# Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

Α	For the	e 2012 cal	<u>endar year, or tax year b</u>	peginning		,	and e	nding	_			
В	Check if	applicable:	C Name of organization	Dana's Ange	els Research	Trust			D Employer	identifica	ation numb	er
П.	Address	change	Doing Business As	<u>J</u>					51-6528048	2		
=	Name ch	-	Number and street (or P.0	D. box if mail is no	ot delivered to stre	eet address) Room/	/suite		E Telephone			
=		-	•			·			•			
=	Initial retu		15 East Putnam Avenu			117			(203) 861-2	063		
Щ	Terminat	Terminated City, town or post office, state, and ZIP code										
Ш,	Amended	d return	Greenwich			CT 06	830		<b>G</b> Gross rece	eipts \$		340,084
<u> </u>	Application	on pending	F Name and address of prin	ncipal officer:				H(a) Is t	this a group retu	ırn for affili	iates?	Yes X No
			Philip D. Marella 15 De	esiree Dr., Gr	eenwich, CT	06830		H(b) Are	e all affiliates ind	cluded?		Yes No
1 7	ax-exem	npt status:	X 501(c)(3) 501(c)	) ( ) •	◀ (insert no.)	4947(a)(1) or	527	If "	'No," attach a lis	st. (see ins	structions)	
		-		, , ,	(							
			w.danasangels.org						oup exemption			
K F	orm of o	rganization:	Corporation X Tr	rust Associ	ation Other	r <b>&gt;</b>	L Yea	ar of form	ation: 2002	M Stat	te of legal d	omicile: CT
F	art I	Sui	mmary									
	1	Briefly d	lescribe the organizatio	n's mission o	r most signific	ant activities:	Dana	a's Ang	els Researc	h Trust's	s mission	ı
		is furthe	ring medical research,	medical educ	ation, or med	ical or hospital c	are fo	r the				
Se		treatme	nt or cure of Niemann-F	Pick type C di	sease or simi	lar genetic disea	ses.					
nar												
Activities & Governance	2	Check tl	his box 🕨 if the or	ganization dis	scontinued its	onerations or div	snose	d of mo	re than 25%	of its n	et assets	· · · · · · · · · · · ·
õ	3		of voting members of t							3	iot addott	3
စ္	4		of independent voting							4		3
vitie	5		mber of individuals em			•				5		0
Ę	6		mber of volunteers (es		-	•				6		10
٩	7a		related business reven							7a		0
	_					•				7b		0
	b	net unit	elated business taxable	income nom	F0III 990-1,	III 34			Prior Year	76	Curro	ent Year
	8	Contribu	utions and grants (Part	\/    lino 1h\						,076	Curre	275,981
ne			ntions and grants (Part n service revenue (Part						201	,070		
Revenue	9									500		0
æ	10		ent income (Part VIII, c			•			4.5	500		448
	11		evenue (Part VIII, colum							5,505		-118,839
	12		enue—add lines 8 throug							5,071		157,590
	13		and similar amounts pa	•		•			120	),540		133,650
	14		paid to or for members									0
es	15		other compensation, emp		•	` '	•					0
Expenses	16a		ional fundraising fees (F			•						0
Ϋ́	b		ndraising expenses (Pa							=		
_	17		xpenses (Part IX, colum			•				3,145		23,482
	18		penses. Add lines 13-							3,685		157,132
	19	Revenu	e less expenses. Subtra	act line 18 fro	m line 12 .   .					2,386		458
Net Assets or								Beginn	ning of Current		End	of Year
sset	20		sets (Part X, line 16).						267	7,613		268,071
et A	21		bilities (Part X, line 26)							0		0
			ets or fund balances. S	ubtract line 2	1 from line 20				267	7,613		268,071
	rt II		nature Block									
	•		ry, I declare that I have examined, and complete. Declaration		• .	, ,				•	ge	
anu	beller, it	is true, corre	<u> </u>	Tot preparer (other	er triair officer) is	based on an imormati	IOII OI W	пісп ргер	arei nas any ki		/24/2042	
Siç	jn 💮		/S/ Philip D. Marella Signature of officer						Date		/31/2013	
He	re		•				Т	4	Date			
			Philip D. Marella				Trus	iee				
		Drine	Type or print name and title t/Type preparer's name		Preparer's signa	iture		Date			PTIN	
Pa	id		v i ype preparer s name		i reparer s signa	itui <del>e</del>		Dali		heck	if Filly	
		_			SELF-PREP	ARED RETURN				elf-employ	_	
	parer		's name ▶					•	Firm's EIN ▶			
Use Only												
		•	's address						Phone no.		1.7	
Ма	y the IF	RS discus	ss this return with the pr	reparer show	n above? (see	e instructions) .					. X Y	'es No

