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Form 990-PF

OMB No 1545-0052

Department of the Treasury

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

Do not enter social security numbers on this form as it may be made public.

In	temal	Revenue Service Information about Form	n 990-					orm990pf.	
_		lendar year 2014 or tax year beginning			/26 ,2015	and endir			09/30 , 2015
	Name	of foundation COHEN VETERANS NETWO	ORK	INC.			A	Employer Identif	
_	C/0	POINT72 ASSET MANAGEMENT, L.	Ρ.			,		47-395065	
	Numb	er and street (or P O box number if mail is not delivered	to stre	et address)		Room/suite	В	Telephone numb	er (see instructions)
							}	(20	3) 569-0280
	72	CUMMINGS POINT ROAD			_	\			
_	City o	r town, state or province, country, and ZIP or foreign po	stal cod	le					
							C	If exemption application pending, check here	ation is
	STA	MFORD, CT 06902					1	penung, check nen	
_		ck all that apply. X Initial return		Initial return	of a former p	ublic chari	ty	Foreign organiza	tions, shock horo
		Final return	r	Amended re	-		. 10	2 Foreign organiza	
		Address change	<u> </u>	Name change	e		- }	85% test, check	here and attach
H	Che	ck type of organization X Section 501(c)(3)					computation .	
ì		section 4947(a)(1) nonexempt charitable trust		Other taxable pr		tion	E	•	n status was terminated
1					ash X Acc		_	·	
•			-	specify)			,		in a 60-month termination (1)(1)(B), check here
				(d) must be on cas	sh basis)				//-//-//
r		Analysis of Revenue and Expenses (The			50.510 /				(d) Disbursements
4		total of amounts in columns (b), (c), and (d)) Revenue and expenses per	(b) Net inve	I .		djusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions))		books	ıncon	ie j	1	ncome	purposes (cash basis only)
-	4			26,050,000.					(Oddit busis Otty)
	1 2	Contributions, gifts, grants, etc., received (attach schedule). Check (attach schedule) if the foundation is not required to		23,030,000.					
	J	attach Sch B							
	3	Interest on savings and temporary cash investments.			<u> </u>				
-	4	Dividends and interest from securities							
	ł	Gross rents							
اسم	l .	Net rental income or (loss)		-51,010.				 	
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		-21,010.	<u> </u>			· · · · · · · · · · · ·	
Je.	~	Gross sales price for all 3,000,000. assets on line 6a PECEL PD., 1000. Capital gain net income from Part V, line 2.	<u> </u>						
š	7	Capital pain net income (from Part IV, line 2).							
	8	Net short-term capital gain							
	9	Income introdufications 1.9 2016	L						
			<u> </u>						
		Less Cost of goods sold							
	l	Gross profit or loss (lattach schedule)	-						
	11	Other income (attach schedule)	ļ <u>.</u>	25 000 000					
_	12	Total. Add lines 1 through 11		25,998,990.	<u> </u>				202 503
G	13	Compensation of officers, directors, trustees, etc		315,972.					303,501.
ses	14	Other employee salaries and wages		65,091.					65,091.
ē	15	Pension plans, employee benefits		18,286.					18,286.
×	16 a	Legal fees (attach schedule) ATCH 1		12,925.					1,036.
9	ь	Accounting fees (attach schedule)		25 325					0.00=
\$	С	Other professional fees (attach schedule). [2]		35,795.					9,887.
tra	17	Interest							
Sis	18	Taxes (attach schedule) (see instructions)							
Ē	19	Depreciation (attach schedule) and depletion.							
ğ	15 16 a b c 17 18 19 20 21 22 23 24	Occupancy							
ò	21	Travel, conferences, and meetings		11,713.					1,692.
an	22	Printing and publications							
ğμ	23	Other expenses (attach schedule) ATCH .3.		28,732.					11,124.
aţį	24	Total operating and administrative expenses.		}		}			
ĕ	l	Add lines 13 through 23		488,514.	 				410,617.
ŏ	25	Contributions, gifts, grants paid		3,599,972.					1,599,994.
	26	Total expenses and disbursements Add lines 24 and 25		4,088,486.		0		(2,010,611.
	27	Subtract line 26 from line 12:							
		Excess of revenue over expenses and disbursements		21,910,504.		1			
	1	Net investment income (if negative, enter -0-)		· · · · · · · · · · · · · · · · · · ·		0			
		Adjusted net income (if negative, enter -0-).							

