

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



SCANNED FEB 1 0 20

Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

2008

For	caler	ndar year 2008, or tax year beginning J	JUI	1, 2008		, and ending	JUN 30, 2009	
G (<u>Check</u>	call that apply: Initial return		Final return		Amended return	Address change	Name change
lles	the	IRS Name of foundation					A Employer identification	number
	abel							
Oth	nerwi	se, ONE LIFE AT A TIME,		INC.			20-8101668	
	print	1	not d	lelivered to street address)		Room/suite	B Telephone number	
	r type		<u> </u>	104			781-681-70	03
	Spe ruction	I I'IN/ OF TOWN CISTS SHE /ID COMS					C if exemption application is p	ending, check here
		ROCKLAND, MA 02370)				D 1. Foreign organizations	s, check here >
H C	Check	c type of organization: X Section 501(c)	(3) e	xempt private foundati	on		Foreign organizations me check here and attach co	eting the 85% test, putation
] Se	ection 4947(a)(1) nonexempt charitable trust		Other taxable private	ound	ation	E If private foundation sta	
I Fa	air ma	arket value of all assets at end of year 🛭 J 🛮 Acc	ount	ting method: 🏻 🕱 (ash	Accrual	under section 507(b)(1)	(A), check here >
(fi	rom i	Part II, col. (c), line 16)	□ 0	ther (specify)			F If the foundation is in a	60-month termination
_	<u> \$ </u>	1,476,448. (Part I,	colu	ımn (d) must be on	cash	basis.)	under section 507(b)(1)	(B), check here . >
Pa	<u>irit l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may necessarily equal the amounts in column (a).)	not	(a) Revenue and expenses per boo		(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			0.	La Company of the Com	The second secon	高祖 法加强 建作品
	2	Check X if the foundation is not required to attach Sch				Fire per la servicione de	· 医神经性病 可以	
	3	Interest on savings and temporary cash investments		10,92		10,921.		STATEMENT 2
	4	Divide a decrea di internati forma a constituta		23,33		23,330.		STATÉMENT . 3
	5a					20,000	25,755	
	Ь			10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	N E 21	19 19 19 19 19 19 19 19 19 19 19 19 19 1	The state of the s	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
•	6a	NIA		-1,89			2. 2.2.1.1.1.1	STATEMENT . 1.
J.	Ь	Gross sales price for all assets not on line for a assets not on line for a l		·大学与最大小人		11、11的人们的	The state of the s	就是是的数 3. 10°
Revenue	7	Capital gain net income (from Part IV, line 2)		The state of the	7.	0.	5 5 5 1 10 E M 1	等 " "等。
ď	8	Net short-term capital gain		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	• 3		0.	企业的关系的
	9	Income modifications		70 12 150	٠.	1. 中心 ·		於學的是就是了家
	10a	Gross sales less returns and allowances		融资、发验人。工作	.*(* <u>5</u>)	いいというというなかった		學的關鍵學與語
	Ь	Less' Cost of goods sold .			, , ,	EN TO SHOW THE	Sis Pignors	行、持續整理的過程的
	C	Gross profit or (loss)				1、一門衛星軍分門性		では、東京教育者では、
	11	Other income						超過後數學
	12	Total. Add lines 1 through 11		32,3	<u> 53.</u>	34,251.	34,251.	是一個發展的
	13	Compensation of officers, directors, trustees, etc	-		0.	0.	0.	0.
	14	Other employee salaries and wages		238,0	<u>74.</u>	0,	0.	238,074.
s	15	Pension plans, employee benefits						
penses		Legal fees STMT 4		2,98		0.	0.	2,985.
þe	ı	Accounting fees		5,09) 7.	0.	0.	5,097.
Ж		Other professional fees						
tive	17							
Operating and Administrative	18	Taxes STMT 6		24,6		0.	0.	24,656.
Ë	19	Depreciation and depletion		13,32		0.	13,326.	on with the first of the
Ē	20	Occupancy		35,76	3.	0.	0.	<u>35,763.</u>
ΔÞ	21	Travel, conferences, and meetings						
Ē	22	Printing and publications		62 75	7.0			62 556
ting	23	Other expenses STMT 7		63,77	/ b .	0.	0.	63,776.
era.	24	Total operating and administrative		202 6	7 -7	_	12 226	270 254
Ö		expenses. Add lines 13 through 23		383,67) [13,326.	370,351.
	25	Contributions, gifts, grants paid	• •	1,04	<u></u>	THE PROPERTY OF THE	**************************************	1,025.
	26	Add lines 24 End 25 F. 1 / F. 1		384,70	12	0.	13,326.	371,376.
	27	Subtract line 26 from line 12:		304,7			13,340 ·	
	د ' ا	E DE LA COMPANIA DEL COMPANIA DEL COMPANIA DE LA CO		-352,34				
	h	Excess of revenue pyer expenses and disburgaments Net divestment income (irnegative, entergo.)	•••	The Constant of the	•	34,251.	an and the same of the same of the	The way to the work of the wor
	c	Adjusted net income (if negative, enter 197)	• • •	E STATE OF THE STA	2 2 2	The state of the s	20 925	The state of the s
	<u> </u>	LHA FOR PROMADANA Papervork Redu	ctio =	44.7 6.10.1				Form 990-PF (2008)

20-8101668

Page 2

Form 990-PF (2008)

Form 990-PF (2008)