Part IV Dana's Angels Research Trust

Checklist of Required Schedules

Section 501(p/3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II    Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 88-19? If "Yes," complete Schedule C, Part II    Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I    Did the organization institution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II    Did the organization institution collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III    Did the organization fraport an amount in Part X, ine 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability; serve as a custodian for amounts for beat very serve or complete Schedule D, Part V in 10 bid the organization or a amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V in 11, vil. IV, vil. Vil. Vil. Vil. Vil. Vil. Vil. Vil. V		•		Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  3 Did the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.  4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.  5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.  5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.  7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. line 19, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. line 19, for escription or escription, directly or through a service or part X. line 19, for escrip	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I .  4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II .  5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 89-19? If "Yes," complete Schedule C, Part II .  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I .  7 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II .  8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability: serve as a custodian for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V .  10 Did the organization is newtor to any of the following questions is "Yes," then complete Schedule D, Part V .  10 Did the organization assess reported in Part X, line 16? If "Yes," complete Schedule D, Part V II.  2 Did the organization report an amount for investments—other securities in Part X, line 19? If "Yes," complete Schedule D, Part V II.  2 Did the organization report an amount for investments—other securities in Part X, line 19. Part X II.  3 Did the organization report an amount for investments—other securities in Part X, line 19. Part V II.  4 Did the organization report an amount for investments—other securities in Part X,		•			
acandidates for public office? If "Yes." complete Schedule C, Part II.  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes." complete Schedule C, Part III.  Is the organization a section 501(c)(4), 501(c)(5), 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 8-19? If "Yes," complete Schedule C, Part III.  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes." complete Schedule D, Part II.  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  Did the organization did the part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V.  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.  Did the organization answer to any of the following questions is "Yes," then complete Schedule D, Part V.  Did the organization or port an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part X.  Did the organization and amount for investments—other securities in Part X, line 10 It at 18 It at	2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	3		2		Х
election in effect during the tax year? If "Yes," complete Schedule C, Part II.  Is the organization a section 501c(4), 501c(5), organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III.  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed organization, and the organization report an amount for land, buildings, and equipment in Part X. line 10? If "Yes," complete Schedule D, Part V.  Did the organization report an amount for land, buildings, and equipment in Part X. line 10? If "Yes," complete Schedule D, Part XIII.  Did the organization report an amount for land, buildings, and equipment in Part X. line 10? If "Yes," complete Schedule D, Part XIII.  Did the organization report an amount for other assets in Part X. line 10? If "Yes," complete Schedule D, Part XIII.  Did the organization report an amount for other assets in Part X. line 10? If "Yes," complete Schedule D, Pa	4		3		
5 Is the organization a section 501(c)(4), 501(c)(5) or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? II "yes," complete Schedule D, Part II.  7 Did the organization instead on a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III.  8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  9 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V, IVII, VIII, N, or X as applicable.  10 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  11 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  11 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  11 Did the organization and amount for other hisbilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  11 Did the organization and amount for other hisbilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  11 Did the organization and amount for other hisbilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  11 Did the organization and an amount for other hisbilities in Part X, line 25? If "Yes,"	-		4		Χ
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6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I .  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II .  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II .  9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ior provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV .  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V .  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  11 Did the organization report an amount for investments—other securities in Part X, line 11 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  12 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  13 Did the organization report an amount for other labelities in Part X, line 16 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III to 10 the organization report an amount for other labelities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III to 10 the organization repo		•	5		Χ
have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I    7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II    8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability: serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV    10 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability: serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV    10 Did the organization report an amount a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V    11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII.    12 bid the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.    11 c) Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.    11 c) Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X.    11 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D,	6				
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8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI.  11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  12 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII.  13 Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  14 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part VIII.  15 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  16 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  16 Did the organization organize or consolidated financial statements for the tax year include a footnote that diddresses the organization organized or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional and if the organization organized in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Parts XI and XII is optional to schedule Schedule D, Parts XI and XII is optional to schedule Schedule Schedule Schedule F, Parts II and IV  15 Did the organization maintain an office, employees, or agent	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
possible organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V .  11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V .  12 If If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  13 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  14 Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  15 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  16 Did the organization report an amount for other assets in Part X, line 15% that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X.  17 Did the organization's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X.  18 Did the organization balain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X.  19 Did the organization answered "No" to line 12a, then completing Schedule D, Part X and XII is propriet and if the organization manual program service activities outside the United States?  14 Did the organization manual program service activities outside the United States?  15 Did the organization r		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Χ
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13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	b	· · · · · · · · · · · · · · · · · · ·	401		v
14a Did the organization maintain an office, employees, or agents outside of the United States?  14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  18 If "Yes," complete Schedule G, Part III  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	12				X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV.  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.  18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  19 If "Yes," complete Schedule G, Part III.					X
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organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	· · · · · · · · · · · · · · · · · · ·			
to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Χ
<ul> <li>Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)</li></ul>	16				
on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		·	16		Χ
<ul> <li>Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II</li></ul>	17				
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			17		Χ
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	18		40		
If "Yes," complete Schedule G, Part III	10		18	Х	
	19		10		Х
Eva Dia ino organizazioni operate one di more mospitari admittos: il 100, complete dell'etale 11	202	·			X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b					

