Department of the Treasury Internal Revenue Service

Form **990-PF**

Return of Private Foundation

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

Note: The organization may be able to use a copy of this return to satisfy state reporting requirements

2005

OMB No 1545-0052

For calendar year 2005, or tax year beginning , and ending							
G	Check	all that apply: Ir	nitial <u>return</u>	Final return	Amended return	Address change	Name change
Us	e the l	RS Name of organization	n			A Employer identification	n number
label							
Ot	herwi	••,	ILY FOUNDA		<u> </u>	20-1982204	<u> </u>
	print or type	- 1	O box number if mail is not	•	Room/suite	B Telephone number	
	Spec	STATE OF THE PERSON	SIDE BOULEV	ARD	34B	_	
	tructio	ns City or town, state, a				C If exemption application is p	
		NEW_YORK,				D 1 Foreign organizations	
H_		type of organization: { ction 4947(a)(1) nonexem		exempt private foundation Other taxable private found	dation	2 Foreign organizations me check here and attach co	omputation
					r	E If private foundation sta	
		rket value of all assets at e Part II, col (c), line 16)	·	Iting method X Cash Other (specify)	Accrual	under section 507(b)(1	
	,0111 r ►\$	653		lumn (d) must be on cash	basis)	F If the foundation is in a under section 507(b)(1	
_	art I	Analysis of Revenue an	d Expenses mns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
	Т.	necessarily equal the amoun		- 	income	Income	(cash basis only)
	1	Contributions, gifts, grant	•	14,020			
	2	Check If the foundation interest on savings and tempor cash investments	n is not required to attach Sch. B orary	121	121	1 2 1	CMA MEMBAM 1
	3			16,805	16,805		STATEMENT 1 STATEMENT 2
	4 5a	Dividends and interest fro Gross rents	om securities	10,005	10,803	10,803.	STATEMENT Z
		Net rental income or (loss)			 		
	62	Net gain or (loss) from sale of	possite set on line 10	151,247			
nue	Ь	Gross sales price for all assets on line 6a	151,247.	2327227			
Revenue	7	Capital gain net income (from		_	151,247.		
æ	8	Net short-term capital gai	n			N/A	· · · · · · · · · · · · · · · · · · ·
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	Ь	Less Cost of goods sold					
	C	Gross profit or (loss)					
		Other income			<u> </u>		
	 	Total Add lines 1 throug		182,193.	168,173.	16,926.	
	13	Compensation of officers, dire	,	0.	0.	0.	0.
	14	Other employee salaries a	na wages				
S	15	Legal fees	SOMT 3	7,293.	0.	0.	0
ŠUŠ	loa		frar. ·	1,000	0.	0.	0.
ž	ן ו	Accountinatees & 20	90 St	1,000.	0.	· ·	•
è	17	Interest Color					
je,	18	axes OGDEN,	UI STMT 5	1,532.	1,532.	0.	0.
Operating and Administrative Expenses	19	Depreciation and depletion					
Ē	20	Occupancy					
Ā	21	Travel, conferences, and r	meetings				
and	22	Printing and publications					
bu	23	Other expenses	STMT 6	12.	0.	0.	0.
rati	24	Total operating and adm					
Ö		expenses. Add lines 13 ti	-	9,837.	1,532.	0.	0.
•	25	Contributions, gifts, grant		69,000.			69,000.
	l .	Total expenses and disbu	ursements.	70 037	1 520		60 000
		Add lines 24 and 25	10:	78,837.	1,532.	0.	69,000.
		Subtract line 26 from line Excess of revenue over expens		103,356.			
	l.	Net investment income (4		103,330.	166,641.		
	l .	Adjusted net income (if ne	=			16,926.	
			-		· · · · · · · · · · · · · · · · · · ·		