Part IV Capital Gallis	and Losses for Tax on in	1462011611	i income						
(a) List and desc 2-story brick wa	ribe the kind(s) of property sold (e.g arehouse; or common stock, 200 sh	., real estate, s. MLC Co.)		(b) H	low acquir Purchase Donation	ed (c) Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a UNITED STATES TREASURY NOTE					P		ARIOUS	04/15/09	
<u>b</u>									
<u>C</u>				 -					
e e		 							
1	(f) Depreciation allowed	(a) Cos	st or other basis	┸			(h) Gain or (loss	<u> </u>	
(e) Gross sales price	(or allowable)		xpense of sale			(e) plus (f) minus	(g)	
a 250,000.			251,89	8.				-1,898.	
<u>b</u>									
C		ļ							
<u>d</u>				\rightarrow					
Complete only for assets showing	ng gain in column (h) and owned by	the foundation	on 12/31/69			(I) G	ains (Col. (h) gain	minue	
	(j) Adjusted basis		cess of col. (i)			cól. (k), but not less tha	n -0-) or	
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any			L	osses (from col.	(h))	
a								-1,898.	
b					-			·	
C									
d e									
	C If gain, also enter	r in Dart I line	7	<u> </u>					
2 Capital gain net income or (net ca	If gain, also enter If (loss), enter -0	- ın Part I, line	, 7	. <i>}</i> L	2			-1,898.	
3 Net short-term capital gain or (los	`						_		
If gain, also enter in Part I, line 8,		(-)-		}	ŀ				
If (loss), enter -0- in Part I, line 8 Part Va Qualification U	Inder Section 4940(e) for	Paducad	Tay on Not	love	3	t Inco			
(For optional use by domestic private	• • • • • • • • • • • • • • • • • • • •		· · ·		-	it inicol	116		
	·	1310(a) tax on	net mvestment m	icomic.	.,				
If section 4940(d)(2) applies, leave the	his part blank.								
Was the foundation liable for the sec			•	riod?				Yes X No	
If "Yes," the foundation does not qual	lify under section 4940(e). Do not co each column for each year; see instr								
		uctions before	making any enur			-		(d)	
(a) Base period years Calendar year (or tax year beginni	(b) ng in) Adjusted qualifying dis	tributions	Net value of no	(c) nchari	table-use	assets	Distrii (col. (b) de	(d) oution ratio vided by col. (c))	
2007		7,166.		1,899,663.					
2006		3,898.		1,					
2005									
2004				_					
2003							1	-	
2 Total of line 1, column (d)							2	.154083	
3 Average distribution ratio for the	5-year base period - divide the total (on line 2 by 5,	or by the number	of yea	rs			.134003	
	nce if less than 5 years						3	.077042	
4 Enter the net value of noncharitab	ele-use assets for 2008 from Part X,	line 5					4	<u>1,561,575.</u>	
P. Marikanka Ima Albar Can O							_	100 205	
Multiply line 4 by line 3				••••		····· }	5	120,307.	
5 Enter 1% of net investment incom	ne (1% of Part I, line 27b)						6	343.	
Entail 170 of Hot III/Outline Hisoni				••• •• •				343.	
7 Add lines 5 and 6	·····						7	120,650.	
						i			
	n Part XII, line 4					l	8	371,376.	
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1%	6 tax rate.				
oco ale i di e vi libu dellollo.									

_	1990-PF (2008) ONE LIFE AT A TIME, INC.	<u> 20-</u>	<u>8101</u>	<u>.668</u>		Page 4
Pa	rt.VI. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see	instru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	7.7	1	. ".	, c	1.00
	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)		1, 1,			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	ļ <u> </u>		3	43.
	of Part I, line 27b	. •			. /	- 1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		, "			6 - 14
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			3	43.
4	Subtrtle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			3	43.
6	Credits/Payments:	- - -	, 4,, 1,	131	570	2 m 7 m
-	2008 estimated tax payments and 2007 overpayment credited to 2008	ر به ۱	3	۱ را ۱۰ ۱۰ ۱۰ ۱۰ ۱۰ ۱۰ ۱۰ ۱۰ ۱۰ ۱۰ ۱۰ ۱۰ ۱۰	4	6 - 1
	Exempt foreign organizations - tax withheld at source		÷		, A.	2,0
	Tax paid with application for extension of time to file (Form 8868)	10.26	6			
	Backup withholding erroneously withheld 6d	1	P 1 7	37	2. ~ ³ (*	All All
	T. 1			المستخف	ئىدانىڭ ئۇ 0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	7			0	00.
_	The Land Make Andre of Paragon Country at the Paragon State of the Sta	8_	ļ			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9_	 			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			4	<u> 57.</u>
11 De	Enter the amount of line 10 to be: Credited to 2009 estimated tax 457 . Refunded irt VII-A Statements Regarding Activities	11	<u> </u>		_	<u>0.</u>
_				B . 12 1	M	
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		·	res	
	any political campaign?			_1a_		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b	2	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or		WAR.	4 1	1
	distributed by the foundation in connection with the activities.			1000	المتك	18.50
	Did the foundation file Form 1120-POL for this year?			1c	. 1/1/3%	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1	ų K	
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$ 0 .			神	1 3	12.5
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1	112	3
	managers. > \$0.			造堂	in the second	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.			3 13 H	F. 1. 18	M. 3
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	r		المعتما		19
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantal contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.			37-19		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			10 m		1.0
	By language in the governing instrument, or			1 or		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law		15 1	296 * \$2_36644	2.23
	remain in the governing instrument?			6	X	- Country
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.				(, 10,	7.3
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					9.3
	MA			A STATE OF	رائن کرن	1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			1	") به چه د به دنام انگارس ای دنام	認が記
•				8b	_ X	Same of the
9	of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndər				i Ži
•	year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV				X	SE FLB
10	Did any persons become substantial contributors during the tay year?	• • • • • • • • • • • • • • • • • • • •	•••••	9	Λ	v