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	ort II	Balanca Chasta	Attached schedules and amounts in the	Beginning of year	End o	of year
ند	art II	Parance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing		3,029,401.	3,029,401.
			cash investments			
	3 /	Accounts receivable	9,988.			
		Less allowance for dou	btful accounts ▶		9,988.	9,988.
		Less allowance for dou	btful accounts ▶)		
			officers, directors, trustees, and other			
		disqualified persons (at	tach schedule) (see instructions)	Ì		
			eceivable (attach schedule)			
			btful accounts >			
2			ie			
Assets			eferred charges			
AS			e government obligations (attach schedule)			
			stock (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
			bonds (attach schedule)			
	11	Investments - land, building: and equipment basis Less accumulated deprecia	stron			
	,	(attach schedule)				
	13 14	Investments - other (atta Land, buildings, and	loans		20,598,743.	20,598,743.
		equipment basis Less accumulated deprecia	ation L			
		(attach schedule)	tion			
			>)			
			completed by all filers - see the age 1, item l)		23,638,132.	23,638,132.
-					77,897.	
			ccrued expenses		1,999,978.	
					1,333,370.	
ies						
Ē			ors, trustees, and other disqualified persons			
Liabilities			otes payable (attach schedule)			
	22	Other liabilities (describe	• ▶)			
		F-4-1 11-1-11-11-1 (47 45 22)	0	2 077 075	
_			es 17 through 22)		2,077,875.	
S	Ι.		low SFAS 117, check here . ▶ 24 through 26 and lines 30 and 31.			
S	24					
la Sala	25	Temporarily restricted .				
D E	26		·····			
뎚	24 25 26 27 28 29	Foundations that do	not follow SFAS 117, ▶ 🖾			
5	'		plete lines 27 through 31.			
ts	27		cipal, or current funds			
Se	28		riand, bldg , and equipment fund		01 560 057	
Ä	29	• • •	ulated income, endowment, or other funds		21,560,257.	
Net	30		I balances (see instructions)	0	21,560,257.	
_	ויין		net assets/fund balances (see		00 600 100	
			 	0	23,638,132.	
			nges in Net Assets or Fund Bala			
1			palances at beginning of year - Part l			_
			ed on prior year's return)			0
		r amount from Part I,			2	21,910,504.
3	Othe	r increases not includ	ded in line 2 (itemize) ▶		3_	
4	Add	lines 1, 2, and 3	n line 2 (itemize) ► ATCH 5		4	21,910,504.
5	Decr	eases not included in	n line 2 (itemize) ►ATCH_5		5	350,247.
_6	Tota	I net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (I	o), line 30 6	21,560,257.

Pá	art IV · Capital Gains	and Losses for Tax on Inv	estment Income			
	(a) List an	d describe the kind(s) of property sold (e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
	` 2-story b	orick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr.)
1a	SEE PART IV SCHE	DULE			i	
b						
c						
d						
e						
	(10)	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	ss)
	(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) minu	
a						
b						
c						
d						
e						
	Complete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69	(1)	Gains (Col (h) ga	ain minus
_		(j) Adjusted basis	(k) Excess of col (i)		(k), but not less t	
	(i) F M.V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	l (h))
a				<u> </u>		
b						
C						
d						· · · · · · · · · · · · · · · · · · ·
e						
			gain, also enter in Part I, line 7	 		
2	Capital gain net income	Or (not canital loce)	(loss), enter -0- in Part I, line 7	2		-51,010.
3	Net short-term capital as	ain or (loss) as defined in sections	• •	- -		31,010.
Ū		art I, line 8, column (c) (see inst		{ {		
	-			3		0
D.			duced Tax on Net Investment in		·	
			e section 4940(a) tax on net investi			
(1 0	o optional use by domesti	c private roundations subject to the	e section 4940(a) tax on het investi	ment incor	ne)	
If a	ection 4940(d)(2) applies,	loove the part blank NOT	AVAILABLE FOR INITIAL	VEDD DE	פווסמוכ	
11 5	ection 4540(d)(2) applies,	leave this part blank	AVAILABLE TON INTITUE	1111111 1/1	1101(115)	
۱۸/a	s the foundation liable for	the section 4942 tay on the distrib	outable amount of any year in the b	asa narior	12	Yes No
		not qualify under section 4940(e).		ase period	٠. ــــ] 163 110
1			r; see the instructions before making	a any ent	198	
<u>-</u> '	(a)			ig any enn	(d)	
•	Base period years	(b) Adjusted qualifying distributions	(c) Net value of nonchartable-use assets		Distribution ra	
	llendar year (or tax year beginning in) 2013				(col (b) divided by	COI (C))
						