Form **990-PF** (2005)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	ear
Part Balance Sheets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	_		
2 Savings and temporary cash investments		140,304.	140,304.
3 Accounts receivable ►			
Less allowance for doubtful accounts ▶			
4 Pledges receivable ▶			
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			
9 Prepaid expenses and deferred charges 1 Investments IIIS and extensions and selections.			············
10a Investments - U S and state government obligations			
b Investments - corporate stock STMT 7	550,358.	513,410.	513,410.
_ · · -		313,410.	<u> </u>
c Investments - corporate bonds			
11 Investments land, buildings, and equipment basis			
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment: basis			
Less accumulated depreciation			· · · · · · · · · · · · · · · · · · ·
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers)	550,358.	653,714.	653,714.
17 Accounts payable and accrued expenses			
18 Grants payable			
g 19 Deferred revenue		· · · · · · · · · · · · · · · · · · ·	
Deterred revenue Loans from officers, directors, trustees, and other disqualified persons Loans from officers, directors, trustees, and other disqualified persons Other labels by the content of the			
21 Mortgages and other notes payable			
22 Other liabilities (describe >			
23 Total liabilities (add lines 17 through 22)	0.	0.	
Organizations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Organizations that do not follow SFAS 117, check here			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Organizations that do not follow SFAS 117, check here and complete lines 27 through 31 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances			
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	550,358.	653,714.	
30 Total net assets or fund balances	550,358.	653,714.	
2	0007000		
31 Total liabilities and net assets/fund balances	550,358.	653,714.	
		03377111	<u></u>
Part III Analysis of Changes in Net Assets or Fund Bal	ances		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
(must agree with end-of-year figure reported on prior year's return)		1	550,358.
2 Enter amount from Part I, line 27a		2	103,356.
3 Other increases not included in line 2 (itemize)		3	0.
4 Add lines 1, 2, and 3		4	653,714.
5 Decreases not included in line 2 (itemize)		5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (b), line 30	6	653,714.
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MERCER FAMILY FOUNDATION

		CER FAMILY FOUN				2	0-198	2204 F	age (
P	(a) List and desc	and Losses for Tax on I ribe the kind(s) of property sold (e. irehouse; or common stock, 200 sl	g., real estate,	t Income	(b) How acquired P - Purchase D - Donation		acquired fay, yr.)	(d) Date so (mo., day, y	
—- 1а		TAL INVESTMENTS	<u> </u>		P				
<u> </u>									
C									
d									
е					<u> </u>		<u></u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			iain or (loss) s (f) minus (
a	151,247.							<u>151,2</u>	<u>47</u>
b									
<u> </u>			_						
<u>d</u>									
<u>e</u>									
	Complete only for assets showing	ng gain in column (h) and owned by					Col (h) gain i		
	(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1)	C		ut not less than -0-) or es (from col. (h))		
a	. <u>-</u>							<u>151,2</u>	<u>47</u>
b									
<u> </u>									
<u>d</u>			1						
e						· · · · · · · · · · · · · · · · · · ·			
2	Capital gain net income or (net ca	pital loss). { If gain, also enti-	er in Part I, line 0- in Part I, line	7 }	2			151,2	47
	Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	ss) as defined in sections 1222(5) a column (c).	and (6)		} 3			151,2	4 7.
P	art V Qualification U	nder Section 4940(e) fo	r Reduced	Tax on Net	Investment In	come			
(For	r optional use by domestic private	foundations subject to the section	4940(a) tax or	net investment in	come)				
	ection 4940(d)(2) applies, leave th	·							,
	-	ction 4942 tax on the distributable	-	-	eriod?			Yes X	J No
		alify under section 4940(e) Do not							
1	· · · · · · · · · · · · · · · · · · ·	each column for each year, see inst	ructions before	making any entri				(d)	
C	(a) Base period years Calendar year (or tax year beginnii	ng in) Adjusted qualifying di	stributions	Net value of no	(c) ncharitable-use asse	ts	Distribi	ution ratio ded by col. (c))	
	2004		0.		517,30	1.		.000	000
	2003		0.		-				
	2002								
	2001		_						
	2000								
	Track of hims at a shows a (a)							000	^ ^ ^
	Total of line 1, column (d)	E year hass period - duude the total	l on line 2 hy F	or by the number	ofvenre	2		.000	000
	the foundation has been in exister	5-year base period - divide the total nce if less than 5 vears	i on line 2 by 5,	or by the number	ui yeais	3		.000	000
	7,000								- -
4 [Enter the net value of noncharitab	le-use assets for 2005 from Part X	, line 5			4		593,0	05.
5 1	Multiply line 4 by line 3					5			0.

1,666.

1,666.

69,000.