	990-PF (2008) ONE LIFE AT A TIME, INC.	20-8101	668	Page 5
Pa	rt.VII-A Statements Regarding Activities (continued)	 ,		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		1 1	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11	X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?		12	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х
	Website address ► N/A			· · ·
14	The books are in care of CHRISTINE DRISCOLL O'NEILL Telephone no	. ▶ 781-68	31-70	003
	Located at ▶100 LEDGEWOOD DRIVE #104, ROCKLAND, MA	ZIP+4 ▶02		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	· ·		
	and enter the amount of tax-exempt interest received or accrued during the year	1 5	_N	/A
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		E. 3.	Yes No
1a	During the year did the foundation (either directly or indirectly):		15 m 27 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
		Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		100	
		Yes X No		
		Yes X No		
		Yes X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available		3	7 3
		Yes X No		A
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		[[編]]	
	if the foundation agreed to make a grant to or to employ the official for a period after		\$31	
	termination of government service, if terminating within 90 days.)	Yes X No	it in the	
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	100 [22] 110	200	
•	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	1b	2. 1 a. 1996 2. Asia (1982)
	Organizations relying on a current notice regarding disaster assistance check here		7.83	6 4 1 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		A 4.2.3	
·	before the first day of the tax year beginning in 2008?		1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	n		Tring
-	defined in section 4942(j)(3) or 4942(j)(5)):	•	1 1 1 1	
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn	ina	1 5 18	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
_		Yes X No	1	
	If "Yes," list the years \(\bigs_{}\), \(\),	100 [22] 110	1	
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre	ect		
•	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and atta		9	
	statement - see instructions.)	N/A	2h	Carles Carles
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	44/ 44	3 33	11 July 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
·	>		3, 4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		5 3 5	1 16
00	during the uses?	Yes X No		環構的
h	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified persons		Se. 1.3	
U	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to		15, 7	三十二
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule			AN AL W
	Form 4720, to determine if the foundation had excess business holdings in 2008.)		3b	أشنأه واستعم
An	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4/ 4	4a	V
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo		# a	
U	had not been removed from jeopardy before the first day of the tax year beginning in 2008?	oo mat	4b	X
	the not been removed from people by belone the mot day of the tax year beginning in 20001	<u> </u>	<u> </u>	

4b X Form 990-PF (2008)

orm 990-PF (2008) ONE LIFE AT A TIME, INC.			20-81016	68 Page 6
Part VII-B. Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:			1 1	(2) (2) (1) (2) (n)
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	🗀 Y	es 🔀 No 📙	* '-\:\
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	• • • • • • • • • • • • • • • • • • • •	<u>.</u>	34 7 8 1
any voter registration drive?		· · · · 	s 🗶 No 🤼	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	🗀 Yo	es 🗶 No 🎲	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		L Yo	es 🗶 No 🗀	
(5) Provide for any purpose other than religious, charitable, scientific, literary,				T 18 - 4 4
the prevention of cruelty to children or animals?		—	es 🗶 No 📑	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	•	•	;'i&	
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				
expenditure responsibility for the grant?		Ĭ/A	es Lino	
If "Yes," attach the statement required by Regulations section 53.494	• •		3,7	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to		┌ ─┐	 12	
a personal benefit contract?			1 .	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> </u>	6b X *薬しもき返しいには
If you answered "Yes" to 6b, also file Form 8870.	shallon transport and		. 	
7a At any time during the tax year, was the foundation a party to a prohibited tax s b If yes, did the foundation receive any proceeds or have any net income attribut	sheller transaction?	[] 10	N/A	<u>经债金</u> 资金数据 7b
				70
Part VIII Paid Employees, and Contractors	ecs, i odiladion me	magers, rngm	•	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expense
(a) Name and address	to position	(If not paid, enter -0-)	and deterred compensation	account, other allowances
CHRISTINE DRISCOLL-O'NEILL	PRESIDENT			·
P.O. BOX 2440				
OCEAN BLUFF, MA 02065	10.00	0.	0.	0.
	TREASURER			
P.O. BOX 2440			_	
OCEAN BLUFF, MA 02065	2.00	0.	0.	0.
	ł			
	1			
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
	(b) Title and average	,	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				
		ļ		·
		1		
		 		
Total number of other employees paid over \$50,000	L,	<u> </u>		0
CONTROL DE CONTROL VIII DE LE CONTROL DE LA				1.1

Form 990-PF (2008) ONE LIFE AT A TIME, INC.	20-	8101668 Page 7
Part-VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, er	iter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX÷A Summary of Direct Charitable Activities	<u> </u>	<u> </u>
	1	
List the foundation's four largest direct charitable activities during the tax year. Include relevant standard or organizations and other beneficiaries served, conferences convened, research papers p	atistical information such as the	Expenses
	Todacca, cia	
1 <u>N/A</u>		
<u> </u>		
3		
4		
Dist IV Dia		<u> </u>
Part IX-B Summary of Program-Related Investments	and the second s	A
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1N/A		
<u> </u>		
All other program-related investments. See instructions.		
3		
		İ

0.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	<u> </u>	
a		1a	926,021.
b		1b	659,334.
C	Fair market value of all other assets	1c	
đ		1d	1,585,355.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,585,355.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	23,780.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,561,575.
6	Minimum investment return. Enter 5% of line 5	6	78,079.
P	art XI: Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a		14255 L	· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2008. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art:XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		1a	371,376.
b	Program-related investments - total from Part IX-B	1b	0 .
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	13. 9.1.	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	371,376.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	343.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		371,033.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.		r the section

