SCANNED JUL 1 8 2013

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Tread as a Private Foundation undation may be able to use a copy of this return to satisfy state reporting re-

OMB No 1545-0052

		· · · · · · · · · · · · · · · · · · ·	be able to use a copy of this			Open to public Inspection
Ford	alen	dar year 2012 or tax year beginning DEC	28, 2012	, and ending	DEC 31, 2012	
Nar	ne of	foundation			A Employer identification	number
T	ΗE	BODNER CHILDREN FAMILY	FOUNDATION		46-1568593	
Nun	nber a	nd street (or PO box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
1	52	WEST 57TH 54TH FL			212-581-05	00
City	or to	own, state, and ZIP code			C If exemption application is pe	ending, check here
-		YORK, NY 10019				
		all that apply: X Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	check here
•		Final return	Amended return		_ ,	, , , , , , , , , , , , , , , , , , , ,
		Address change	Name change		2 Foreign organizations me check here and attach co	eting the 85% test,
н (hack	type of organization. X Section 501(c)(3) ex			1	
	_		Other taxable private found	ation	E If private foundation state under section 507(b)(1)	. 1 1
L Ea		arket value of all assets at end of year J Account		Accrual	7	
		· —	ther (specify)	Accidai	F If the foundation is in a 6 under section 507(b)(1)	
	<i>0111 1</i> ∙\$	Part II, col (c), line 16) 0 1000002. (Part I, colu	iner (specify)	hasis)	under Section 307(b)(1)	(D), Check liefe
_	îrt:Î.				(-) Admoted ast	(d) Disbursements
FC	H,CŞI,	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
				- x <u>442</u> (4)		(cash basis only)
	1	Contributions, gifts, grants, etc., received	1000000.	~	N/A	
	2	Check If the foundation is not required to attach Sch. B. Interest on savings and temporary	<u> </u>	``	2 17 5 x 200 200 200 200 200 200 200 200 200 2	200 000 000 0 A 100 0 . B
	3	cash investments	2.	2.		STATEMENT 1
	4	Dividends and interest from securities				**
	5a	Gross rents	**************************************	89		MACHINE CONT.
	b	Net rental income or (loss)		The state of the s		
ō	6a	Net gain or (loss) from sale of assets not on line 10		*** * *** *	43 7 7 3	
ž	b	Gross sales price for all assets on line 6a			1.25.00	
Revenue	7	Capital gain net income (from Part IV, line 2)	žeis is a saudentinia saudentinia saudentinia saudentinia saudentinia saudentinia saudentinia saudentinia saud	0.	1	
Œ	8	Net short-term capital gain		A service Serv		· · · · · · · · · · · · · · · · · · ·
	9	Income modifications	MOTERAL TO LANGE		si	
	10a	Gross sales less returns and allowances				m / 3.
	b	Less Cost of goods sold				in a superior
	С	Gross profit or (loss)				100 mg/s -
	11	Other income				Delegan .
	12	Total Add lines 1 through 11	1000002.	2.	,	Maria Comment
	13	Compensation of officers, directors, trustees, etc	0.	0.	,	0.
	14	Other employee salaries and wages				
	15	Pension plans employee-hemetits				
es	16a	Ilegal feet ECFIVED				
ens	ь	Accounting-fees S				
- X		101				
/e E	17	Interest JUL 122 2013				
ati	18	Taxes				
Operating and Admınistrative Expenses	19	Depreciation and depietors, UT				*****
Ē	20	Осочрапсу				*
۸dn	21	Travel, conferences, and meetings		 		
þί	22	Printing and publications				
g ar	23	Other expenses			-	
ţį		Total operating and administrative				
era	24		0.	0.		0
ď	0.5	expenses Add lines 13 through 23	0.			0.
	l	Contributions, gifts, grants paid	<u> </u>		N6 . 1 4 2 2 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	26	Total expenses and disbursements	0.			
		Add lines 24 and 25	1 . PAT \$. Day 1 . P .	0.		0.
	27	Subtract line 26 from line 12;	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* ****	1 ***	Samuel and the second
		Excess of revenue over expenses and disbursements	1000002.		* 4	00 40 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	ļ	Net investment income (if negative, enter -0-)		2.		
2235		Adjusted net income (if negative, enter -0-)	• •	<u> </u>	N/A	45.00
12-0	5-12	LHA For Paperwork Reduction Act Notice, see	instructions		~	Form 990-PF (2012)