#### Form 990 (2012) Dana's Angels Research Trust Checklist of Required Schedules (continued) Part IV

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Χ	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Χ
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
_	24b through 24d and complete Schedule K. If "No," go to line 25	24a		Χ
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	04-		V
لہ	to defease any tax-exempt bonds?	24c 24d		Χ
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	240		
<b>2</b> 5a	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	ZJa		
b	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Χ
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Χ
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Χ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Χ
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			v
20	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		
30	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N</i> ,	30		
٠.	Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	<u> </u>		
	If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Χ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		Χ
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			V
27	organization? If "Yes," complete Schedule R, Part V, line 2	36		Χ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	31		^
38	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Х	
	10. Hetel. A. H. G. H. G.	50	^	

Form 990 (2012) **Part V** Dana's Angels Research Trust

Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			ĺ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Χ	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			ĺ
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u></u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			1
	account)?	4a		Χ
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		١
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Χ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	٥.		1
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7-		V
<b>L</b>	and services provided to the payor?	7a 7b		Х
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		
С	required to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		^
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Χ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		 
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	4.5		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	44-		V
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14h		Х
h	ni tes nas inilied a com 770 io redou mese navments ( it ivo introvide an explanation in Schedule ()	140		

Section A. Governing Body and Management										
	Check if Schedule O contains a response to any question in this Part VI		. [	X						
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched	lule O. See ins	tructio	ns						
Part VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	, and for a "No	"							
F0111 990 (2012)	Bana e 7 angele i teecaren 11 act	31-0320046	Pag	Jе						

				Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b> 3							
	If there are material differences in voting rights among members of the governing body, or								
	if the governing body delegated broad authority to an executive committee or similar								
	committee, explain in Schedule O.								
b									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation	nship with							
	any other officer, director, trustee, or key employee?		2	Χ					
3	Did the organization delegate control over management duties customarily performed by or unde								
	supervision of officers, directors, or trustees, or key employees to a management company or other	•	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 wa	ıs filed?	4		X				
5	· · · · · · · · · · · · · · · · · · ·								
6	6 Did the organization have members or stockholders?								
7a	Did the organization have members, stockholders, or other persons who had the power to elect of	or appoint							
	one or more members of the governing body?		7a		Χ				
b	Are any governance decisions of the organization reserved to (or subject to approval by) member								
	stockholders, or persons other than the governing body?		7b		Χ				
8	Did the organization contemporaneously document the meetings held or written actions undertak	en during							
	the year by the following:								
а	The governing body?		8a	Χ					
b	Each committee with authority to act on behalf of the governing body?		8b	Χ					
9	, ,								
at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O									
Sect	on B. Policies (This Section B requests information about policies not required by the In	iternal Revenue Co	ode.)						
40-	Did the ergenization have level chanters branches or efficience?		10-	Yes	No X				
_	Did the organization have local chapters, branches, or affiliates?		10a						
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?								
11a									
_	<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a									
_	<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?								
C	Did the organization regularly and consistently monitor and enforce compliance with the policy?		12b	Х					
	describe in Schedule O how this was done		12c	Х					
13	Did the organization have a written whistleblower policy?		13		Х				
14	Did the organization have a written document retention and destruction policy?		14		Х				
15	Did the process for determining compensation of the following persons include a review and appr								
	independent persons, comparability data, and contemporaneous substantiation of the deliberation								
а	The organization's CEO, Executive Director, or top management official.		15a						
b	Other officers or key employees of the organization		15b						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrar	ngement							
	with a taxable entity during the year?		16a		Χ				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to eva								
	participation in joint venture arrangements under applicable federal tax law, and take steps to saf								
	the organization's exempt status with respect to such arrangements?		16b						
	ion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed   CT								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 9	90-1 (Section 501(c)	(3)s c	nly)					
	available for public inspection. Indicate how you made these available. Check all that apply.	alata ta Ostos III. Os							
40	X Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents	s, conflict of interest							
20	policy, and financial statements available to the public during the tax year.  State the name, physical address, and telephone number of the person who possesses the books and records of the								
20									
	organization: ► Philip Marella  15 Desiree Dr., Greenwich, CT 06830	(203) 801-20	სა						
	13 Desiree Dr., Greenwich, CT 00030								