Form **990-PF** (2008)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI, line 7			Constitution in the second	
2 Undistributed income, if any, as of the end of 2007	1 5101 1	1	and a second sec	<u> </u>
a Enter amount for 2007 only	THE RESERVE OF THE		The sale Shith Land Trainer.	
b Total for prior years:	Line 1		<u> </u>	A CONTRACTOR OF THE STATE OF TH
b Total for prior yours.	The state of the state of		The state of the s	The gillian
3 Excess distributions carryover, if any, to 2008:	13 12 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15	<u> </u>	2 " "	Comment of the state of the sta
a From 2003				
b From 2004	A Secretary Control of the Control o	1		
c From 2005				的是一个人的人
d From 2006				
e From 2007			The state of the s	
f Total of lines 3a through e	0.	مير وري المراجع br>المراجع المراجع		
4 Qualifying distributions for 2008 from	The second second	1. 15 · 14 · 14 · 14 · 14 · 14 · 14 · 14 ·		· · · · · · · · · · · · · · · · · · ·
Part XII, line 4: ► \$ N/A				
a Applied to 2007, but not more than line 2a	2.5%。1919年1919年1919年1919年1919年1919年1919年191	The state of the s	0.	
b Applied to undistributed income of prior	对外的基础是在 是一个		の語を表する。	不好為自然為其事的最
years (Election required - see instructions)		0.	不是不可以可以不是	
c Treated as distributions out of corpus			西班牙斯斯斯	
(Election required - see instructions)	0.		一年 1000年 10	
d Applied to 2008 distributable amount	"我们是一个不是一个	The Contract of	到底,心影器所以起	0.
e Remaining amount distributed out of corpus	0.	新文化で、本は12 数学の数に	and the second of the second	
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount	0.	The same of the same	CONTRACTOR OF THE STATE OF THE	0.
must be shown in column (a).)				
6 Enter the net total of each column as indicated below;				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	Search Services			
b Prior years' undistributed income. Subtract	STATES TO SEE	The state of the s	この表現的できたい、単一できる。	CONTRACTOR STATE
line 4b from line 2b		0.		
c Enter the amount of prior years'		0.	· · · · · · · · · · · · · · · · · · ·	THE RESIDENCE OF THE PARTY OF T
undistributed income for which a notice of			的是我们的人的对象。	
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable			企業等於 法等政治	神経 がたんでき かい
amount - see instructions	Do one the Australia	0.	THE RESERVED OF THE SECOND	COUNTY LANGE
e Undistributed income for 2007. Subtract line				
4a from line 2a. Taxable amount - see instr		· · · · · · · · · · · · · · · · · · ·	0.	
f Undistributed income for 2008. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2009	the safety was the	7 3 3 A S.	Later Comment of the	0.
corpus to satisfy requirements imposed by		经验证 第25		
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003		3	CARRELLE VERSELLE VER	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2009.			Constitution of the second	Cont. Carlotte Cont. Carlotte Cont.
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:		1 2 5 5 5 5 W		The state of the s
a Excess from 2004	THE STATE OF STATE OF		计划,这个可能能够	
b Excess from 2005 .				
c Excess from 2006	是一个一个		"是是是是不是是一个是一	了。"想到国际国
d Excess from 2007	新教育的一个			
e Excess from 2008	The state of the s	(1) 经证据	· 中国	

	E AT A TIME		A	20-81	01668 Page 10
Part XIV Private Operating F			A, question 9)		
1 a If the foundation has received a ruling of		- · · · · · · · · · · · · · · · · · · ·	00/	15/00	
foundation, and the ruling is effective for				15/08	
b Check box to indicate whether the found		ig foundation described i		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2007	Prior 3 years	(4) 000E	(a) Takal
income from Part I or the minimum	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total
investment return from Part X for	00 005	54 500	46 460		400 606
each year listed	20,925.	71,533.			138,626.
b 85% of line 2a	17,786.	60,803.	39,243.	0.	117,832.
c Qualifying distributions from Part XII,	271 276	055 050	22 000		662 006
line 4 for each year listed	371,376.	257,952.	33,898.	0.	663,226.
d Amounts included in line 2c not					
used directly for active conduct of	•		•		•
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities.	271 276	257 252	22 000		662 226
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	371,376.	257,952.	33,898.	0.	663,226.
alternative test relied upon:					
a "Assets" alternative test - enter:	1 476 440	1 022 672	2 012 776		F 333 000
(1) Value of all assets	1,4/0,449.	1,833,0/3.	2,012,776.		5,322,898.
(2) Value of assets qualifying	1 476 440	1 022 672	2,012,776.		E 222 000
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter	1,4/0,449.	1,033,0/3.	4,014,116.		5,322,898.
2/3 of minimum investment return					
shown in Part X, line 6 for each year	52,053.	63,322.	30,779.	0.	146 154
listed	34,033.	03,324.	30,119.	0.	146,154.
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					0.
(2) Support from general public and 5 or more exempt					
organizations as provided in					•
section 4942(j)(3)(B)(ii)					0.
(3) Largest amount of support from					^
an exempt organization (4) Gross investment income					0.
Part XV Supplementary Info	rmation (Comple	te this part only i	if the foundation	had \$5 000 or mo	re in assets
at any time during t			i die louildation	1144 40,000 01 1110	ne in assets
1 Information Regarding Foundation				<u></u>	
a List any managers of the foundation wh		than 2% of the total conti	ihutions received by the	foundation hafore the clos	ea of any tay
year (but only if they have contributed n			ibutions received by the	ioundation before the cio.	oc or any tax
CHRISTINE DRISCOLL-O	- ·				
b List any managers of the foundation wh		e stock of a corporation (or an equally large portio	n of the ownership of a na	artnershin or
other entity) of which the foundation has			or an equally large per tie	ii oi tiio oiiiioioiiip oi a pi	i the sinp of
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms		
Check here ► X if the foundation o				ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	<u> </u>				
, aaa. aoo, ana soophone num	23. 3 p 2. 00 to 111101				
b The form in which applications should b	e submitted and informat	tion and materials they sh	ould include:		
					