7 Add lines 5 and 6

6 Enter 1% of net investment income (1% of Part I, line 27b)

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

Form	n 990-PF (2005) MERCER FAMILY FOUNDATION		1982204		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948 -	- see instru	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter N/A on line 1.				
	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)				
b	Domestic organizations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1		1,6	66.
	of Part I, line 27b				
C	All other domestic organizations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	l	_	0.
3	Add lines 1 and 2	3		1,6	66.
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-	5		1.6	66.
6	Credits/Payments:				
_	2005 estimated tax payments and 2004 overpayment credited to 2005				
	Exempt foreign organizations - tax withheld at source	1			
	Tax paid with application for extension of time to file (Form 8868) 6c 4,000	1			
	Backup withholding erroneously withheld 6d	1 !			
	Total credits and payments Add lines 6a through 6d	7 7		4 0	00.
,	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		+ , 0	75.
٥	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9	-		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
40	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		2 2	59.
10	Enter the amount of line 10 to be Credited to 2006 estimated tax	11	-	4,2	0.
	art VII-A Statements Regarding Activities		L		<u> </u>
		no in		Ves	No
18	During the tax year, did the organization attempt to influence any national, state, or local legislation or did it participate or interve	ile ili	-	103	
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	ihed or	·		
	distributed by the organization in connection with the activities		1.	1	
C	Did the organization file Form 1120-POL for this year?		1c	ļ	<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1	
	(1) On the organization ►\$ (2) On organization managers. ►\$ 0.	<u>-</u>			
е	Enter the reimbursement (if any) paid by the organization during the year for political expenditure tax imposed on organization				
	managers. ► \$0.				
2	Has the organization engaged in any activities that have not previously been reported to the IRS?		2	<u> </u>	X
	If "Yes," attach a detailed description of the activities			1	
3	Has the organization made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, or	-	i	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	ļ	_X_
4a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A 4b	<u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	ļ	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		ł		
	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	e law	ŀ		
	remain in the governing instrument?		6		_X_
7	Did the organization have at least \$5,000 in assets at any time during the year?		7	X	
	If "Yes," complete Part II, col (c), and Part XV				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE				
Ь	If the answer is "Yes" to line 7, has the organization furnished a copy of Form 990-PF to the Attorney General (or designate)				
-	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the organization claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for continuous con	alendar			
•	year 2005 or the taxable year beginning in 2005 (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		X
11			11	х	
''	Web site address ► N/A		L	,	L
10	The books are in care of FOUNDATION Telephone no.	_			
12	Located at \triangleright 220 RIVERSIDE BLVD. APT 34B, NYC, NY		<u>▶</u> 10069	1	
40		411 74	<u> </u>		<u></u>
13	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	13	N	I/A	Ш
52353 01-05	and enter the amount of tax-exempt interest received or accrued during the year	1 10	Form 99 0		(2005)
01-05	D-UO		, 0, 1,1		,_000)

Form 990-PF (2005) MERCER FAMILY FOUNDATION Part VII-B Statements Regarding Activities for Which Form 4720 May Be Require	2	0-1982	204		Page 5
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u>u</u>		l	Yes	No
1a During the year did the organization (either directly or indirectly):				163	140
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Vee	X No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		[22] 110			
a disqualified person?	☐ Yes	X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		X No			
(5) Transfer any income or assets to a disqualified person (or make any of either available		110			
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"		110			
If the organization agreed to make a grant to or to employ the official for a period after					
termination of government service, if terminating within 90 days.)	□ ves	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	100	140 HU			
section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		N/A	1b		
Organizations relying on a current notice regarding disaster assistance check here		▶ □	10		
c Did the organization engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not co	arractad				
before the first day of the tax year beginning in 2005?	nieolea		1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the organization was a private operating	foundation		10		22
defined in section 4942(j)(3) or 4942(j)(5)):	iounuation				
a At the end of tax year 2005, did the organization have any undistributed income (lines 6d and 6e, Part XIII) for tax year	(s) hearnning	1			
before 2005?		X No			
If "Yes," list the years ▶		110			
b Are there any years listed in 2a for which the organization is not applying the provisions of section 4942(a)(2) (relating	to incorrect				
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No"				1	
statement - see instructions)	4.10 41.4011	N/A	2ъ	- 1	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.					
▶					
3a Did the organization hold more than a 2% direct or indirect interest in any business enterprise at any time					
during the year?	Yes	X No			
b If "Yes," did it have excess business holdings in 2005 as a result of (1) any purchase by the organization or disqualified					
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sc				ļ	
Form 4720, to determine if the organization had excess business holdings in 2005)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/A	3ь	İ	
4a Did the organization invest during the year any amount in a manner that would jeopardize its charitable purposes?		,	4a		Х
b Did the organization make any investment in a prior year (but after December 31, 1969) that could jeopardize its charita	ble purpose	that			
had not been removed from jeopardy before the first day of the tax year beginning in 2005?			4b		Х
5a During the year did the organization pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	Yes	X No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,					
any voter registration drive?	Yes	X No		ļ	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section					
509(a)(1), (2), or (3), or section 4940(d)(2)?	Yes	X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for					
the prevention of cruelty to children or animals?	Yes	X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulation					
section 53 4945 or in a current notice regarding disaster assistance (see instructions)?		N/A	5b		
Organizations relying on a current notice regarding disaster assistance check here					
c If the answer is "Yes" to question 5a(4), does the organization claim exemption from the tax because it maintained					
expenditure responsibility for the grant? N/A	Yes	☐ No	ļ		
If "Yes," attach the statement required by Regulations section 53 4945-5(d)					
6a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on			I	ŀ	
a personal benefit contract?	Yes	X No	İ		
b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			6b		<u> </u>
If you answered "Yes" to 6b, also file Form 8870		ĺ			