		00-PF (2012) THE BODNER CHILDREN FA	MILY FOUNDATIO Beginning of year		-1568593 Page 2 of year
P	art	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	(/	750000.	
	ı	Savings and temporary cash investments		250002.	
	1	Accounts receivable			250002.
	,	Less; allowance for doubtful accounts		' - ', '' @ x x > y	
	1	Pledges receivable		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	7	Less allowance for doubtful accounts	* "\" *	2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	١,	Grants receivable			
	5	Receivables due from officers, directors, trustees, and other			
	6				
	_	disqualified persons	S A		
	7	Other notes and loans receivable	• *	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
		Less' allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
ISS	9	Prepaid expenses and deferred charges			
_	!	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds	24.200		1.65-000000000000000000000000000000000000
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ▶			Facility of the second
		Less accumulated depreciation			
	15	Other assets (describe ►)		
	1				
	16	Total assets (to be completed by all filers)	0.	1000002.	1000002.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abil	21	Mortgages and other notes payable			
ت	ſ	Other liabilities (describe)		
			, <u> </u>		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			A Section 12 To the section of the s
		and complete lines 24 through 26 and lines 30 and 31			A STATE OF THE STA
ės	24	Unrestricted			GARCÍ GI
anc	25	Temporarily restricted			
3ag	1	Permanently restricted			
Net Assets or Fund Balances	-	Foundations that do not follow SFAS 117, check here			Alexander of the state of the s
ΨĒ		and complete lines 27 through 31.			
ŏ	27	Capital stock, trust principal, or current funds	0.	0.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.	1000002.	
et/	1		0.	1000002.	
Ž	30	Total net assets or fund balances		1000002.	,
	0.4	Total liabilities and not constalling the land	0.	1000002	, , , ,
_	31	Total liabilities and net assets/fund balances		1000002.	
P	art	Analysis of Changes in Net Assets or Fund	Balances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), Iir	na 20		
'			16 20	4	0
	•	st agree with end-of-year figure reported on prior year's return)		1	1000003
		r amount from Part I, line 27a		2	1000002.
		r increases not included in line 2 (itemize)			100000
		lines 1, 2, and 3		4	1000002.
		eases not included in line 2 (itemize)		5	1,000,000
<u>6</u>	1 ota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30	6	1000002.
					Form 990-PF (2012)

12-05-12

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8

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.

See the Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

orm 99 Part	O-PF (2012) THE BODNER CHILDREN FAMILY FOU	NDATION D(a), 4940(b), 4940(e), or	46-156 4948 - see			age 4
1a Exe	empt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and er	nter "N/A" on line 1			#- *	* / -
	te of ruling or determination letter (attach copy of letter if nec		1	- 4	ÿ*,	
b Do	mestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒	and enter 1%	1			<u>0.</u>
of l	Part I, line 27b			, 5 / '	, * ,	;*.
	other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			1	. ,	
2 Tax	cunder section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers enter -0-)	2			0.
-	d lines 1 and 2		3	 		0.
	btitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Of	thers enter -0-)	4		-	0.
	x based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5	*72	(y sa jili)(0)	0.
	edits/Payments:	1 . 1) "RAN Awrit
	12 estimated tax payments and 2011 overpayment credited to 2012	6a				
	empt foreign organizations - tax withheld at source	6b				
	c paid with application for extension of time to file (Form 8868)	6c				i vi
	ckup withholding erroneously withheld	6d			Gilly 40	^
	tal credits and payments. Add lines 6a through 6d	Lad	7			0.
	ter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	cnea	8			0.
	x due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			
	erpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	Defunded	10	<u></u>		
	ter the amount of line 10 to be: Credited to 2013 estimated tax VII A. Statements Regarding Activities	Refunded ▶			-	
w , , , , , , , , , , , , , , , , , , ,	ring the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate or interve	ne in	, ××, * \	Yes	No
	y political campaign?	ation of the it participate of interve	110 111	1a		X
•	i it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions for definition)	7	1b		X
	he answer is "Yes" to 1a or 1b, attach a detailed description of the activities and			5.00 × 5.		Janes I
	stributed by the foundation in connection with the activities	a copies of any materials public		THE STATE OF	" "	3.
	I the foundation file Form 1120-POL for this year?			1c	- ``	X
	ter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear.		*****		
	On the foundation. > \$ O . (2) On foundation managers.		•			
	ter the reimbursement (if any) paid by the foundation during the year for political expendi					., why
	nagers.▶\$ 0.	•		1. 15 15 15 15 15 15 15 15 15 15 15 15 15		
	s the foundation engaged in any activities that have not previously been reported to the IF	35?		2		X
	Yes," attach a detailed description of the activities			File Sy		
	s the foundation made any changes, not previously reported to the IRS, in its governing is	nstrument, articles of incorporation	i, or		```.`*/	
	aws, or other similar instruments? If "Yes," attach a conformed copy of the change			3		X
4a Dio	the foundation have unrelated business gross income of \$1,000 or more during the year	r?		4a		X
b If "	Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Wa	as there a liquidation, termination, dissolution, or substantial contraction during the year?			5		_X_
If 1	Yes," attach the statement required by General Instruction T			4	1	1782 1 3
6 Are	e the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ther:				X
• [By language in the governing instrument, or					
● [By state legislation that effectively amends the governing instrument so that no mandatory	y directions that conflict with the st	ate law	3 2 2 6		75.
1	remain in the governing instrument?			6	X	
7 Did	the foundation have at least \$5,000 in assets at any time during the year?			7	Х	
	Yes," complete Part II, col (c), and Part XV			1.	دري ا	
8a En	ter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨		2.4		
	<u> </u>				,	. `
	he answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Al	ttorney General (or designate)		*		
	each state as required by General Instruction G? If "No," attach explanation			8b	X	
	the foundation claiming status as a private operating foundation within the meaning of sec		alendar		,	
	ar 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," c		~~··	9		<u>X</u> _
10 Did	d any persons become substantial contributors during the tax year? If "Yes," attach a schedu	le listing their names and addresses	STMT 2	10	X	