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or o	ther factors:	

A TIME, INC. n (continued)		20-810	<u> 1668 Page 1</u>
Year or Approved for Future	Payment		
If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
or substantial contributor	recipient		
NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	1,000
	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	
NONE			25
 		▶ 3a	1,025
	L	> 3b	0
	n (continued) Year or Approved for Future If recipient is an individual, show any relationship to any foundation manager or substantial contributor NONE	Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor PUBLIC CHARITY PUBLIC CHARITY	Near or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor NONE PUBLIC CHARITY CONTRIBUTION NONE PUBLIC CHARITABLE CONTRIBUTION NONE PUBLIC CHARITY CONTRIBUTION NONE NONE PUBLIC CHARITABLE CONTRIBUTION NONE PUBLIC CHARITABLE CONTRIBUTION

Part XVI=A Analysis of Income-Producing Activities

		 			
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	ded by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Anount	Tunedon medine
a ·		ļ- <u></u>			
b	- }		+		
C	-			<u></u>	
d		 . 			
e	-				
f			_		
g Fees and contracts from government agencies		<u> </u>			
2 Membership dues and assessments	·		-	·	<u> </u>
3 Interest on savings and temporary cash			۱.,	10 001	
investments		ļ <u></u>	14	10,921.	
investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:	tol FCC BA F	10 at 1 a 4 10 10 at 10	14	23,330.	Li aprovi u acido acestantinessa
	2.30.00mm/A	ができた。大学の大学の大学	22 22 24 B	型。这一个一个	建筑。高级的地域。1000年,1000年
a Debt-financed property					
b Not debt-financed property			4		
6 Net rental income or (loss) from personal					1
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			-		İ
than inventory			18	-1,898.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			Ì		
a	_				
b	_				
C	_				
d	_		_	<u> </u>	
e	-				
e			• 240		
13 Total. Add line 12, columns (b), (d), and (e)(See worksheet in line 13 instructions to verify calculations.)				13 _	32,353.
Relationship of Activities Line No. Explain below how each activity for which inc				·	mplishment of
the foundation's exempt purposes (other that					
		<u> </u>			· · · · · · · · · · · · · · · · · · ·
				·	
				··	·····
	-				_
		·			······································
		· — · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
					
					
					
			_		
					·

Exempt Organizations	1668 iritable	<u> </u>	age 13
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of	H, -,	Yes	No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		16.	1
a Transfers from the reporting foundation to a noncharitable exempt organization of:		دىمىدا	·
(1) Cash	1a(1)	<u> </u>	X
(2) Other assets	1a(2)	 	X
b Other transactions:	ينند	-12	E
(1) Sales of assets to a noncharitable exempt organization		 	X
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
(3) Rental of facilities, equipment, or other assets			X
(4) Reimbursement arrangements	45.755		X
(5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations			1
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1b(6)		X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods,		L	
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement,		ets,	
column (d) the value of the goods, other assets, or services received.	311 0W III		
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and	shanng ar	rangem	ents
N/A			
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described			
in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	Yes	X	No
b If "Yes," complete the following schedule.	hip		
(a) Name of organization (b) Type of organization (c) Description of relations			
(a) Name of organization (b) Type of organization (c) Description of relations			
(a) Name of organization (b) Type of organization (c) Description of relations			
(a) Name of organization (b) Type of organization (c) Description of relations			

(781)-837-1993 Form 990-PF (2008)

Preparer's identifying number

PRESIDENT

Check if self-employed

EIN >

Phone no.

Title

Date

DAMON, TOPHAM & COMPANY, LLC 475 SCHOOL ST., SUITE 8 MARSHFIELD, MA 02050

Sign Here

Paid Preparer's Use Only

Signature of officer or trustee

Preparer's

signature

Firm's name (or yours If self-employed), address, and ZIP code

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 9	990-PF PAGE 1				ł		990-PF			i				
Asset No	Description	Date Acquired	Method	Life	<u> </u>	Unadjusted Cost Or Basis	Bus Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
11	11 FURNITURES & FIXTURES 12 OFFICE BOUIDMENT	01/10/0	SL SL	5.00	HY16	1,130.				1,130.	339.	4. or 1. or	226.	565.
13	DOMPUTER TO THE THE THE THE THE THE THE THE THE THE	01/15/07 SL	TS.	5.00	HY HY HY 16.	3,739.				3,739.	1,122.		748	1,870.
15	COMPUTER THE TAX TURES TO THE TOTAL TURES TO THE TOTAL TOTAL TO THE TAX TO TH	03/15/07	SL	5.00	HXI 6	3,324.				3,324	887.		665.	1,552.
17	17 COMPUTER 18 OFFICE BOUTPMENTS	04/26/07 SL		5.00 H	HY16	2,031.				2 031.	474	がない。	406. 308.	880.
19	COMPUTER COM	05/17/07 (%) (%) (%) (%) (%) (%) (%) (%) (%) (%)	SL SL	5.00	HY16	1 000		A STATE OF THE STA		1,000.	217.		200.	417.
21	PURNITURES & PIXTURES PHONE BOUTPMENT	06/15/07 04/03/08	SL	5.00	HY C	2,024.				2 024.	437.		405.	842.
E	33 COMPUTER	07/11/07 10/02/07	SI	5.00 5.00	HY16 HY16 HY165	1 805.				1,805.	361.		361	722.
35	COMPUTER COMPUTER	10/17/07	SL	5.00	HYD HYD HYD HYD HYD HYD HYD HYD HYD HYD	1,954.		100 mm		1 954.	261.		391.	652.
37 0	COMPUTER COMPUTER:	04/03/08 SL 304/03/08 SL	SIL	5.00	HYTE HYTE	546.	12.7 m		A seguina	546.	27.	16.00	109.	136.