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	1-UJZUU <del>1</del> U	

Form 990 (2012) Dana's Angels Research Trust

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors** 

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- · List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er an	Pos neck ss pe	rson	n oth is both Highest compensated en is or/employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Philip D. Marella Trustee	20.00 0.00	Х						0	0	0
(2) Andrea M. Marella	30.00							0	U	<u> </u>
Trustee	0.00	Χ						0	0	0
(3) Norman Bryn	5.00									
Trustee	0.00	Χ						0	0	0
(4)										
(5)										
<u>(6)</u>										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										_

	(A) Name and title	(B) Average hours per week (list any	Position (do not check more than coox, unless person is both officer and a director/trust					n an tee)	( <b>D</b> ) Reportable compensation from	(E) Reporta compens from rela	able sation	ar	(F) Estimated amount of other	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organiza (W-2/1099	com fr org an	ipensation the lanization direlated	on d	
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b c	Sub-total								0		0			0
d	Total (add lines 1b and 1c).								0		0			0
2	Total number of individuals (including but not I reportable compensation from the organization	imited to those I	listed	abo	ve)	) wh			ed more than \$1	00,000 of	f			
3	Did the organization list any <b>former</b> officer, di	ector, or trustee	e, key	em	plo	yee	, or h	igh	est compensate	d			Yes	No
	employee on line 1a? If "Yes," complete Sche	dule J for such i	indivi	dual	١.							3		Χ
4	For any individual listed on line 1a, is the sum													
	the organization and related organizations gre individual						-			sucn 		4		Χ
5	Did any person listed on line 1a receive or acc for services rendered to the organization? <i>If</i> "	rue compensati	on fro	om a	any	unr	elate	d o	rganization or in					
Sec	tion B. Independent Contractors	res, complete s	301160	Juic	J	01 3	исп р	<i>JE1</i> 3	5011		<u>·</u>	5		X
1	Complete this table for your five highest comp compensation from the organization. Report contents.											's tax		
	(A) Name and business add	ress							(B) Description of ser	vices	C	( <b>C</b> ) compen		
	N/A													0
											<b>—</b>			<u>0</u> 0
														0
	Total country of the desired of the	alliand ( )							>					0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the	•	nited 1 ►	o th	ose	e IIS	ted a 0	VOQ	re) wno received	l				

Part VIII Statement of Revenue

		Check if Schedule O contains a response to any question in	this Part VIII			🔲
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
s, s	1a	Federated campaigns				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues				
	С	Fundraising events				
ìifts ar A	d	Related organizations				
imil	е	Government grants (contributions) 1e 0				
tion er S	f	All other contributions, gifts, grants, and				
ibut		similar amounts not included above 1f 27,935				
onti nd (	g	Noncash contributions included in lines 1a-1f: \$ 0				
a C	h	<b>Total.</b> Add lines 1a–1f ▶	275,981			
ē		Business Code				
enu	2a		0			
Rev	b		0			
ce	С		0			
ervi	d		0			
m S	e		0			
Program Service Revenue	f	All other program service revenue	0			
Pro	g	<b>Total.</b> Add lines 2a–2f	0			
	3	Investment income (including dividends, interest, and	-			
		other similar amounts)	448			
	4	Income from investment of tax-exempt bond proceeds	0			
	5		0			
		Royalties				
	6a	Gross rents				
	b	Less: rental expenses				
	C	Rental income or (loss) 0 0				
	d	Net rental income or (loss)	0			
	-	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory . 0 0				
	b	Less: cost or other basis				
		and sales expenses 0 0				
	С	Gain or (loss) 0 0				
	d	Net gain or (loss)	0			
Other Revenue	8a	Gross income from fundraising events (not including \$ 248,046 of contributions reported on line 1c). See Part IV, line 18				
the	b	Less: direct expenses				
Ò		Net income or (loss) from fundraising events	-118,839			
		Gross income from gaming activities.				
		See Part IV, line 19				
	b	Less: direct expenses b				
		Net income or (loss) from gaming activities	0			
		Gross sales of inventory, less				
		returns and allowances a 0				
	h	Less: cost of goods sold b				
		Net income or (loss) from sales of inventory	0			
		Miscellaneous Revenue Business Code	J			
•	11a		0			
	b		0			
	C		0			
	d	All other revenue	0			
	e	Total. Add lines 11a–11d	0			
	12	Total revenue See instructions	157 590	0	0	