	2012					
	2011	 	 	ļ		
	2010			 		
	2009	L	L			
_						
2		¹⁾		2		
3		o for the 5-year base period - divid				
	number of years the four	ndation has been in existence if les	s than 5 years	3		
				1		
4	Enter the net value of no	ncharitable-use assets for 2014 fro	om Part X, line 5	4		
			ı			
5	Multiply line 4 by line 3			5		
	•		7.7.1			
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
-						
7	Add lines 5 and 6			7		
•	, as most und U					
8	Enter qualifying distributi	ons from Part XII, line 4		8		
J	If line 8 is equal to or a	reater than line 7 check the box	in Part VI, line 1b, and complete i		using a 1% tax	crate. See the
	Part VI instructions	The state of the s				

Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ctions	s)
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	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	40	Yes	No_
	participate or intervene in any political campaign?	1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1b		Х
	Instructions for the definition)?	-15		
	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	1c		Х
	Did the foundation file Form 1120-POL for this year?			
u	(1) On the foundation \$\\$ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		ļ	
G	foundation managers > \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
-	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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		_X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.]	
	By language in the governing instrument, or			
	• 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	Χ_	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	CT, DE,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		' l	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	_ 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 year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	l		
	complete Part XIV	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		}	
	names and addresses . ATCH. 6	10	_ X_	

Pai	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	1		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	1	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
		12	İ	Х
13	,, , , , , , , , , , , , , , , ,	13	Х	
	Website address WWW.COHENVETERANSNETWORK.ORG			
14	The books are in care of ► ANTHONY HASSAN Telephone no. ► 203-569-	-028	_ _	
	Located at ▶72 CUMMINGS POINT ROAD STAMFORD, CT ZIP+4 ▶ 06902			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. ▶	ĪΤ
	and enter the amount of tax-exempt interest received or accrued during the year		N/I	A
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	T	Yes	No
		16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If			
	Yes," enter the name of the foreign country			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	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? Yes X No		ļ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	Ì	ĺ	
	disqualified person?	1	- 1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No])	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	İ	ļ	
	the benefit or use of a disqualified person)?	ł	1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	ļ	1	
	foundation agreed to make a grant to or to employ the official for a period after	ĺ		
	termination of government service, if terminating within 90 days) Yes X No		[
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		- 1	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X_
	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		l	
	were not corrected before the first day of the tax year beginning in 2014?	1c_		X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	1	İ	
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?			
	If "Yes," list the years	İ	1	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	ŀ	1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		1	
	all years listed, answer "No" and attach statement - see instructions)	2b	N	<u>/A_</u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	İ	[
			- 1	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	- 1	ł	
_	at any time during the year?]		
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		- 1	
	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	24		/ -
	foundation had excess business holdings in 2014)	3b	_ N	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<u>4a</u>		<u>X</u>
D	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	-	_ X_
			-PF	(2014)

(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) Expense account, other allowances
		62, 250		1 720
ATCH 8		63,352.		1,739
Total number of other employees hald over \$50,000.				

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Part VIII	and Contractors (continued)	jers, Hignly Pald Employ	/ees,
3 Five h	ghest-paid independent contractors for professional services (see instruc	tions). If none, enter "NONE	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		ı	
otal numbe	r of others receiving over \$50,000 for professional services	<u> ▶</u>	
Part IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant statistical info and other beneficiaries served, conferences convened, research papers produced, etc	ormation such as the number of	Expenses
1 N/A			
2			
			
3			
<u></u>		 	
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
art IX-B	Summary of Program-Related Investments (see instructions)		
	two largest program-related investments made by the foundation during the tax year on lines 1 and	2	Amount
1 NONE			
,			
2		·	
All other pro	gram-related investments. See instructions		
3 NONE			
atal Add I	nes 1 through 3		
# (111 11		■ 1	