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Total number of other employees paid over \$50,000

Form 990-PF (2012) THE BODNER CHILDREN FAMILY FOUND		1568593 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
	_	
	1	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	cal information such as the	Expenses
1 THE FOUNDATION MAKES GRANTS FOR CHARITABLE P		
PRIMARILY TO 501(C)3 PUBLIC CHARITIES.		
		0.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1 N/A		
2		
All other pregram related investments. Can instructions		
All other program-related investments. See instructions 3		

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign fo	undations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.	3	····
а		1a	0.
b	Average of monthly cash balances	1b	1000000.
C	Fair market value of all other assets	1c	
-	Total (add lines 1a, b, and c)	1d	1000000.
	Reduction claimed for blockage or other factors reported on lines 1a and		
Ī	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1000000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	15000.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	985000.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	540.
P	art:XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here and do not complete this part.)	and certain	
1	Minimum investment return from Part X, line 6	1	540 <u>.</u>
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	<u> </u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	540.
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	540 <u>.</u>
6	Deduction from distributable amount (see instructions)	_6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	540.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0.
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:	E2	
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	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	<u> </u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	a qualifies for th	e section

4940(e) reduction of tax in those years

Page 9

		(a)	_			b)	4		(c)			(d) 2012	
4. Distributable assessment for 0040 from David VI		Corpu	<u>s</u>	<u> </u>	rears pri	or to 201	1	*	2011			2012	
1 Distributable amount for 2012 from Part XI,	İ	*			΄,				3.0	,			540.
line 7	r3;			77		· 468				. ``.	423	x 70.6m.a	340.
2 Undistributed income, if any, as of the end of 2012	*				~	46		****	-41	0.	* *		
a Enter amount for 2011 only	777,5									<u>U •</u>	***	7 N.	
b Total for prior years:	1 1 1	* 64					^	á e "			ي نفي د	·",`@:	~^
	<u>,</u>						0.		Y		*		
3 Excess distributions carryover, if any, to 2013	Z .**.				· ·		ž	33.	· 4387.	· mil	- + %	200	áss.
a From 2007	_				7	***		***	· #	1,480	* , '		
b From 2008				i					,,,,,	B,		126	, ~ ¿*
c From 2009	- · ·	******	*					*		~~ ~ ;	* #\$\disp\		
d From 2010	- '									*	43		~ ~~~
e From 2011	£		_	* "	marker.	**						Ì.	
f Total of lines 3a through e			0.		***			3		–			
4 Qualifying distributions for 2012 from					,	A .		٠.	2%	~ 4			
Part XII, line 4 [.] ► \$C	<u>) .</u>	~ . *				·* 141	?	**	Berten	* #v	*8841	,	
a Applied to 2011, but not more than line 2a										0.	<u> </u>		
b Applied to undistributed income of prior	, .	*** \						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				14	~25 ~33k ·
years (Election required - see instructions)							<u>0.</u>	,				· · ·	
c Treated as distributions out of corpus				16/)\$!	10°E		Ones	. 465	4 83			
(Election required - see instructions)			0.	4 E .	* %) (Tay	40	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, , , , , , , , , , , , , , , , , , ,	" ¥ (i	4.44	*<	
d Applied to 2012 distributable amount	4					- 1 - 1	A.	y • 5''		*			0.