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).	
Check if Schedule O contains a response to any question in this Part IX	

	Officer if Confedure C contains a response to arry	44000001111111101141			· · · <u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	133,650	133,650		
2	Grants and other assistance to individuals in the	,	,		
	United States. See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions).	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees):				
а	Management	0			
b	Legal	0			
С	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column	-			
-	(A) amount, list line 11g expenses on Schedule O.)	0			
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	81			81
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0	_		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	SOAR Research related expenses	57	57		
b	Entertainment Deposit	20,000			20,000
C	Printing/Postage	1,049		278	771
d	Bank and credit card fees	2,120			2,120
	All other expenses	175		100	75
25	Total functional expenses. Add lines 1 through 24e .	157,132	133,707	378	23,047
26	Joint costs. Complete this line only if the	, -	, -	-	,
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				
	, ,				

		Check if Schedule O contains a response to any question in this Part X .			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,589	1	144
	2	Savings and temporary cash investments	266,024	2	267,927
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ξ		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	0	8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
	100	other basis. Complete Part VI of Schedule D 10a 0			
	b	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	267,613	16	268,071
	17	Accounts payable and accrued expenses	201,010	17	200,011
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ś	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
ē		disqualified persons. Complete Part II of Schedule L	0	22	0
Ë	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete			
		Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow SFAS 117 (ASC 958), check here ▶ and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets		27	
3ale	28	Temporarily restricted net assets		28	
d E	29	Permanently restricted net assets		29	
Ë					
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), check here			
ets	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
žΑ	32	Retained earnings, endowment, accumulated income, or other funds	267,613	32	268,071
ž	33	Total net assets or fund balances	267,613	33	268,071
	3/1	Total liabilities and not assets/fund balances	267 613		268 071

Part	Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI				. [	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			157	,590
2	Total expenses (must equal Part IX, column (A), line 25)	2			157	,132
3	Revenue less expenses. Subtract line 2 from line 1	3				458
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			267	,613
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10			268	,071
Part					Г	
	Check if Schedule O contains a response to any question in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		_			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Doth consolidated and separate basis		_			
b	Were the organization's financial statements audited by an independent accountant?			2b		Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis		_			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?			3a		Χ
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				Ī	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2012)

#### **SCHEDULE A** (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

►See separate instructions.