Information About Officers, Directors, Trustees, Foundation Managers, Highly Page 6 Part VIII Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (b) Title, and average hours per week devoted to position (If not paid, enter -0-) (a) Name and address DIRECTOR REBEKAH MERCER 220 RIVERSIDE BOULEVARD APT 34B 0 0 10069 5.00 0. NEW YORK, NY 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title and average (e) Expense account, other allowances hours per week devoted to position (a) Name and address of each employee paid more than \$50,000 (c) Compensation NONE Total number of other employees paid over \$50,000 0 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 0 Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc N/A

Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during t	he tax year on lines 1 and 2		Amount
1 N/A			
2	· · · · · · · · · · · · · · · · · · ·		
	<u></u>		
All other program-related investments See instructions. 3			
·	·		
Total. Add lines 1 through 3		>	0
Part X Minimum Investment Return (All domestic foundations	must complete this part. Foreign for	undations, se	e instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charita	ble, etc , purposes.		
a Average monthly fair market value of securities		1a	602,036
b Average of monthly cash balances		1b	
c Fair market value of all other assets		1c	
d Total (add lines 1a, b, and c)		1d	602,036
e Reduction claimed for blockage or other factors reported on lines 1a and	1 1	1	
1c (attach detailed explanation)	1e 0.	7	
2 Acquisition indebtedness applicable to line 1 assets		2	0
3 Subtract line 2 from line 1d		3	602,036
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	· ·	4	9,031
 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and Minimum investment return Enter 5% of line 5 	on Part V, line 4	5	<u>593,005</u>
Distributable Amount (occupations) (Section 4049(1)(2))	and (1)(5) private operating foundations a	nd certain	29,650
foreign organizations check here and do not complete this par		ina certain	
1 Mınımum investment return from Part X, line 6		1	29,650
2a Tax on investment income for 2005 from Part VI, line 5	1,666.	,	
b Income tax for 2005. (This does not include the tax from Part VI)	2b]	
c Add lines 2a and 2b		2c	1,666
3 Distributable amount before adjustments Subtract line 2c from line 1		3	27,984
4 Recoveries of amounts treated as qualifying distributions		4	0
5 Add lines 3 and 4		5	27,984
6 Deduction from distributable amount (see instructions)		_6_	0
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pai	t XIII, line 1	7	27,984
Part XII Qualifying Distributions (see instructions)			
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes:		, , , , , , , , , , , , , , , , , , , ,
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		1a	69,000
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 charita	able, etc., purposes	2	
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	60.000
4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8,		4	69,000
5 Organizations that qualify under section 4940(e) for the reduced rate of tax on net in	vestment	_	1
income Enter 1% of Part I, line 27b		5	1,666
6 Adjusted qualifying distributions. Subtract line 5 from line 4	A commendate and a state of the	6	67,334
Note. The amount on line 6 will be used in Part V, column (b), in subsequer 4940(e) reduction of tax in those years	it years when calculating whether the	e roundation (qualities for the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2004	(c) 2004	(d) 2005
Distributable amount for 2005 from Part XI, line 7				27,984.
2 Undistributed income, if any, as of the end of 2004				
a Enter amount for 2004 only			12,915.	
ь Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2005:		U.		
a From 2000		ì		
b From 2001				
c From 2002				
d From 2003				
e From 2004				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2005 from				
Part XII, line 4 ► \$ 69,000.				
a Applied to 2004, but not more than line 2a			12,915.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2005 distributable amount				27,984.
e Remaining amount distributed out of corpus	28,101.			
5 Excess distributions carryover applied to 2005 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	28,101.			
b Prior years' undistributed income Subtract			-	
line 4b from line 2b		0.		
c Enter the amount of prior years'				-11 · · · · · · · · · · · · · · · · · ·
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				-
amount - see instructions		0.		
e Undistributed income for 2004. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2005 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2006				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(E) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2000				
not applied on line 5 or line 7	0.			······································
9 Excess distributions carryover to 2006				
Subtract lines 7 and 8 from line 6a	28,101.			
10 Analysis of line 9:				
a Excess from 2001			j	
b Excess from 2002				
c Excess from 2003				
d Excess from 2004				
<u>e Excess from 2005</u> 28,101.				