e Remaining amount distributed out of corpus			0.		>	٠.,	: '	i - 25] 49.8° a	ر. ال	SEE	Ž.,	
5 Excess distributions carryover applied to 2012			0.				. 33	**	41.0	20,50			0.
(If an amount appears in column (d), the same amoun must be shown in column (a))	t /4		., 5 3000.	£.							· 1/3	*	
6 Enter the net total of each column as	**************************************				- 1936.					Ş	18.35	,4j.%;	" a black
indicated below:	¥ i	*	` ii`	2.									
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		<i>></i>	0.				:::://	å. "\$.	-A	,å			
b Prior years' undistributed income. Subtract	,	***	50.4 × ×	177	,	, ,		,	,				
line 4b from line 2b	. Milesir v		was profiled as				0.	* .		Ł			25.
c Enter the amount of prior years'	14 (27.2 s	> ; **	**************************************				•				,	******	>2000C
undistributed income for which a notice of			**					3					
deficiency has been issued, or on which		*	4 1					MO LA					
the section 4942(a) tax has been previously assessed			*				0.	12.		\ £,	ļ;		
d Subtract line 6c from line 6b Taxable			«×				<u> </u>	# X	18. 2.	23.		ν.	
	, ;		***				0.	*, -**	137 77 77		, W.	· 7	
amount - see instructions	42						0.	,				- 4	
e Undistributed income for 2011. Subtract line	1,5,	₩., *	***							0	· ·		. ~ ~
4a from line 2a. Taxable amount - see instr.		345						 		0.	·		<u>\$</u>
f Undistributed income for 2012. Subtract	**************************************	, ,											
lines 4d and 5 from line 1. This amount must	2005 1. J.	~ · · · · · · ·	o filippinata	1		× 1,**		3,	, ° 'm	* *.			T 40
be distributed in 2013												*	540.
7 Amounts treated as distributions out of				3					*				
corpus to satisfy requirements imposed by			•	<u> </u>									
section 170(b)(1)(F) or 4942(g)(3)			0.	#84	- w,	7 8000	44.55						
8 Excess distributions carryover from 2007			_	2. 2.8	. <u>1-2-</u>	a vijek		,				÷	94
not applied on line 5 or line 7			0.	- ``	,, ,,	15.05.4	,						
9 Excess distributions carryover to 2013.				25. ° °	*,	· 1867	Ì				·	7 4	
Subtract lines 7 and 8 from line 6a	<u> </u>		0.			,	***	. ***		8. 4.		3	187
10 Analysis of line 9:	Street .	yr Y	٧,	*		>	.A)	>++ \$	**	ئي؟ معرين	7 %	·*** 23 .	<i>*</i>
a Excess from 2008		. 4	*	1	, <~*		~% <u>\$</u>	""*	***		1	٦٠.	,
b Excess from 2009	- 22	٠								,	_	. 3	.3.00
c Excess from 2010			,	*		4	, 52	^	· ***	*	· 54	W.	

223581 12-05-12 Form **990-PF** (2012)

d Excess from 2011 e Excess from 2012

10

Part XV. Supplementary Information	(continued)		-								
	3 Grants and Contributions Paid During the Year or Approved for Future Payment										
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount							
Name and address (home or business)	or substantial contributor	recipient	Contribution								
a Paid during the year											
NONE											
		ı									
Total											
Total b Approved for future payment			▶ 3a	0							
2 Approved to ratare payment											
NONE											
Total			26								

Part XVI-A Analysis of Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	1			d by section 512, 513, or 514	(e)
	(a)	(b)	(C)	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
-					
	1 1	 			
d	1		++		
Ο					
e			 		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	2.	
4 Dividends and interest from securities			1		
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					
9 Net income or (loss) from special events				, , ,	,
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
C					
d	F 1				
e					
2 Subtotal. Add columns (b), (d), and (e)	+	0	. AZV	2.	0.
3 Total Add line 12, columns (b), (d), and (e)				13	2.
See worksheet in line 13 instructions to verify calculations.)					