Open to Public Inspection

		organization	ob Truot						Employe	r identificat			
Par		ngels Researd <b>Reason</b>		arity Status (All org	anizatio	ns must (	complete	this par	t ) See in		<u>528048</u> ns		
	_			ation because it is: (Fo						1011 401101	10.		
1			•	rches, or association o		-		-		).			
2		A school des	scribed in <b>section</b>	on 170(b)(1)(A)(ii). (At	ttach Sch	edule E.)							
3		A hospital or	a cooperative h	nospital service organiz	zation des	scribed in	section	170(b)(1)	(A)(iii).				
4		A medical re	search organiza	ation operated in conju	nction wit	th a hospit	tal describ	oed in se	ction 170	(b)(1)(A)	(iii). En	ter the	
		hospital's na	me, city, and sta	ate:									
5		-	-	the benefit of a collect (Complete Part II.)	ge or univ	ersity own	ed or ope	erated by	a governr	nental un	it descr	ibed	
6		A federal, sta	ate, or local gov	ernment or governmer	ntal unit d	escribed i	n <b>sectio</b> i	n 170(b)(ʻ	1)(A)(v).				
7	Χ			y receives a substantia (1)(A)(vi). (Complete l		its suppor	t from a g	overnme	ntal unit o	r from the	e genera	al publi	С
8		A community	trust described	l in <b>section 170(b)(1)</b>	( <b>A)(vi).</b> (C	Complete F	Part II.)						
9		receipts from support from	n activities relate gross investme	y receives: (1) more the doto its exempt function and unrelated after June 30, 1975.	ons—subj ed busine	ect to cert ess taxabl	ain excep e income	otions, and (less sec	d (2) no m tion 511 ta	ore than	33 1/39	% of its	
10		An organizat	tion organized a	nd operated exclusive	ly to test	for public	safety. Se	ee <b>sectio</b>	n 509(a)(	4).			
11 e f g		purposes of 509(a)(3). Cla Type  By checking persons other 509(a)(1) or If the organization. Since Augus following per (i) A person and (iii	one or more put heck the box that I b T this box, I certifier than foundation section 509(a)(2 action received a check this box at 17, 2006, has soons?  Ton who directly it below, the government of the control of the	y that the organization on managers and othe 2).  a written determination the organization acceptor indirectly controls, everning body of the support or indirectly controls.	izations d if supporti is III—Func is not co r than one in from the pted any g either alor pported o	escribed in ing organitionally in introlled die or more IRS that	n section zation and tegrated rectly or in publicly s it is a Typ tribution fi ther with n?	509(a)(1) d complet d	or section or section of lines 11  ype III–Noy one or organizate  II, or Type  of the  described	n 509(a)( e through on-function more disc ions desc e III supp in (ii)	2). See n 11h. onally in qualified cribed in orting	section sectio	ed
		• •	•	person described in (i)							11g(ii)		
				y of a person describe							11g(iii)		
<u>h</u> (i)		Provide the f	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the of in col. (i) Ii governing	organization sted in your document?	(v) Did y the organ col. (i) sup	ou notify nization in of your port?	organiza (i) organ U.	Is the tion in col. zed in the S.?	(vii) An	nount of mo support	onetary
<b>/ A \</b>					Yes	No	Yes	No	Yes	No			
(A)													
(B)													
(C)													
(D)													
(E)													
Tate													^

Schedule A (Form 990 or 990-EZ) 2012 Dana's Angels Research Trust

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	ion A. Public Support	<u> </u>					
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	58,116	154,787	342,055	251,576		806,534
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	58,116	154,787	342,055	251,576	0	806,534
5	The portion of total contributions by each						
	person (other than a governmental unit						
	or publicly supported organization)						
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,						470 700
•	column (f)						176,792
6	Public support. Subtract line 5 from line 4.						629,742
	ion B. Total Support	(-) 0000	(I-) 0000	(-) 0040	(-1) 0044	(-) 0040	(f) T-4-1
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	58,116	154,787	342,055	251,576	0	806,534
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar	0.000	2.42	400	500		0.504
_	sources	6,622	946	463	500		8,531
9	Net income from unrelated business						
	activities, whether or not the business is						0
10	regularly carried on						0
10	loss from the sale of capital assets						
	(Explain in Part IV.)						0
11	<b>Total support.</b> Add lines 7 through 10						815,065
12	Gross receipts from related activities, etc. (s	ee instructions)				12	010,000
13	<b>First five years.</b> If the Form 990 is for the or						(3)
. •	organization, check this box and <b>stop here</b>						
Soct	ion C. Computation of Public Support						
14	Public support percentage for 2012 (line 6, c		ad by line 11 c	rolumn (f))		14	77.26%
15	Public support percentage from 2011 Sched	ule A Part II lii	ne 14	olamii (i))			0.00%
16a	33 1/3% support test—2012. If the organization						
·ou	and <b>stop here</b> . The organization qualifies as						
b	33 1/3% support test—2011. If the organization						
	box and <b>stop here</b> . The organization qualified						
17a	10%-facts-and-circumstances test—2012						
174	is 10% or more, and if the organization meet						
	Part IV how the organization meets the "fact						
	organization			•		, , , ,	
b	10%-facts-and-circumstances test—2011						
~	15 is 10% or more, and if the organization m						
	Part IV how the organization meets the "fact					•	12.200.000
	supported organization			•	•	•	▶□
18	<b>Private foundation.</b> If the organization did r						
	instructions						▶□
							· · · · •