	FAMILY FOUN			20-1	982204 Page 9
Part XIV Private Operating F	oundations (see in	structions and Part V	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2005, enter the date of	he ruling	>		
b Check box to indicate whether the organ	nization is a private opera	ting foundation describe	d in section	4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a		· · · · · · · · · · · · · · · · · · ·			
c Qualifying distributions from Part XII,					-
line 4 for each year listed					
d Amounts included in line 2c not	·· ·····				
used directly for active conduct of				1	
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c	ļ				
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					,
Part XV Supplementary Info				ion had \$5,000 or	more in assets
at any time during t	the year-see page	e 26 of the instru	ıctions.)		
1 Information Regarding Foundation	n Managers:	-			
a List any managers of the foundation wh	o have contributed more	than 2% of the total con	tributions received by th	ne foundation before the cl	ose of any tax
year (but only if they have contributed r	nore than \$5,000). (See s	ection 507(d)(2).)			
NONE		·			
b List any managers of the foundation wh			(or an equally large por	tion of the ownership of a	partnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
	•		-	es not accept unsolicited r	
the organization makes gifts, grants, etc	c. (see instructions) to ind	ividuals or organizations	under other conditions	s, complete items 2a, b, c,	and d.
a The name, address, and telephone num	ber of the person to whor	n applications should be	addressed:		
b The form in which applications should t	pe submitted and informa	tion and materials they s	hould include.		
c Any submission deadlines					
ט און שערוווים וווי וועלעוווועט אין אין אין אין אין אין אין אין אין אין					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields	, kınds of ınstitutions, o	r other factors:	

Page 10

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year ORGAN INSTITUTE OF SCIENCE NON FOR PROFIT AND MEDICINE, PO BOX 1279, ORGANIZATI CAVE JUNCTION, OR 60,000. ON DONATION AMERICAN ASSOCIATION FOR NON FOR AEROSOL RESEARCH, 15000 PROFIT ORGANIZATI COMMERCE PARKWAY STE C, 4,000. ON DONATION MOU THE FLOWER POWER NON FOR PROFIT FOUNDATION, 420 EAST 55TH STREET, NEW YORK, NY ORGANIZATI 5,000. ON DONATION 10022 69,000. **▶** 3a Total b Approved for future payment NONE Total 0.

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

Enter gross amounts unless otherwise indicated.		d business income		ded by section 512, 513, or 514	- (e)
1 Program service revenue.	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	_				
b			ļ		
C			<u> </u>		
d	1 1				
e					
f	_ L				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					121.
4 Dividends and interest from securities					121. 16,805.
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					1-1
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					151,247.
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·			
1 Other revenue:					
a					
b	1 1				
c					
d					
	1 1				
e2 Subtotal. Add columns (b), (d), and (e)	-	0.		0.	168,173.
3 Total Add line 12, columns (b), (d), and (e)	\				168,173.
See worksheet in line 13 instructions to verify calculations.)				19_	100,173.
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which into the organization's exempt purposes (other the	come is reported in	column (e) of Part XVI-A			mplishment of
				-	
					·
					
					
				7: 	
					
	_				
				-	
					
			····	· · · · · · · · · · · · · · · · · · ·	
					

GOLUB, LACA PA, WILSON, 2 ROOSEVELT AVENUE PORT JEFFERSON STATION,

P	Part XVII Information Regarding Transfer	ers To and Transactions ar	nd Relationships With Nonc	haritable	9	ige iz
1		no following with any other organization	described in section 501(c) of	- -T	Yes	Nο
•	the Code (other than section 501(c)(3) organizations) or in			<u> </u>	163	140
	a Transfers from the reporting organization to a noncharitable		ations.			
٠	(1) Cash	s exempt organization of:		1a(1)		Х
	(2) Other assets			1a(1)		X
	b Other transactions:			10(2)		Λ
٠	(1) Sales of assets to a noncharitable exempt organization			1b(1)		v
	(2) Purchases of assets from a noncharitable exempt organization	nization		1b(1)		X
	(3) Rental of facilities, equipment, or other assets	mzation		1b(3)		X
	(4) Reimbursement arrangements			1b(3)		X
	(5) Loans or loan guarantees			1b(5)		X
	(6) Performance of services or membership or fundraising	e olicitations		1b(6)		X
	c Sharing of facilities, equipment, mailing lists, other assets, of			1c		X
	d If the answer to any of the above is "Yes," complete the follo		ave show the fair market value of the nor		L	21
٠	or services given by the reporting organization. If the organ					
	column (d) the value of the goods, other assets, or services		iso in any transaction of charmy arrange	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
 (a)		acharitable exempt organization	(d) Description of transfers, transactions,	and sharing ar	rangeme	nts
,		N/A	(-,			
		11/21	-	·		
						