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

Une No ▼	the foundation's exempt purposes (other than by providing funds for such purposes).						

2) THE BODNER CHILDREN FAMILY FOUNDATION 46-1568593 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1 Did the	**	Yes	No					
the Cod	,	,4 G-18						
a Transfei	rs from the reporting founda	ation to a noncharital	ble exempt orç	janization of,		ĺ		
(1) Cas	sh					1a(1)		_X_
(2) Oth	1a(2)		<u>X</u>					
b Other tra	, ; ;	1.4	.93					
(1) Sal	1b(1)		_X_					
(2) Pur	1b(2)		X					
(3) Rer	ntal of facilities, equipment,		1b(3)		_X_			
(4) Rei	mbursement arrangements					1b(4)		_X_
(5) Loa	ans or loan guarantees					1b(5)		_X_
(6) Per	formance of services or me	mbership or fundrai	sing solicitatio	ns		1b(6)		_X_
c Sharing	of facilities, equipment, ma	ılıng lısts, other asse	ts, or paid emi	ployees		1c		_X_
d If the an	nswer to any of the above is	"Yes," complete the t	following sche	dule. Column (b) should alv	vays show the fair market value of the g	joods, other ass	ets,	
or servi	ces given by the reporting fo	oundation. If the four	ndation receive	ed less than fair market valu	e in any transaction or sharing arrange	ment, show in		
column	(d) the value of the goods,							
(a) Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Description of transfers, transaction	ns, and sharing ar	rangeme	nts
			N/A					
								
							_	
								
								
			-	<u> </u>				
						_		
			_					
							-	
				·	-			
-								
2a le the fe	aundation directly or indirect	the affiliated with or i	rolated to one	or more tax-exempt organiz	zations described			
	on 501(c) of the Code (other	•	•	, •	zations described	Yes	v	No
	complete the following sch		(3)) OI III SECI	1011 327 5		163	LA.	טוו ע
U II IES,	(a) Name of org			(b) Type of organization	(c) Description of re	lationship		
	N/A	janization		(b) Typo of organization	(0) 2000 (piloti 07)			
	N/A							
				-				
Und	der penalties of perjury, I declare	that I have examined this	s return, includin	g accompanying schedules and	statements, and to the best of my knowledge	No. 15 2 10 C		
Sign and	belief, it is true, correct, and cor	mplete Declaration of pro-	eparer (other thar	n taxpayer) is based on all inform	ation of which preparer has any knowledge	May the IRS	JISCUSS I	IIIS
Here	an a	h						
Si	gnature of officer or trustee			Date				
	Print/Type preparer's na	ame	Preparer's si	gnature				
	STEPHEN M.	WAGNER,	1 12	11/0				
Paid	CPA	-	1					
Prepare		NER FERBE	R FINE	AC				
Use Only								
	Firm's address ▶ 66	SOUTH TY	SON AV	ENUE				
		ORAL PARK						

223622 12-05-12

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2012

THE BODNER CHILDREN FAMILY FOUNDATION 46-1568593 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II

Special Rules

of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2%

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

THE BODNER CHILDREN FAMILY FOUNDATION

46-1568593

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	MOSHE BODNER 8 CHELSEA LANE CHESTNUT RIDGE, NY 10977	l i	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2	AARON BODNER 107 FOREST AVE LAKEWOOD, NJ 08701	1	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3	ELIEZER BODNER 65 OLD NYACK TURNPIKE MONSEY, NY 10952	l l	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4	TZIPPORAH ROTTENBERG 930 MADISON AVE LAKEWOOD, NJ 08701		Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)	

Name of organization

Employer identification number

THE BODNER CHILDREN FAMILY FOUNDATION

46-1568593

gart II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
- -		\$	
(a) No. from	(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	(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
-			
-			
453 12-21-1	2	Schedule R (Form 9	 990, 990-EZ, or 990-PF) (2

Name of orga	anization		Employer identification number	
ጥሀፑ Βር	DNER CHILDREN FAMILY F	OTMIDA TT ON	46-1568593	
Part III	Exclusively religious, charitable, etc., indiv year Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	idual contributions to section 501(c)(7), le following line entry. For organizations c , contributions of \$1,000 or less for the	(8) or (10) organizations that total more than \$1,000 for the	
(a) No. from				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-		(e) Transfer of gift		
	Transferee's name, address, ar		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gıft ıs held	
	(e) Transfer of gift			
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	