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

800	tion A Dublic Cumpart	der the tests	noted below,	picase comp	icto i ait ii.j		
	tion A. Public Support	(=) 2009	(h) 2000	(a) 2010	(4) 2011	(-) 2012	(f) Total
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 7a	Total. Add lines 1 through 5	0	0	0	0	0	0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
8 8	Add lines 7a and 7b	0	0	0	0	0	0
500	tion B. Total Support						0
	endar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Caic	ildar year (or fiscar year beginning iii)	(a) 2000	(b) 2009	(6) 2010	(u) 2011	(6) 2012	(i) iotai
9 10a	Amounts from line 6	0	0	0	0	0	0
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
с 11	Add lines 10a and 10b	0	0	0	0	0	0
12	or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets						0
13	(Explain in Part IV.)	0	0	0	0	0	0
14	First five years. If the Form 990 is for the organizate	tion's first, secon	nd, third, fourth,		s a section 501(	c)(3)	▶□
Sec	tion C. Computation of Public Support P	Percentage					
15	Public support percentage for 2012 (line 8, column (		e 13. column (f))	1		15	0.00%
16	Public support percentage from 2011 Schedule A, F					16	0.00%
Sec	tion D. Computation of Investment Incor	me Percenta	ge				
17	Investment income percentage for 2012 (line 10c, co		-			17	0.00%
18	Investment income percentage from 2011 Schedule					18	0.00%
19a b	33 1/3% support tests—2012. If the organization d not more than 33 1/3%, check this box and stop he 33 1/3% support tests—2011. If the organization d line 18 is not more than 33 1/3%, check this box and	e <b>re.</b> The organization of the contract of the	ation qualifies as ox on line 14 or	s a publicly suppo line 19a, and line	orted organizatio e 16 is more thar	n n 33 1/3%, and	▶□
20	Private foundation. If the organization did not chec						· · · · <b>[</b>

#### **SCHEDULE G** (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Inspection Employer identification number

Dana	's Angels Research Trust					51-652	
Par	Fundraising Activities. Co				ered "Yes" to Forr	n 990, Part IV, lin	e 17.
1	Form 990-EZ filers are not Indicate whether the organization ra				ving activities. Chec	k all that apply	
' a	X Mail solicitations	aisea iurias tiric	_		of non-government		
b	Internet and email solicitations		=		of government gran	=	
C	Phone solicitations		=		raising events		
d	In-person solicitations		<b>5</b>		3		
2a	Did the organization have a written	or oral agreem	ent with a	ny individua	al (including officers	s, directors, trustees	s or
	key employees listed in Form 990, I						Yes X No
b	If "Yes," list the ten highest paid ind	ividuals or entit	ies (fundr	aisers) purs	suant to agreement	s under which the f	undraiser is
	to be compensated at least \$5,000	by the organiza	ition.				
			1	1			
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody	ndraiser have or control of butions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
			Yes	No		col. <b>(i)</b>	organization
1			162	NO			
					0	0	0
2					0	0	0
3					-		
4					0	0	0
5					0	0	0
					0	0	0
6					0	0	0
7					0	0	0
8					U	0	<u> </u>
9					0	0	0
					0	0	0
10					0	0	0
Total					0	0	0
Total 3	List all states in which the organizat				•	as been notified it is	
•	registration or licensing.	.ion io rogiotoro	G 01 1100110	, ou to como			o oxompt nom
CT							

Pa	art I					-
		more than \$15,000 of t			come on Form 990-EZ	, lines 1 and 6b. List
		events with gross rece			<del> </del>	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Natalie Cole Gala (event type)	(event type)	NONE (total number)	(add col. <b>(a)</b> through col. <b>(c)</b> )
Э			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	311,701		0	311,701
ď	2	Less: Contributions	248,046		0	248,046
	3	Gross income (line 1 minus line 2)	63,655		0	63,655
	4	Cash prizes			0	0
	5	Noncash prizes			0	0
enses	6	Rent/facility costs	3,375		0	3,375
Direct Expenses	7	Food and beverages	8,325		0	8,325
Direc	8	Entertainment	149,433		0	149,433
	9	Other direct expenses	21,361		0	21,361
	10 11	,				( 182,494) -118,839
Pa	ırt II	I Gaming. Complete if t	he organization answe	red "Yes" to Form 990	D. Part IV. line 19. or re	
		than \$15,000 on Form	_		, ,	
nue		. ,	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue				0
ses	2	Cash prizes				0
Direct Expenses	3	Noncash prizes				0
irect E	4	Rent/facility costs				0
	5	Other direct expenses				0
	6	Volunteer labor	☐ Yes <u>%</u>	Yes <u>%</u> No	☐ Yes <u>%</u>	
	7	Direct expense summary. Ad	d lines 2 through 5 in col	umn (d)		( 0)
	8	Net gaming income summary	. Combine line 1, column	d, and line 7		0
	a l	Enter the state(s) in which the or s the organization licensed to or f "No," explain:	perate gaming activities in	n each of these states?		Yes No
4.0	a \	Were any of the organization's g				<del></del>

