See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

For calendar year 2013 or other tax year beginning 01/01/2013, and ending 12/31/2013.

Name: ITHAKA HARBORS, INC.
Number, street, and room or suite no: 151 EAST 61ST STREET
City or town, state or province, country, and ZIP or foreign postal code: NEW YORK, NY 10065

Employer identification number: 13-3857105

Unrelated business activity codes:

Check organization type: X 501(c) corporation

Group exemption number (See instructions)

Describe the organization's primary unrelated business activity:

During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?: No

The books are in care of: CHRIS VANACORE

Unrelated Trade or Business Income

1a. Gross receipts or sales

2. Cost of goods sold (Schedule A, line 7)

3. Gross profit: Subtract line 2 from line 1c.

4a. Capital gain net income (attach Form 8949 and Schedule D)

4b. Net gain (loss) (Form 7097, Part II, line 17) (attach Form 7097)

4c. Capital loss deduction for trusts

5. Income (loss) from partnerships and S corporations (attach statement)

6. Rent income (Schedule C)

7. Unrelated debt-financed income (Schedule E)

8. Interest, annuities, royalties, and rents from controlled organizations (Schedule F)

9. Investment income of a section 501(c)(7), (9), or (17) organization (Schedule Q)

10. Exploited exempt activity income (Schedule I)

11. Advertising income (Schedule J)

12. Other income (See instructions, attach schedule)

13. Total, Combine lines 3 through 12

Deductions Not Taken Elsewhere

14. Compensation of officers, directors, and trustees (Schedule K)

15. Salaries and wages

16. Repairs and maintenance

17. Bad debts

18. Interest (attach schedule)

19. Taxes and licenses

20. Charitable contributions (See instructions for limitation rules)

21. Depreciation (attach Form 4562)

22. Less depreciation claimed on Schedule A and elsewhere on return

23. Depletion

24. Contributions to deferred compensation plans

25. Employee benefit programs

26. Excess exempt expenses (Schedule I)

27. Excess readership costs (Schedule J)

28. Other deductions (attach schedule)

29. Total deductions. Add lines 14 through 28

30. Unrelated business taxable income before net operating loss deduction: Subtract line 29 from line 13

31. Net operating loss deduction (limited to the amount on line 30)

32. Unrelated business taxable income before specific deduction: Subtract line 31 from line 30

33. Specific deduction (Generally $1,000, but see line 33 instructions for exceptions)

34. Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32.

Date of receipt: NOV 17 2014

For Paperwork Reduction Act Notice, see instructions.

JSA
3E1610 1 000

Form 990-T (2013)

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Form 990-T (2013)  ITHAKA HARBORS, INC.  13-3857105  Page 2

Part III  Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation Controlled group members (sections 1561 and 1563) check here. See instructions and

a Enter your share of the $50,000, $250,000, and $9,925,000 taxable income brackets (in that order) $ (1) $ (2) $ (3) $

b Enter organization's share of (1) Additional 5% tax (not more than $11,750), $ (2) Additional 3% tax (not more than $100,000), $

c Income tax on the amount on line 34 $ 35c

36 Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on the amount on line 34 $ Tax rate schedule or Schedule D (Form 1041). $ 36

37 Proxy tax See instructions $ 37

38 Alternative minimum tax $ 38

39 Total Add lines 37 and 38 to line 35c or 36, whichever applies $ 39

Part IV  Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) $ 40a

b Other credits (see instructions) $ 40b

c General business credit Attach Form 3800 (see instructions) $ 40c

d Credit for prior year minimum tax (attach Form 8801 or 8827) $ 40d

e Total credits Add lines 40a through 40d $ 40e

41 Subtract line 40e from line 39 $ 41

42 Other taxes Check if from Form 2215, Form 8611, Form 8697, Form 8848 Other (attach schedule) $ 42

43 Total tax Add lines 41 and 42 $ 43

44 a Payments A 2012 overpayment credited to 2013 $ 44a

b 2013 estimated tax payments $ 44b

c Tax deposited with Form 8858, $ 44c

d Foreign organizations Tax paid or withheld at source (see instructions) $ 44d

e Backup withholding (see instructions) $ 44e

f Credit for small employer health insurance premiums (Attach Form 8941) $ 44f

g Other credits and payments Form 2439 $ 45

45 Total payments Add lines 44a through 44g $ 45

46 Estimated tax penalty (see instructions) Check if Form 2220 is attached $ 46

47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed $ 47

48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid $ 48

49 Enter the amount of line 48 you want. Credited to 2014 estimated tax $ Refunded $ 49

Part V  Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2013 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If yes, the organization may have to file Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. If yes, enter the name of the foreign country here $ 1