		· · · · · ·				
-						
		· · · · · · · · · · · · · · · · · · ·				
_						
						·
			· · · · · · · · · · · · · · · · · · ·			
2-	a Is the organization directly or indirectly affiliated with, or rela	ated to one or more toy exempt ergeniz	estions described			
2 a	in section 501(c) of the Code (other than section 501(c)(3))	· · · · ·	ations described		T] No
h	b If "Yes," complete the following schedule.	of in Section 327		Yes	A	סמו ב
	(a) Name of organization	(b) Type of organization	(c) Description of relati	onship		
	N/A	(E) Type of enganization	(v) 2000 i pilon oi rolati	опоттр		
						·
	Under penalties of perjury, I declare that I have examined this return, inc	luding accompanying schedules and statemen	ts, and to the best of my knowledge and belief,	it is true, corre	ot.	
- [and complete Declaration of preparer (other than taxpayer or fiduciary) is	s based on all information of which preparer ha	is any knowledge	,	•	
ı	Dickel Clercer	100				
e	Signature of officer or trustee	<i>/D.</i> Da				
֓֞֡֞֞֞֜֞֡֞֜֞֜֞֜֞֡֓֞֞֞֞֞֜֞֞֞֞֞֞֞֡֓֡֡֡֡֡	Drangraria A					
ğ	signature					
"	Freparer's signature Firm's name (or yours GOLUB, LACA BA, it self-employed). 2 ROOSEVELT AVE	WILSON,				
	if self-employed). 2 ROOSEVE T AVE	NUE				
- [address and 7/P code					

address, and ZIP code

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

Department of the Treasury Internal Revenue Service

Name of organization

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No 1545-0047

Employer identification number

2005

	MERCER FAMILY FOUNDATION	20-1982204					
Organization type (chec							
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 foundation						
	501(c)(3) taxable private foundation						
· -	on is covered by the General Rule or a Special Rule . (Note: <i>Only</i> a section 501(c)(7), (8), or e and a Special Rule-see instructions)	(10) organization can check boxes					
X For organization	ns filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in mon Implete Parts I and II)	ley or property) from any one					
Special Rules-							
sections 1 509(01(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test un a)-3/1 170A-9(e) and received from any one contributor, during the year, a contribution of the inline 1 of these forms (Complete Parts I and II)	<u> </u>					
aggregate conti	For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use <i>exclusively</i> 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 Form 990-EZ, that received from any one contributor, during the year some contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)							
-	that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Fo	•					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, Form 990-EZ, and Form 990-PF.

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2005)

	4	-	
Page	1 of	1	of Part I

Schedule	R	(Form 990)	990-F7	or	ggn-PF	١,	(2005)	١
301164416	u	(1 01111 000	, 880-62,	v	88U*FF	ш	2000	,

Name of organization

Employer identification number

MERCER FAMILY FOUNDATION

20-1982204

Рап і	Contributors (See Specific Instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ROBERT MERCER 18 APRICOT ROAD MOUNT SINAI, NY 11766	\$ 14,020.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate 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) Aggregate 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) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Moncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
23452 02-0	1-06	Schedule B (Form	990, 990-EZ, or 990-PF) (2005)

FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	PORARY C	ASH IN	VESTMENTS	STATEME	ENT	1
SOURCE						JOMA	JNT	
CITIBANK INTEREST CHECKING							12	21.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A				12	21.
FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUF	RITIES	STATEM	ENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMI AMOU		ł
MEDALLION CAPITAL INVESTMENT	S		16,805.		0.	1	16,80)5.
TOTAL TO FM 990-PF, PART I,	LN 4		16,805.		0.	1	16,80)5.
FORM 990-PF		LEGAL	FEES			STATEM	ENT	3
DESCRIPTION	EXPE	A) INSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM	CHAI	(D) RITAE RPOSE	
LEGAL FEES		7,293.		0.		0.		0.
TO FM 990-PF, PG 1, LN 16A		7,293.		0.		0.		0.
FORM 990-PF	AC	COUNTI	NG FEES			STATEM	ENT	4
DESCRIPTION	EXPE	A) INSES BOOKS			(C) ADJUSTED NET INCOM) CHAI	(D) RITAE RPOSE	
ACCOUNTING FEES		1,000.	-	0.		0.		0.
TO FORM 990-PF, PG 1, LN 16B		1,000.		0.		0.		0.