scriedi	ule G (Form 990 of 990-EZ) 2012 Dana's Angels Research Trust	51-00	28048	Page 3
11	Does the organization operate gaming activities with nonmembers?	[	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	[	Yes	No
13	Indicate the percentage of gaming activity operated in:			_
а		13a		%
b	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	;		
	Name ▶			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	$\Gamma$	Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶\$0 and the			<u> </u>
	amount of gaming revenue retained by the third party $ ightharpoonup$ \$0 .			
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address ►			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ► \$0			
	Description of services provided ►			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	_	_	<u> </u>
			Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations			0
Part	or spent in the organization's own exempt activities during the tax year   Supplemental Information. Complete this part to provide the explanations required by F	art I lin	e 2h cc	olumne
ı aıı	(iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also comp			numms
	provide any additional information (see instructions).		po 1 10	
	Line 2b is not applicable.			
Part I	III Line 9, 9b, 10b, 15b, 15c, 16 and 17b are not applicable.			

#### SCHEDULE I (Form 990)

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2012

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Open to Public Inspection

Name of the organization						Employer identi	fication number
Dana's Angels Research Trust						5	1-6528048
Part I General Information	on on Grants a	and Assistance					
	award the gran nization's proced <b>Assistance to</b>	ts or assistance? . dures for monitoring Governments a	g the use of grant funds  Ind Organizations ir	s in the United States the United State		anization answere	. X Yes No
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Washington University One Brookings Drive	43-0653611		91,250				Medical Research
(2) Albert Einstein Coll. of Medicine 1410 Pelham Pkwy S.	13-1624225		30,000				Medical Research
(3) Washington & Lee University 203 W. Washington St.	54-0505977		12,400				Medical Research
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
<ul><li>2 Enter total number of section</li><li>3 Enter total number of other of</li></ul>		-					→ <u>3</u>

51-6528048

Schedule I (Form 990) (2012)

	_
Page	2

Part III	Grants and Other Assistance to In	dividuals in the	United States. Con	nplete if the organiza	ation answered "Yes" to	Form 990, Part IV, line 22.
	Part III can be duplicated if additiona					
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						
Part IV	<b>Supplemental Information.</b> Complet information.	e this part to prov	ide the information r	equired in Part I, line	e 2, Part III, column (b), a	nd any other additional
Part I Line	2 All grants are approved by the trustees of	of the organization.	All recipients are requ	ired to keep detailed f	inancial and	
	formation as to the use of funds provided					
	s of the grant. Grant recipients are require					
	ments of the project and a final accounting					
accomplian		Joi the use of all lu	100.			

#### **SCHEDULE O** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012
Open to Public
Inspection

Employer identification number

Dana's Angels Research Trust	51-6528048	
Form 990 Part VI Section A Line 2 Yes, Philip Marella and Andrea Marella are husband and wif	e.	
Form 990 Part VI Section B Line 11b Dana's Angels Research Trust circulates a draft copy of		
its Form 990 and scheules to all trustees for review and approval prior to filing.		
Form 990 Part VI Section B Line 12c Dana's Angels Research Trust annually distributes a copy		
of its conflict of interest policy to the trustees and key volunteers.		
Form 990 Part VI Section C Line 19 Dana's Angels Research Trust makes its governing documents.		
conflict of interest policy and financial statements available to the public in downloadable		
form on its web site and/or upon request.		

Schedule O (Form 990 or 990-EZ) (2012)	Page <b>2</b>
Name of the organization	Employer identification number
Dana's Angels Research Trust	51-6528048

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

		Cash	Noncash
1 Federated Campaigns	1		<u> </u>
2 Membership dues	. 2		
3 Fundraising events		248,046	
4 Related organizations			
<b>5</b> Government grants (contributions)	5		
<b>6</b> All other contributions, gifts, grants, and similar amounts not included above:			
General Donations	_	27,935	
	_		
	_		
Other contributions total		07.005	
Other contributions total	ь	27,935	0
<b>7</b> Total	. 7	275,981	0