(D) · Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2008 DEPRECIATION AND AMORTIZATION REPORT

	ear Ending on Accumulated Depreciation	600. 3,467.	573. 2 097.	75.	73.	281. 351. 244.	640. C. 800.	271. 339.	407. 509. 68. 68.	330. 330.	94. 94. 326. 21.579.	
	Current Year Deduction	2,6	1.5	1		2	4 (1) (0) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	2	*	3	13,3	
	Current Sec 179 Expense								100			33. J
	Beginning Accumulated Depreciation	867.	524	44	18	70.	108.	68.	102.		8,253.	
	Basis For Depreciation	13,000.	7.866	874.	1	1,405	2,155.	1,355.	2,034,	2,473.	515.	
	Reduction In Basis					Action of the state of the stat						
F	Section 179 Expense										では、	
990-PF	Bus % Excl		200		Ten I		220	1761 1987 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 -				だ。
	Unadjusted Cost Or Basis	13,000.	998%	874.	367	1,405.	2,155.	1,355.	2,034.	2,473.	515.	A CALL TO SERVICE STATE OF THE
	ν ο C No c >	HY16	HYLG	HXT 6	HY16	HY16	HY16	HY16 HY16 HY16	HY16	HY16 HY16	HX16	
	Life	5.00		5.00	30.0	5.00	5.00	5.00	5.00	5.00	5.00	1 (2)
	Method	SL	SL	SL	ŠĽ		SL	SI	SL	SL	IS.	
	Date Acquired	02/21/08	03/13/08 SL	03/20/08	03/20/08	04/03/06	03/22/08	03/29/08	03/28/08 SL 	10/20/08 SL	07/11/08	State of the state
-	Description	& FIXTURES	FURNITURES & FIXTURES	& FIXTURES	A 2 FURNITURES CEPTIXTURES	FURNITURES & PIXTURES FURNITURES & FIXTURES	COMPUTER CONTROL OF THE STATE O	RNITURES & PIXTURES MPUTER		FURNITURES & PIXTURES COMPUTER A STATEMENT OF STATEMENT O	OPPICE BOUIPMENT	
90-PP PAGE		FURNITURES	FURNITURES	FURNITURES	FURNITURES	FURNITURES FURNITURES	COMPUTER	URNITURES		FURNITURES	OFFICE EQU	
FORM 9	Asset No.	39	1.0	41	100	43	55	57	59	71	23	Sec.

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

(D) · Asset disposed

FORM 990-	-PF G	SAIN OR (LOSS	S) FROM SALE	OF A	ASSETS —————		STA	TEMENT	
DESCRIPTI	(A) ON OF PROPERTY	•			MANNER CQUIRED	DA ^c		DATE S	OLE
UNITED ST	TATES TREASURY	NOTE				VARI	ous	04/15	/09
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF AC((D) EXPENSE SALE		(E)	C		(F) OR LOS	c
	250,000.	251,89		0.	DEFRE	0.	GAIN	-1,8	
CAPITAL G	GAINS DIVIDENDS	FROM PART	īv						0.
						•		1 0	
TOTAL TO	FORM 990-PF, P	PART I, LINE	6A			:		-1,6	98.
		PART I, LINE		CASI	H INVEST	MENTS	STA	TEMENT	
FORM 990-				CASI	H INVEST	MENTS	 -		
FORM 990-		ON SAVINGS AN		CASI	H INVEST	MENTS	 -	TEMENT	2
FORM 990- SOURCE ROCKLAND	-PF INTEREST C	ON SAVINGS AN	ND TEMPORARY		H INVEST	MENTS	 -	TEMENT AMOUNT	21.
FORM 990- SOURCE ROCKLAND	-PF INTEREST O	ON SAVINGS AN	ND TEMPORARY					TEMENT AMOUNT 10,9	21. 21.
FORM 990- SOURCE ROCKLAND TOTAL TO	-PF INTEREST O	ON SAVINGS AN UNION PART I, LINE	ND TEMPORARY	OM SI		S	STA	TEMENT AMOUNT 10,9	21.
FORM 990- SOURCE ROCKLAND TOTAL TO FORM 990-	-PF INTEREST O	ON SAVINGS AN UNION PART I, LINE	O TEMPORARY 3, COLUMN A INTEREST FR	OM SI	ECURITIE:	S	STA	TEMENT AMOUNT 10,9 10,9 TEMENT	3

FORM 990-PF	LEGAL	FEES	Si	PATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAYLOR, GANSON AND PERRIN MARSHALL LAW GROUP	1,094. 1,891.	0.	0.	1,094. 1,891.
TO FM 990-PF, PG 1, LN 16A =	2,985.	0.	0.	2,985.
FORM 990-PF	ACCOUNTI	NG FEES	នា	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DAMON, TOPHAM & COMPANY, LLC	5,097.	0.	0.	5,097.
TO FORM 990-PF, PG 1, LN 16B	5,097.	0.	0.	5,097.
FORM 990-PF	TAX	ES	rz	CATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES	24,656.	0.	0.	24,656.
TO FORM 990-PF, PG 1, LN 18	24,656.	0.	0.	24,656.
FORM 990-PF	OTHER E	XPENSES	SI	'ATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FILING FEES PAYROLL FEES SUPPLIES TELEPHONE ADVERTISING	1,671. 3,193. 14,250. 8,698. 13,206.	0. 0. 0. 0.	0. 0. 0. 0.	1,671. 3,193. 14,250. 8,698. 13,206.