FORM 990-PF INTEREST ON SAVIN	NGS AND TEMPORARY CASH INVESTMENTS	STATEMENT	1
SOURCE		AMOUNT	
ATLANTIC BANK			2.
TOTAL TO FORM 990-PF, PART I,	LINE 3, COLUMN A		2.
FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10		STATEMENT	2
NAME OF CONTRIBUTOR	ADDRESS		
MOSHE BODNER	8 CHELSEA LANE CHESTNUT RIDGE, NY 10977		
AARON BODNER	107 FOREST AVE LAKEWOOD, NJ 08701		
ELIEZER BODNER	65 OLD NYACK TURNPIKE MONSEY, NY 10952		
TZIPPORAH ROTTENBERG	930 MADISON AVE LAKEWOOD, NJ 08701		

Form **8868**

(Rev January 2013)

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.

OMB No 1545-1709

ightharpoons X

• If you are filing for an Automatic 3-Month Extension, complete	e only Pa	rt I and check this box			ightharpoonup
• If you are filing for an Additional (Not Automatic) 3-Month Ext	ension, c	complete only Part II (on page 2 of	this form)		
Do not complete Part II unless you have already been granted a	in automa	tic 3-month extension on a previous	ly filed Fo	rm 8868	
Electronic filing (e-file). You can electronically file Form 8868 if you	ou need a	3-month automatic extension of tin	ne to file (6	months for a c	orporation
required to file Form 990-T), or an additional (not automatic) 3-mon	nth extens	ion of time. You can electronically fi	le Form 88	368 to request a	n extension
of time to file any of the forms listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for 1	Fransfers A	Associated With	Certain
Personal Benefit Contracts, which must be sent to the IRS in paper	er format	(see instructions) For more details o	on the elec	tronic filing of th	nis form,
visit www irs gov/efile and click on e-file for Charities & Nonprofits					
Part I Automatic 3-Month Extension of Time					
A corporation required to file Form 990-T and requesting an autom	natic 6-mc	onth extension - check this box and o	complete		. —
Part I only				•	▶ ∟i
All other corporations (including 1120-C filers), partnerships, REMI to file income tax returns	Cs, and to	rusts must use Form 7004 to reques	t an exten	sion of time	
Type or Name of exempt organization or other filer, see instruction print				Employer identification number (EIN)	
THE BODNER CHILDREN FAMILY FOUNDATION			46-1568593		
due date for filing your 152 WEST 57TH 54TH FL	date for Number, street, and room or suite no. If a PO box, see instructions 9 your 152 WEST 57TH 54TH FL			Social security number (SSN)	
return See instructions	reign add	ress, see instructions			
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Application	Return	Application			Return
Application Is For	Code	Is For			Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	(corporation)		07
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
WAGNER FERBER F		· · · · · · · · · · · · · · · · · · ·			
• The books are in the care of b 66 SOUTH TYSON			NY 11	001	
Telephone No ► 516-328-3800	·	FAX No ▶ 516-488-46			
If the organization does not have an office or place of business	in the Ur				
• If this is for a Group Return, enter the organization's four digit 0	Group Exe	mption Number (GEN)	f this is fo	r the whole grou	ıp, check this
box ▶ If it is for part of the group, check this box ▶	and atta	ch a list with the names and EINs of	f all memb	ers the extension	n is for
1 I request an automatic 3-month (6 months for a corporation	required :	to file Form 990 T) extension of time	untıl		
AUGUST 15, 2013 , to file the exempt	organiza	tion return for the organization name	ed above	The extension	
is for the organization's return for					
calendar year or					
► X tax year beginning <u>DEC 28, 2012</u>	, an	d ending <u>DEC 31, 2012</u>		_	
2 If the tax year entered in line 1 is for less than 12 months, ch Change in accounting period	neck reas	on X Initial return	Fınal retur	n	
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			
nonrefundable credits. See instructions.		rofundable oradita and	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, contracted to a payments made, hely do say payer year average.	•		O.L	.	0
estimated tax payments made. Include any prior year overp			3b	\$	0.
c Balance due. Subtract line 3b from line 3a Include your pay by using EFTPS (Electronic Federal Tax Payment System) S		·	3с	\$	0.
Caution. If you are going to make an electronic fund withdrawal w			-	· · · · · · · · · · · · · · · · · · ·	
LHA For Privacy Act and Paperwork Reduction Act Notice,			2 307 0		3 (Rev 1-2013)