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rarı	see instructions.)	gn iounua	MONS,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	316,686.
C	Fair market value of all other assets (see instructions).	1c	5,127,863.
d	Total (add lines 1a, b, and c)	1d	5,444,549.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)]	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	5,444,549.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	81,668.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,362,881.
_6	Minimum investment return. Enter 5% of line 5	6	182,191.
Pari	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	182,191.
2 a	Tax on investment income for 2014 from Part VI, line 5 2a		
b			
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	182,191.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	182,191.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	182,191.
		<u></u>	
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	2,010,611.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,010,611.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,010,611.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c		
	qualifies for the section 4940(e) reduction of tax in those years		

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Pa	rt XIII Undistributed Income (see Instru	ictions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	line 7				182,191.
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only				
	Total for pnor years 20 12 ,20 11 ,20 10				
3	Excess distributions carryover, if any, to 2014				}
а	From 2009	,			Ļ
ь	From 2010				
С	From 2011				
d	From 2012				Í
е	From 2013				
f	Total of lines 3a through e				
4	Qualifying distributions for 2014 from Part XII,				
	line 4. ▶ \$ 2,010,611.				
a	Applied to 2013, but not more than line 2a				
ь	Applied to undistributed income of prior years	\frac{1}{2}			
	(Election required - see instructions)				
c	Treated as distributions out of corpus (Election	İ			
	required - see instructions)				
d	Applied to 2014 distributable amount				182,191.
е	Remaining amount distributed out of corpus	1,828,420.			
5	Excess distributions carryover applied to 2014				ļ
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,828,420.		 	
þ	Prior years' undistributed income. Subtract				
_	line 4b from line 2b Enter the amount of prior years' undistributed				
C	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable	ļ			
	amount - see instructions Undistributed income for 2013. Subtract line				
·	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2014. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2015	}			1
-	Amounts treated as distributions out of corpus		<u></u>		
7	to satisfy requirements imposed by section	ļ		i	
	170(b)(1)(F) or 4942(g)(3) (Election may be			:	
	required - see instructions)				
8	Excess distributions carryover from 2009 not			<u> </u>	
•	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.			<u> </u>	
•	Subtract lines 7 and 8 from line 6a	1,828,420.			
10	Analysis of line 9				
	Excess from 2010	ļ			
	Excess from 2011				
	Excess from 2012				
	Excess from 2013	Ì			
	Excess from 2014 1,828,420.				<u> </u>

Form 990-PF (2014)

Pa	rt XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABLE
1 a	If the foundation has				ating	
	foundation, and the rulin				▶Ĺ	
þ	Check box to indicate		is a private operating		section 4942	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		· (e) Total
	justed net income from Part I or the minimum investment	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
	return from Part X for each	·			ļ	
	year listed	ļ	<u> </u>			
b	85% of line 2a		 	<u> </u>	 	
С	Qualifying distributions from Part					
ч	XII, line 4 for each year listed . Amounts included in line 2c not	<u> </u>				·
u	used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
•	2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon		}	}		
а	"Assets" alternative test - enter			}		
	(1) Value of all assets (2) Value of assets qualifying	<u> </u>			 	
	under section	}		}	}	
h	4942(j)(3)(B)(i)		 			
U	"Endowment" alternative test- enter 2/3 of minimum invest-	}			,	
	ment return shown in Part X,	}			}	
	line 6 for each year listed				 	
·	"Support" alternative test - enter (1) Total support other than					
	gross investment income				1	
	(interest, dividends, rents, payments on secunties					
	loans (section 512(a)(5)), or royalties)	1			1	
	(2) Support from general					
	public and 5 or more exempt organizations as		•			
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					<u></u>
	(4) Gross investment income.	<u> </u>	<u> </u>	<u></u>		L
Pa				t only if the found	lation had \$5,000	or more in assets
		during the year -s				
1	Information Regardin List any managers of	-		a than 20/ of the tota	al contributions reco	und by the foundation
a	before the close of any	tax year (but only if th	ney have contributed in	nore than \$5,000). (S	ee section 507(d)(2))	ved by the roundation
	4-		•	, ,		
b	N/A List any managers of	the foundation who	own 10% or more of	f the stock of a corp	oration (or an equal)	v large portion of the
	ownership of a partner					, , ,
	N/A					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:		
	Check here ► X If t	the foundation only i	makes contributions	to preselected char	itable organizations	and does not accept
				ants, etc (see instruc	tions) to individuals o	or organizations under
	other conditions, comp			<u> </u>	alastiana abauld ba ad	ldraaa d
	The name, address, a	·		•		aressea
b	The form in which app	lications should be sub	omitted and information	on and materials they	should include.	
	N/A					
С	Any submission deadle	ines.				
	N/A					
d	N/A Any restrictions or li factors	mitations on awards,	such as by geogra	phical areas, charita	ble fields, kinds of	institutions, or other