ONE LIFE AT A TIME, INC.				20-8101668
CONTRACT LABOR	680.	0.	0.	680.
UTILITIES	6,837.	0.	0.	6,837.
INSURANCE	2,787.	0.	0.	2,787.
BANK FEES	5,237.	0.	0.	5,237.
MISCELLANEOUS	1,642.	0.	0.	1,642.
TRAVEL AND MEETINGS	1,505.	0.	0.	1,505.
EQUIPMENT RENTAL/MAINTENANCE	4,070.	0.	0.	4,070.
TO FORM 990-PF, PG 1, LN 23	63,776.	0.	0.	63,776.
-				

FORM 990-PF DEPRECIATION	ON OF ASSI	TS NOT HELD	D FOR	INVESTMENT	STATEMENT	8
		COST OR		ACCUMULATED		
DESCRIPTION		OTHER BAS	IS	DEPRECIATION	BOOK VALU	Έ
FURNITURES & FIXTURES			130.	565.	5	65.
OFFICE EQUIPMENT			226.	113.	1	13.
COMPUTER .		3,	739.	1,870.	1,8	69.
OFFICE EQUIPMENT		3,3	133.	1,463.	1,6	70.
COMPUTER		3,3	324.	1,552.	1,7	
FURNITURES & FIXTURES			495.	215.	2	80.
COMPUTER		2,0	031.	880.	1,1	51.
OFFICE EQUIPMENT		1,!	538.	667.		71.
COMPUTER		1,0	000.	417.	5	83.
COMPUTER		1,!	580.	658.	9	22.
FURNITURES & FIXTURES		2,0	024.	842.	1,1	82.
PHONE EQUIPMENT			161.	540.	1,6	
COMPUTER		1,8	305.	722.	1,0	
COMPUTER			154.	404.		50.
COMPUTER			954.	652.	1,3	
COMPUTER			004.	251.		53.
COMPUTER			546.	136.		10.
COMPUTER		•	480.	120.	3	60.
FURNITURES & FIXTURES		13,0	000.	3,467.	9,5	
FURNITURES & FIXTURES	ø		366.	2,097.	5,7	
FURNITURES & FIXTURES			374.	219.		55.
FURNITURES & FIXTURES		•	367.	91.		76.
FURNITURES & FIXTURES		1,4	405.	351.	1,0	
FURNITURES & FIXTURES			222.	305.		17.
COMPUTER			155.	539.	1,6	
FURNITURES & FIXTURES			200.	800.	$\frac{1}{2}, \frac{1}{4}$	
FURNITURES & FIXTURES			355.	339.	1,0	
COMPUTER			901.	210.		91.
FURNITURES & FIXTURES			034.	509.	1,5	
PHONE EQUIPMENT			340.	68.		72.
FURNITURES & FIXTURES			173.	330.	2,1	
COMPUTER			791.	93.	2,6	
OFFICE EQUIPMENT			515.	94.		21.
TOTAL TO FM 990-PF, PART	II, LN 14	69,8	322.	21,579.	48,2	43.

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 4-2009)