2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? $ 2

3 Enter the amount of tax-exempt interest received or accrued during the tax year $ 3

Schedule A - Cost of Goods Sold. Enter method of inventory valuation $ 4

1 Inventory at beginning of year $ 1

2 Purchases $ 2

3 Cost of labor $ 3

4a Additional section 263A costs (attach schedule) $ 4a

4a Part I, line 2 $ 4a

4b Other costs (attach schedule) $ 4b

5 Total. Add lines 1 through 4b $ 5

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete (declaration of preparer other than taxpayer) is based on all information of which preparer has any knowledge $ 6

Sign Here $ 11-12-14 President $ 7

Signature of officer $ 8

Title $ 9

Paid Preparer Use Only

Print/Type preparer's name $ 10

Preparer's signature $ 11

Date $ 12

Check (if self-employed) $ 13

PTIN $ 14

Firm's EIN $ 15

Firm's name $ 16

Firm's address $ 17

Phone no $ 18

New York, NY 10017-2703 $ 19


4890CC L161 11/10/2014 10:49:26 AM V 13-7.5F
Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

<table>
<thead>
<tr>
<th></th>
<th>(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)</th>
<th>(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)</th>
<th>3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Total

Total

(c) Total Income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A).

Schedule E - Unrelated Debt-Financed Income (see instructions)

<table>
<thead>
<tr>
<th>1</th>
<th>Description of debt-financed property</th>
<th>2</th>
<th>Gross income from or allocable to debt-financed property</th>
<th>3</th>
<th>Deductions directly connected with or allocable to debt-financed property</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(a) Straight line depreciation (attach schedule)</td>
<td>(b) Other deductions (attach schedule)</td>
<td></td>
<td></td>
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</tbody>
</table>

Enter here and on page 1, Part I, line 7, column (A).

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

<table>
<thead>
<tr>
<th>1</th>
<th>Name of controlled organization</th>
<th>2</th>
<th>Employer identification number</th>
<th>3</th>
<th>Net unrelated income (loss) (see instructions)</th>
<th>4</th>
<th>Total of specified payments made</th>
<th>5</th>
<th>Part of column 4 that is included in the controlling organization's gross income</th>
<th>6</th>
<th>Deductions directly connected with income in column 5</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

Add columns 5 and 10, Enter here and on page 1, Part I, line 8, column (A).
### Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

<table>
<thead>
<tr>
<th>1 Description of income</th>
<th>2 Amount of income</th>
<th>3 Deductions directly connected (attach schedule)</th>
<th>4 Set-asides (attach schedule)</th>
<th>5 Total deductions and set-asides (col 3 plus col 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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</tbody>
</table>

Enter here and on page 1, Part I, line 9, column (A)

Enter here and on page 1, Part I, line 9, column (B)

### Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

<table>
<thead>
<tr>
<th>1 Description of exploited activity</th>
<th>2 Gross unrelated business income from trade or business</th>
<th>3 Expenses directly connected with production of unrelated business income</th>
<th>4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7</th>
<th>5 Gross income from activity that is not unrelated business income</th>
<th>6 Expenses attributable to column 5</th>
<th>7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td>(4)</td>
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</tbody>
</table>

Enter here and on page 1, Part I, line 10, col (A)
Enter here and on page 1, Part I, line 10, col (B)
Enter here and on page 1, Part II, line 26

### Schedule J - Advertising Income (see instructions)

#### Part I Income From Periodicals Reported on a Consolidated Basis

<table>
<thead>
<tr>
<th>1 Name of periodical</th>
<th>2 Gross advertising income</th>
<th>3 Direct advertising costs</th>
<th>4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7</th>
<th>5 Circulation income</th>
<th>6 Readership costs</th>
<th>7 Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td>(4)</td>
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</tr>
</tbody>
</table>

Totals (carry to Part II, line (5))

#### Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

<table>
<thead>
<tr>
<th>1 Name of periodical</th>
<th>2 Gross advertising income</th>
<th>3 Direct advertising costs</th>
<th>4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7</th>
<th>5 Circulation income</th>
<th>6 Readership costs</th>
<th>7 Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td>(4)</td>
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</tr>
</tbody>
</table>

Totals from Part I

Enter here and on page 1, Part I, line 11, col (A)
Enter here and on page 1, Part I, line 11, col (B)
Enter here and on page 1, Part II, line 27

Totals, Part II (lines 1-5)

### Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

<table>
<thead>
<tr>
<th>1 Name</th>
<th>2 Title</th>
<th>3 Percent of time devoted to business</th>
<th>4 Compensation attributable to unrelated business</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
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<td>%</td>
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</tr>
<tr>
<td>(3)</td>
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</tr>
<tr>
<td>(4)</td>
<td></td>
<td>%</td>
<td></td>
</tr>
</tbody>
</table>

Total. Enter here and on page 1, Part II, line 14.
ITHAKA HARBORS, INC. PROVIDES SHARED ADMINISTRATIVE SERVICES TO TWO NOT-FOR-PROFIT ORGANIZATIONS UNDER A MASTER SERVICES AGREEMENT. IN 2013, THE UNRELATED BUSINESS INCOME ATTRIBUTABLE TO THESE SERVICES WAS $763,505. ADDITIONALLY, ITHAKA CONTRACTS WITH A FULLFILLMENT HOUSE TO SELL "JSTOR" BRANDED MERCHANDISE. ITHAKA RECEIVED $2,379 IN 2013, REPRESENTING A PERCENTAGE OF SALES GENERATED THROUGH THE FULLFILLMENT HOUSE.
PART I - LINE 12 - OTHER INCOME

SHARED SERVICES INCOME 763,505.
MERCHANDISE SALES INCOME 2,379.

PART I - LINE 12 - OTHER INCOME 765,884.
FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>DIRECT EXPENSES RELATED TO SHARED ADMIN SERVICES</td>
<td>203,453</td>
</tr>
<tr>
<td>OVERHEAD COST - INDIRECT EXPENSES</td>
<td>91,436</td>
</tr>
<tr>
<td>ADMINISTRATIVE EXPENSES - INDIRECT EXPENSES</td>
<td>65,213</td>
</tr>
</tbody>
</table>

**PART II - LINE 28 - OTHER DEDUCTIONS**  

360,102
ITHAKA HARBORS, INC.
FORM 990T
DECEMBER 31, 2013
EIN #13-3857105

NET OPERATING LOSS CARRYFORWARD FROM:

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/30/2008</td>
<td>$80,951</td>
</tr>
<tr>
<td>12/31/2009</td>
<td>26,125</td>
</tr>
<tr>
<td>12/31/2010</td>
<td>145,677</td>
</tr>
<tr>
<td>12/31/2011</td>
<td>200,511</td>
</tr>
<tr>
<td>12/31/2012</td>
<td>141,446</td>
</tr>
</tbody>
</table>

NOL AVAILABLE FOR 12/31/2012 $594,710

ADD: 12/31/2013 $146,853

NOL AVAILABLE FOR 12/31/2013 $741,563
Application for Extension of Time To File an Exempt Organization Return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ...
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/eFile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only...

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions.

Name of exempt organization or other filer, see instructions.

ITHAKA HARBORS, INC.

Employer identification number (EIN) or

13-3857105

Number, street, and room or suite no. If a P.O. box, see instructions

Social security number (SSN)

151 EAST 61ST STREET

City, town or post office, state, and ZIP code For a foreign address, see instructions.

NEW YORK, NY 10065

Enter the Return code for the return that this application is for (file a separate application for each return) ... 07

Application Is For

Return Code Application Is For

Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07
Form 990-BL 02 Form 1041-A 08
Form 4720 (individual) 03 Form 4720 (other than individual) 09
Form 990-PF 04 Form 5227 10
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11
Form 990-T (trust other than above) 06 Form 8870 12

The books are in the care of

CHRIS VANACORE

Telephone No. 212 358-6483 FAX No. 212 358-6491

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)...

If this is for the whole group, check this box...

If it is for part of the group, check this box...

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.

3b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

3c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8543-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.