FORM 990-PF	TAX		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FEDERAL EXCISE TAX	1,532. 1,532		2.	0.	0.
TO FORM 990-PF, PG 1, LN 18	1,532.	1,532	2.	0.	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
BANK CHARGES	12.	12. 0.		0.	0.
TO FORM 990-PF, PG 1, LN 23). 	0.	0.	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7
DESCRIPTION		F	BOOK VALUE	FAIR MARKE VALUE	T
MEDALLION CAPITAL INVESTMENT		513,410. 513,			
TOTAL TO FORM 990-PF, PART I		513,410. 513,41			

Form

Department of the Treasury Internal Revenue Service

Underpayment of Estimated Tax by Corporations See separate instructions Attach to the corporation's tax return FORM 990-P

FORM 990-PF

OMB No 1545-0142

2005

MERCER FAMILY FOUNDATION

Employer identification number 20-1982204

Note: Generally, the corporation is not required to file Form 2220. (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 34 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

F	Part I Required Annual Payment							
1	Total tax (see instructions)						1	1,666.
2 a	a Personal holding company tax (Schedule PH (Form 1120), lin	e 26) included on line 1		2a			
b	b Look-back interest included on line 1 under section 460(b)(2)	for	completed long-term	ĺ				
	contracts or of section 167(g) for depreciation under the inco	me f	orecast method		2b			
	(3)			Ī				
c	c Credit for Federal tax paid on fuels (see instructions)				2c			
	d Total Add lines 2a through 2c						2d	
	Subtract line 2d from line 1. If the result is less than \$500, do	not (complete or file this form	The corpora	ation			<u>.</u> !
Ŭ	does not owe the penalty		outplote of the time term		2000		3	1,666.
4		urn (see instructions). Caution	If the tax	s 7ero		ا	
7	or the tax year was for less than 12 months, skip this line at	•	•				4	
	of the tax year was for less than 12 months, skip this fine at	ilu Çi	iter the amount nom the	o on the o				·
_	Required Annual Payment. Enter the smaller of line 3 or line	A If	the corporation is require	ud to okin lin	0.4			
o	enter the amount from line 3	4. 11	the corporation is require	iu to skip iiii	c 4,		5	1,666.
	Part II Reasons for Filing - Check the boxes belo	··· th	at apply. If any haves are	ahaakad th	o corporation	must file Form 20		1,000.
	even if it does not owe a penalty (see instructions)	וון אאנ	at apply it ally boxes are	ciieckeu, iii	e corporation	i iliust nie Portii 22	.20	
	The corporation is using the adjusted seasonal installi	mant	mathod			_ .		
6	The corporation is using the adjusted seasonal install							
7	•			n the prior i	oar'a tay			
8	The corporation is a "large corporation" figuring its firs Part III Figuring the Underpayment	strec	juireo installinent baseo o	in the prior	rear S tax.			
	Part III Figuring the Onderpayment		(-)		L.	(-)		
_	Late the second of the second		<u>(a)</u>	(b)	(c)		(d)
9	Installment due dates Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers							
	Use 5th month), 6th, 9th, and 12th months of the	_	05/15/05	067	15/05	00/15/	ΛE	10/15/05
	corporation's tax year	9	05/15/05	06/.	15/05	09/15/	05	12/15/05
10								
	above is checked, enter the amounts from Schedule A, line							
	38 If the box on line 8 (but not 6 or 7) is checked, see							
	instructions for the amounts to enter. If none of these boxes		44.5		446			40.0
	are checked, enter 25% of line 5 above in each column	10	417.		416.	4	17.	416.
11	Estimated tax paid or credited for each period (see							
	instructions). For column (a) only, enter the amount							
	from line 11 on line 15	11						
	Complete lines 12 through 18 of one column before							
	going to the next column					•		
12	Enter amount, if any, from line 18 of the preceding column	12						
13	Add lines 11 and 12	13						
14	Add amounts on lines 16 and 17 of the preceding column	14			417.	8	33.	<u> 1,250.</u>
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.		0.		0.	0.
16	If the amount on line 15 is zero, subtract line 13 from line							
	14 Otherwise, enter -0-	16			417.	8	33.	
17	Underpayment If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10 Then go to line 12 of the next						-	
	column. Otherwise, go to line 18	17	417.		416.	4	17.	416.
18	Overpayment If line 10 is less than line 15, subtract line 10							
	from line 15. Then go to line 12 of the next column	18						