to file income tax returns. Electronic Filing (e-file), Generally, you can electronically file Form 8968 if you want a 3-month automatic extension of time to file one of the return noted below (6 months for a corporation required to file Form 990-1). However, you cannot file Form 8868 electronically if (1) you want the additions (not automatic) 3-month extension or (2) you lie Form 990-18. L6089, or 8870, group returns, or a composition consolitated Form 990-17. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit waws rs.gov/efile and click on e-file for Chantres & Nonprofits. Name of Exempt Organization Name of Exempt Organization Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. Note LIFE AT A TI	• If y	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	is form).
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. Electronic Filing (e-file), Generally, you can electronically file Form 990-Th, However, you cannot file Form 8868 electronically if (1) you want the addition front automatic extension of right of the return roted below (6 months for a corporation required to file Form 990-Th, However, you cannot file Form 8868 electronically if (1) you want the addition (not automatic) 3-month extension or (2) you file Form 990-Th, However, you cannot file Form 8868 electronically if (1) you want the addition (not automatic) 3-month extension or (2) you file Form 990-Th, However, you cannot file Form 8868 electronically if (1) you want the addition (not automatic) 3-month extension or (2) you file Form 990-Th, However, you cannot file Form 8868 electronically if (1) you want the addition (not automatic) 3-month extension or (2) you file Form 990-Th, However, you cannot file Form or a corporation or according file form 990-Th, However, you cannot file Form or extension of time to file electronically if (1) you want to the addition of the Form or 6868. For more details on the electronically if (1) you want the addition of the surport of the form of the file form 990-Th, However, you cannot file Form or details on the electronically if (1) you want the addition of the file form 990-Th, However, you cannot file Form or extension of the electronically if (1) you want the addition of the file form 990-Th, However, you cannot file Form 980-Th, How			filed Form 8868.
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. Electronic Filing (e-file), Generally, you can electronically file Form 8968 if you want a 3-month automatic extension of time to file one of the return noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additions (not automatic) 3-month extension or (2) you file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additions (not automatic) 3-month extension or (2) you file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additions (not automatic) 3-month extension or (2) you file Form 990-T] form 8868. For more details on the electronic filing of this form, visit wawn rs, gov/efile and click on e-file for Charities 8 Nonprofits. Name of Exempt Organization ONE LIFE AT A TIME, INC. ONE LIFE AT ATIME, INC. Uniform 900-DRIVE #104 City, town or post office, state, and 2IP code. For a foreign address, see instructions. 100 LIEDGEWOOD DRIVE #104 City, town or post office, state, and 2IP code. For a foreign address, see instructions. COCKLAND, MA 02370 Check type of return to be filed(file a separate application for each return): Form 990-E Form 990-E Form 990-F Form 990-T Form 990-T Form 990-T Form 990-T Form 990-T Form 990-T Form 990-T Form 990-T Form 8870 CHRISTINE DRISCOLL O'NEILL * The books are in the care of ▶ 100 LEDGEWOOD DRIVE #104 - ROCKLAND, MA 02370 Telephone No. ▶ 781-681-700.3 Form 1041-A Telephone No. ▶ 781-681-700.3 Form 1041-A Telephone No. ▶ 781-681-700.3 Form 990-F If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for be organization's return for: Life the organization's return for: A first is for part of the group, check this box ▶ □ and attach a last with the names and ElNs of all members the extension is f	Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
to file income tax returns. Electronic Filing (e-file), Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the return noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additions (not automatic) 3-month extension or (2) you lie Form 990-El., 6059; or 8870; group returns, or a composition or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit waws rs.gov/efile and click on e-file for Charities & Nonprofits. Name of Exempt Organization Name of Exempt Organizati			·
noted below (6 months for a corporation required to file Form 990-BL, 1059, or 9870, group returns, or a composite or consolidated Form 990-T, instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visat www.rs.gov/elle and cilck on e-file for Charities & Nonprofits. Type or print ONE LIFE AT A TIME, INC. Name of Exempt Organization ONE LIFE AT A TIME, INC. Number, street, and room or suite no. If a P.O. box, see instructions. 100 LEDGEWOOD DRIVE #104 City, town or post office, state, and ziP code. For a foreign address, see instructions. ROCKLAND, MA 02370 Check type of return to be filed (file a separate application for each return): Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-F (resc. 401(a) or 408(a) trust) Form 8870 CHRISTINE DRISCOLL O'NEILL The books are in the care of ▶ 100 LEDGEWOOD DRIVE #104 - ROCKLAND, MA 02370 Telephone No. ▶ 781 - 681 - 7003 FAX No. ▶ If this is for a Group Return, enter the organization's four digit Group Exemption Number (SEN) If this is for the whole group, check the box ▶ If the organization's return for: ▶ Tenusest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2010 to file the exempt organization return for the organization's return for: ▶ Calendar year or Form 990-BL Group Exemption named above. The extension is for the organization's return for: ▶ Late the trust of the group, check this box Intitial return Change in accounting perion nonefundable credits. See instructions.			an extension of time
Print Print	noted (not a you m	below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electror utomatic) 3 month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cours submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic to	nically if (1) you want the additional onsolidated Form 990-T. Instead,
ONE LIFE AT A TIME, INC. ONE LOST AT TIME, INC. ONE LOST A TIME, I		or Name of Exempt Organization	Employer identification numbe
Number, street, and room or suite no. If a P.O. box, see instructions. 100 LEDGEWOOD DRIVE #104 City, town or post office, state, and ZIP code. For a foreign address, see instructions. ROCKLAND, MA 02370 Check type of return to be filed(file a separate application for each return): Form 990 Form 990-T (corporation) Form 990-BL Form 990-Form 990-Form 990-Form 990-T (trust other than above) Form 990-Form 6069 Form 990-Form 1041-A The books are in the care of ▶ 100 LEDGEWOOD DRIVE #104 - ROCKLAND, MA 02370 Telephone No. ▶ 781-681-7003 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the state of the group, check this box If the organization's return for: □ request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2010 □ to file the exempt organization return for the organization's return for: □ calendar year or □ □ 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. 1 If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	<i>p</i> ,	ONE LIFE AT A TIME, INC.	20-8101668
Check type of return to be filed (file a separate application for each return): Form 990 Form 990-T (sor, 401(a) or 408(a) trust) Form 990-BL Form 990-T (rust other than above) Form 990-FC Form 990-FC Form 990-FC Form 990-FC Form 990-FC Form 1041-A CHRISTINE DRISCOLL O'NEILL The books are in the care of 100 LEDGEWOOD DRIVE 1104 - ROCKLAND, MA 02370 Telephone No. 781-681-7003 FAX No. FORM 910-FC If this for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box 1 and attach a list with the names and ElNs of all members the extension will cover 1. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2010, to file the exempt organization return for the organization's return for: Calendar year or X tax year beginning JUL 1, 2008 If this is polication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ 34 If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	due dat	Number, street, and room or suite no. If a P.O. box, see instructions.	
Form 990		City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
Form 990-BL	Chec	k type of return to be filed (file a separate application for each return):	
The books are in the care of ▶ 100 LEDGEWOOD DRIVE #104 - ROCKLAND, MA 02370 Telephone No. ▶ 781-681-7003 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box		Form 990-BL	5227 5069
FEBRUARY 15, 2010 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: □ calendar year or □ X tax year beginning JUL 1, 2008 , and ending JUN 30, 2009 . 2 If this tax year is for less than 12 months, check reason: □ Initial return □ Final return □ Change in accounting perion on refundable credits. See instructions. 3a \$ 34 b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	Tel ● Ifti ● Ifti	e books are in the care of 100 LEDGEWOOD DRIVE #104 - ROCKLAND, Milephone No. 781-681-7003 FAX No. FAX No. he organization does not have an office or place of business in the United States, check this box	his is for the whole group, check th
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. 3a \$ 34 b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		FEBRUARY 15, 2010 , to file the exempt organization return for the organization named is for the organization's return for: calendar year or	
nonrefundable credits. See instructions. 3a \$ 34 b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	2	If this tax year is for less than 12 months, check reason:	Change in accounting perio
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		, , , , , , , , , , , , , , , , , , , ,	3a \$ 343
			- J-3
		·	3b \$ 800
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	С	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	
See instructions. 3c \$		See instructions.	3c \$ 0

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