see instructions 31 BROOKSIDE DRIVE  Social security number (SSN)  31 BROOKSIDE DRIVE  Enter the Return code for the return that this application is for (file a separate application for each return)  O 4  Application  Return   Application   Return   Is For   Code   Is For	to file income tax returns		·	Enter file	r's identifying nu	ımber	
ALPHA / OMEGA CHARITABLE FOUNDATION FRANK J. GILBRIDE II  Mumber, street, and room or suite no if a P O box, see instructions 31 BROOKSIDE DRIVE  Social security number (SSN)  31 BROOKSIDE DRIVE  Enter the Return code for the return that this application is for (file a separate application for each return)  O 4  Application  Return   Application   Return   Is For   Code   Is For	Type or Name of exempt organization or other filer, see instru-	ctions.					
PRANK J. GILBRIDE II   Number, street, and room or suite no lf a P O box, see instructions   Social security number (SSN)   IBROOKS IDE DRIVE   City, town or post office, state, and ZIP code For a foreign address, see instructions   GREENWICH, CT 06836   Grown or suite no life of the return that this application is for (file a separate application for each return)   O 4   Application   Return   Application   Return   Application   Grown 990-EZ   O 1   Form 990-T (corporation)   O 7   Gode Form 990-BZ   O 2   Form 1041-A   O 8   Grown 4720 (individual)   O 3   Form 4720 (individual)   O 9   Form 990-T (see 401(a) or 408(a) trust)   O 5   Form 6009   11   Form 990-T (see 401(a) or 408(a) trust)   O 5   Form 6009   11   Form 990-T (see 401(a) or 408(a) trust)   O 5   Form 6009   11   Form 990-T (see 401(a) or 408(a) trust)   O 5   Form 6009   11   Form 990-T (see 401(a) or 408(a) trust)   O 6   Form 8870   12   FRANK J. GILBRIDE II    * The books are in the care of * 31 BROOKSIDE DRIVE - GREENWICH, CT 06836   Telephone No * 203 - 622 - 9360   Fax No *	3 T D 1		rion				
Number, street, and room or suite no if a P O box, see instructions 3 BROOKSIDE DRIVE  City, town or post office, state, and ZIP code For a foreign address, see instructions GREENWICH, CT 06836  Enter the Return code for the return that this application is for (file a separate application for each return)  O	,						
Stephanis   31 BROOKSIDE DRIVE	File by the	ee instruc	tions				
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Form 990 or Form 990-EZ	* *					1	
Form 990-BL 02 Form 1041-A 08 Form 4720 (Individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-F 105 Form 8870 112 FRANK J. GILBRIDE II  • The books are in the care of ▶ 31 BROOKSIDE DRIVE − GREENWICH, CT 06836 Telephone No ▶ 203 −622 −9360 Fax No ▶							
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