JWA

Form 2220 (2005)

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 3rd month					
	after the close of the tax year, whichever is earlier (see					
	instructions) (Form 990-PF and Form 990-T filers: Use 5th					
	month instead of 3rd month.)	19				-
20	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
21	Number of days on line 20 after 4/15/2005 and before 10/1/2005	21				
22	Underpayment on line 17 x Number of days on line 21 x 6%	22	Q	 \$	 \$	\$
22	365		Ψ	Ψ	Ψ	1.9
23	Number of days on line 20 after 9/30/2005 and before 4/1/2006	23				
24	Underpayment on line 17 x Number of days on line 23 x 7%	24	 \$	\$	 \$	\$
	385					
25	Number of days on line 20 after 3/31/2008 and before 7/1/2008	25				
26	Underpayment on line 17 x Number of days on line 25 X '%	26	\$	\$	\$	\$
	365					
27	Number of days on line 20 after 6/30/2006 and before 10/1/2006	27	SEE	ATTACHED W	ORKSHEET	
28	Underpayment on line 17 x Number of days on line 27 x *% 385	28	\$	\$	\$	\$
29	Number of days on line 20 after 9/30/2008 and before 1/1/2007	29				
30	Underpayment on line 17 x Number of days on line 29 x '%	30	S	\$	 \$	\$
	365					
31	Number of days on line 20 after 12/31/2008 and before 2/18/2007	31				
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
	365					
33	Add lines 22, 24, 28, 28, 30, and 32	33	\$	\$	<u> </u> \$	\$
34	Penalty Add columns (a) through (d), of line 33. Enter the to	otal h	ere and on Form 1120; li	ne 33,		
	Form 1120-A, line 29; or the comparable line for other income	e tax	returns		34	\$ _75.

^{*} For underpayments paid after March 31, 2006: For lines 26, 28, 30, and 32, use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www irs gov. You can also call 1-800-829-4933 to get interest rate information.

JWA Form **2220** (2005)

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying Numb	er
MERCER FAMI	LY FOUNDATION	1		20-1982	204
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/05	417.	417.	31	.000164384	2
06/15/05	416.	833.	92	.000164384	13
09/15/05	417.	1,250.	15	.000164384	3
09/30/05	0.	1,250.	76	.000191781	18
12/15/05	416.	1,666.	121	.000191781	39
04/15/06	-4,000.	-2,334.			-
					-
	·				
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			· ·		75
Penalty Due (Sum of Colum	n F).				1184

^{*} Date of estimated tax payment, withholding credit date or installment due date.

Form **8868**

(Rev December 2004)

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

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ [X]
• If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of	•
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	usly filed Form 8868
Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)	
Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I o	nly
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 10	
Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3 month automatic extension of below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the add extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details visit www irs gov/efile.	litional (not automatic) 3-month
Type or Name of Exempt Organization	Employer identification number
MERCER FAMILY FOUNDATION	20-1982204
File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions	
filing your 220 RIVERSIDE BOULEVARD, NO. 34B	
return See instructions City, town or post office, state, and ZIP code For a foreign address, see instructions	
NEW YORK, NY 10069	
Check type of return to be filed(file a separate application for each return)	
	rm 4720
	rm 5227
	rm 6069
	rm 8870
- TOM 10417A	
● The books are in the care of ▶ FOUNDATION	
Telephone No ▶ FAX No ▶	
 If the organization does not have an office or place of business in the United States, check this box 	> []
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	
box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs	of all members the extension will cover
1 I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until A	UGUST 15, 2006
1 I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until All to file the exempt organization return for the organization named above. The extension is for the organization	
► X calendar year 2005 or	ation 5 retain 101
tax year beginning , and ending ,	
2 If this tax year is for less than 12 months, check reason Initial return Final return	Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nonrefundable credits. See instructions	\$ 4,000.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	
tax payments made Include any prior year overpayment allowed as a credit	<u>\$</u> 0.
c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit	
coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	<u>\$ 4,000.</u>
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and	Form 8879-EO for payment instructions
LHA For Privacy Act and Panerwork Reduction Act Notice see instructions	Form 8868 (Rev. 12-2004)