Form 990-PF (2014)	7-7-1			Page 11
Part XV · Supplementary Information	ring the Year or Appl	oved for E	Euturo Paymont	
3 Grants and Contributions Paid Du Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Burness of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	0,002000,000			
A E C U		1		
ATCH 9				
			}	
	ĺ	1	}	
	ł			
		į.		
			}	
			,	
	_	<u> </u>		
Total	 			1,599,994.
b Approved for future payment	 	ł	}	
ATCH 10				
		}		
		ļ		
		1		
		}		
		}		
]		
Total			▶ 3b	1,999,978.
JSA				Form 990-PF (2014)

JSA 4E1491 1 000

er gross amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions)
a					(See Instructions
b		-			
с					
d					
e			ļ <u>.</u>		
f			<u> </u>		
g Fees and contracts from government agencies			 		
Membership dues and assessments			 		
Interest on savings and temporary cash investments Dividends and interest from securities		<u> </u>	 -		
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property		<u> </u>	 		
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	-51,010.	
Net income or (loss) from special events [
Gross profit or (loss) from sales of inventory					
Other revenue· a					
·			<u> </u>		
:		·			
·					
·			ļ		
Subtotal. Add columns (b), (d), and (e)			j		
Fotal. Add line 12, columns (b), (d), and (e)	ulations)			13	-51,0
Total. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular t XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities e No. Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular t XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities Relationship of Activities Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to

Part	XVII	Exempt Organ		nsfers to and tr	ansactı	ons and	i Relation	snips with Non	cnarı	table	,
1 [Did the	e organization direct		engage in any of the	following	with an	other orga	nization described		Yes	No
		ion 501(c) of the Co									
		zations?	(***********************************				,				
	-	ers from the reportin	g foundation to	a noncharitable exer	not organ	ization of.					ı
		sh	-						1a(1)		Х
		ner assets							1a(2)		Х
		transactions.									
((1) Sal	les of assets to a no	ncharitable exen	npt organization					16(1)	' <u> </u>	X
		rchases of assets fro									X
		ntal of facilities, equi									X
		ımbursement arrang									X
		ans or loan guarantee									X
		rformance of service									X
		g of facilities, equipn									X
		answer to any of th								fair m	arket
١	value d	of the goods, other	assets, or servic	es given by the rep	orting for	undation.	If the found	lation received less	than '	faır m	arket
_ \	/alue ı	n any transaction or	sharing arrang	ement, show in colu	ımn (d) th	ne value d	of the goods	s, other assets, or s	ervice	s rece	₃ived
(a) Lin	e no	(b) Amount involved	(c) Name of no	oncharitable exempt organi	zation	(d) Desc	ription of trans	fers, transactions, and shai	ring arra	ngeme	nts
		N/A				N/A					
					_						
		foundation directly	_								
		ped in section 501(c)		ner than section 501	(c)(3)) or	ın section	527?	<i></i> L	Ye	s X	No
<u>b</u>	f "Yes	<u>," complete the follo</u>									
		(a) Name of organization	<u>n</u>	(b) Type of org	anızatıon			(c) Description of relations	hip		
		·									
_											
		_ 									
	7										
		penalties of penury, I declar t, and complete Deglaration of						to the best of my knowledg	e and b	eliet, it	is true,
Sign		/ 1///	~ 	-1 5/3/16		\ \	1.	May the IRS	discus	s this	retum
lere		1 XXX a				Direc	*(/	with the pre		1	<u>bel</u> ow
	Sign	nature of officer or trustee		Date *		Title		(see instruction:	s)? <u>X</u>	Yes	No
		- I p		T8			15		TIA!		
Paid		Print/Type preparer's na	me	Preparer's signature	الم ما	7	Date 4/25/	11 C Clieck [] "	TIN		_
	0 F C F	VARUN VIG			A .		1 4/25/		2008		<u>R</u>
rep			NST & YOUNG					Firm's EIN ► 34-65	6559	96	
Jse (Only		TIMES SQUAR			_					
		NE	W YORK, NY	·		100	36	Phone no 212-77			
								For	m 990)-PF (2014)

Schedule B

(Form 990, 990-EZ, or 990-PF) **Schedule of Contributors**

200 EZ az Ez-m 200 PZ

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

COHEN VETERANS NETWORK INC.

➤ 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.

2014

Employer identification number

C/O POINT72 ASSET M	ANAGEMENT, L.P.	47-3950655
Organization type (check on	е).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private fou	ndation
	501(c)(3) taxable private foundation	
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, conf or property) from any one contributor. Complete Parts I and II See instr contributions	-
Special Rules		
regulations under : 13, 16a, or 16b, a	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 and that received from any one contributor, during the year, total contributor fithe amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 2	990 or 990-EZ), Part II, line ions of the greater of (1)
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the the year, total contributions of more than \$1,000 <i>exclusively</i> for religious onal purposes, or the prevention of cruelty to children or animals. Comple	, charitable, scientific,
contributor, during contributions totale during the year for General Rule appli	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the the year, contributions exclusively for religious, charitable, etc., purposes and more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose Do not complete any or est to this organization because it received nonexclusively religious, charitamore during the year	s, but no such nons that were received f the parts unless the able, etc, contributions
Caution. An organization tha	t is not covered by the General Rule and/or the Special Rules does not files answer "No" on Part IV, line 2, of its Form 990, or check the box on li	e Schedule B (Form 990,

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).

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) (2014)

Name of organization COHEN VETERANS NETWORK INC.

C/O POINT72 ASSET MANAGEMENT, L.P.

Employer identification number
47-3950655

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 -	STEVEN & ALEXANDRA COHEN FOUNDATION, INC. P.O. BOX 142 GREENWICH, CT 06836	\$26,050,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
~ - - -		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
~		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
- -		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
- - - -		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

Name of organization COHEN VETERANS NETWORK INC. C/O POINT72 ASSET MANAGEMENT, L.P. Employer identification number 47-3950655

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is nee	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of or	rganization COHEN VETERANS NETWORK	INC.		Employer identification number					
	· C/O POINT72 ASSET MANA			47-3950655					
Part III	Exclusively religious, charitable, etc.								
·	that total more than \$1,000 for the y								
	following line entry For organizations contributions of \$1,000 or less for th								
	Use duplicate copies of Part III if addit								
(a) No. from									
Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
	<u> </u>	(e) Transf	or of gift						
		(e) ITalisi	er or gat						
	Transferee's name, address, ar	nd ZIP + 4	Relations	hip of transferor to transferee					
		<u>-</u>							
									
(a) No									
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
Faiti		<u> </u>							
	(e) Transfer of gift								
	Transferee's name, address, ar	nd 7IP + 4	Relationship of transferor to transferee						
	Transferee s frame, address, ar	Id Zii · · · ·	Relations	inp of transferor to transferor					
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
Part I									
-									
	(e) Transfer of gift								
	Transferee's name, address, ar	nd ZIP + 4	Relations	hip of transferor to transferee					
			_ 						
(a) No. from	(b) Purpose of gift	(c) Use	of cuft	(d) Description of how gift is held					
Part I	(b) Ful pose of gift	(0) 035	or gire	(d) Description of now gire is not					
	\	~							
		(e) Transf	er of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relations	hip of transferor to transferee					
		·							

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

. Kind of Property		Description				or	Date acquired	Date sold	
Gross sale price less xpenses of sale	Depreciation allowed/ allowable	Cost or other	FMV as of	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	 -	
Prenises of Sale	aliowable	POINT72 CAP		TD	<u>i auj udsis</u>	P	08/01/2015	09/30/201	
,000,000.		PROPERTY TY: 3,051,010.	PE: SECURIT	155			-51,010.		
TAL GAIN(L	oss)		· • • • • • • • • • • • • • • • • • • •				-51,010.		
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i									
							,		
) 			
		ļ							
		5							

CHARITABLE PURPOSES	1,036.	1,036.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	12,925.	12,925.
		TOTALS
DESCRIPTION	LEGAL FEES	

FORM 990PF, PART I - LEGAL FEES

VENUE	77.7
RE	

PER BOOKS EXPENSES

PUBLIC RELATIONS CONSULTING FEES HR SERVICES

DESCRIPTION

9,461. 426.

CHARITABLE PURPOSES

ATTACHMENT 2

9,887.

AND

25,908. 9,461. 426.

35,795.

TOTALS

EXPENSES PER BOOKS AND

17,090. 8,000. 1,321. 850. 727. 460.

TECHNOLOGY EQUIPMENT INSURANCE LICENSES AND FEES OFFICE SUPPLIES BANK CHARGES TECHNOLOGY SUPPLIES

DESCRIPTION WEB DOMAIN

28,732.

11,124.

CHARITABLE PURPOSES

ATTACHMENT

8,000. 1,321. 332. 727. 460. 284.

TOTALS

INVESTMENTS	
· OTHER	i
-1	
II	
PART	
990PF,	
FORM	

ENDING <u>EMV</u>	20,598,743.	20,598,743.
ENDING BOOK VALUE	20,598,743.	20,598,743.
		TOTALS
DESCRIPTION	POINT72 CAPITAL INTL LTD	

ATTACHMENT	5		

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

<u>DESCRIPTION</u> <u>AMOUNT</u>

UNREALIZED LOSS 350,247.

TOTAL 350,247.

NAME AND ADDRESS

STEVEN & ALEXANDRA COHEN FOUNDATION, INC. P.O. BOX 142 GREENWICH, CT 06836

ES	
D TRUSTE	
, ANI	
, DIRECTORS,	
OFFICERS,	
OF	
- LIST	
IIIA	
PART	
990PF,	
FORM	

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	•
STEVEN A. COHEN 72 CUMMINGS POINT ROAD STAMFORD, CT 06902	DIRECTOR & CEO 3.00	0	0	0	
DOUGLAS D. HAYNES 72 CUMMINGS POINT ROAD STAMFORD, CT 06902	PRESIDENT 3.00	0	0	0	
MICHAEL SULLIVAN 72 CUMMINGS POINT ROAD STAMFORD, CT 06902	VICE PRESIDENT & SECRETARY 3.00	0	0	0	
GARY GOLDRING 72 CUMMINGS POINT ROAD STAMFORD, CT 06902	DIRECTOR 1.00	0	0	0	
ADMIRAL MICHAEL MULLEN 72 CUMMINGS POINT ROAD STAMFORD, CT 06902	DIRECTOR 1.00	0	0	0	
ERIC WEINGARTNER 72 CUMMINGS POINT ROAD STAMFORD, CT 06902	DIRECTOR 1.00	0	0	0	

313,022.	DIRECTOR/EALOGE 50.00 GRAND TOTALS	ANTHONY HASSAN 72 CUMMINGS POINT ROAD STAMFORD, CT 06902
313,022.	FEVECUITVE DIRECTOR	NAME AND ADDRESS
0	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	FORM 990PE, PAKI V.
CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE ALLOWANCES	DART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	PART VIII - LIST O
ATTACHMENT 7 (CONT'D).		

TIONS EXPENSE ACCT OYEE AND OTHER PLANS ALLOWANCES	0 1,739.	0 1,739.				
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS						
COMPENSATION	63,352.	63,352.				
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR 50.00	TOTAL COMPENSATION				
NAME AND ADDRESS	ALICE KIM 72 CUMMINGS POINT RD STAMFORD, CT 06902					

990PF, PART VIII - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NYU LANGONE MEDICAL CENTER	NONE	MILITARY FAMILY CLINIC	999,994.
333 E. 38TH ST	PC		
NEW YORK, NY 10016			
ORION BIONETWORKS	NONE	RESEARCH FOR VETERANS MENTAL HEALTH	.000,009
510 MADISON AVENUE	PC		
NEW YORK, NY 10022			

	1,599,994	
	TOTAL CONTRIBUTIONS PAID	

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

NYU LANGONE MEDICAL CENTER

NEW YORK, NY 10016 333 Е. З8ТН ST

NONE

•	AMOUNT	1,999,978.	1,999,978.
	PURPOSE OF GRANT OR CONTRIBUTION	MILITARY FAMILY CLINIC	TOTAL CONTRIBUTIONS APPROVED

ATTACHMENT 10