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Department of the Treasury

#### **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047 2008
Open to Public
Inspection

me	ernai Revent	Je Service	The digalization may have to use a copy of this return to satisfy state reporting	equirements	Inspection
<u>A</u> _	For the 20	008 calendar	year, or tax year beginning 7/01/08, and ending 6/30/09	<del></del>	
В	Check if appli	cable Pleas		D Emp	oloyer identification number
$\sqcup$	Address char	nge use IR label o			
	Name change		David Distriction Action	22	<u> -2979408</u>
H	•	type	Number and street (or P O box if mail is not delivered to street address)  Room/sui	ite E Tele	phone number
님	Initial return	See	P.O. BOX 213	20	<u>3-269-7771</u>
Ш	Termination	Specif Instruc	Colored Action and Address and All 14	<b>G</b> Gross re	ecerpts \$ 341,151
	Amended retu		WALLINGFORD CT 06492		
П	Application pe	ending F Nai	ne and address of principal officer	H(a) Is th	nis a group return for
_					rates? Yes X No
				H(b) Are	all affiliates Yes No
				If "N	lo," attach a list (see instructions)
1	Tax-exemp	ot status	<b>5</b> 501(c) ( <b>3</b> ) <b>4</b> (insert no ) 4947(a)(1) or 527		
<u>J_</u>	Website	► N/A		H(c) Gro	up exemption number
K	Type of organ	nization <b>X</b> C	orporation Trust Association Other ► L Year of form	ation 1966	M State of legal domicile CT
P	art I	Summa	ary		
	1 Brie	efly describe	the organization's mission or most significant activities		
a	) s	SUPPORT	CHARITABLE CAUSES		
ŭ					
Г					
SVe	2 Che	eck this box	▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its	assets	
Ŏ	Į.		g members of the governing body (Part VI, line 1a)	3	5
ŝ	l .		pendent voting members of the governing body (Part VI, line 1b)	4	5
Activities & Governance			employees (Part V, line 2a)	5	0
ξį			volunteers (estimate if necessary)	6	50
ď			lated business revenue from Part VIII, line 12, column (C)	7a	<del> </del>
2		ū	isiness taxable income from Form 990-T, line 34	7b	<u> </u>
2 5	D Met	uillelateu bi	Isliess taxable filcome from Form 990-1, life 34	Prior Year	Current Year
	8 Con	ntributions ar	d grants (Part VIII, line 1h)	1,440	
, one			revenue (Part VIII, line 2g)	<del></del>	
Revenue	1	•	me (Part VIII, column (A), lines 3, 4, and 7d)	23,203	29,929
_% %			Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	16,999	
-	i		add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,642	<del></del>
_				27,700	
ShsesNNEL			ar-amounts part-(Part IX, column (A), lines 1-3) ar-for-members (Part-IX, column (A), line 4)	21,100	21,010
5			101	<del></del>	<del> </del>
Ses.			ompensation, employed benefits (Part IX, column (A), lines 5–10)	<del></del>	<del></del>
e b	1 to a Proi	lessional (ui)	神傳s府g ြeg 伊伯 IX column (A), line 11e)		
Ž.			rexpenses (Part-IX மிய்ர் n (D), line 25) ► (ஐaா(X) மாற் (A) பிற்க 11a-11d, 11f-24f)	3,975	4,847
_	l	1		31,675	<del>                                     </del>
		•	Add lines 13-17 (must equal Part IX, column (A), line 25)	9,967	<del></del>
- v		enue less ex	penses Subtract line 18 from line 12	ginning of Year	62,105 End of Year
alc es	20 Tota	ıl assets (Pa		700,223	<del></del>
Ass	20 Tota	•	rart X, line 26)	27,700	
Net Assets or Fund Balances	21 10ta	•	id balances Subtract line 21 from line 20	672,523	
_	art II		re Block	0.2,025	7027070
	47 4 11		<del></del>	nts and to the best	of my knowledge
		and belief,	ties of perjury. I declare that I have examined this return, including accompanying schedules and stateme is true, correct, and complete "peclaration of preparer (other than officer) is based on all information of w	hich preparer has a	ny knowledge
Sig	n l	<b>1</b>	A QuerX	I	1-20-10
ler	1	Signati	re of officer /	Date	<del>'</del>
	<b>"</b>	l Signal	James 3. Lood Transule!	Dutt	•
	}	Type of	print name and take		
		<del></del>	Date	Check if	Preparer's identifying number
aio	d l	Preparer's signature		self-	(see instructions)
	parer's	oignature	1/16/10 PAYES MASSOLA & PHILLIPS 116	employed ► L	P00501047
	Only	Firm's name		EIN	<b>▶</b> 41-2072419
	,	ıf self-emplo		Phone	
	1	address, and	manathorous, or ourse re-	no 🕨	203-265-0488
<u> </u>			turn with the preparer shown above? (see instructions)		X Yes No
AA	For Priva	acy Act and	Paperwork Reduction Act Notice, see-the separate instructions.	_	Form <b>990</b> (2008)

Form 990 (200	8) WALLINGFORD FOUND	ATION 22	-2979408	Page 2
Part III		ice Accomplishments (see instruct	<del></del>	<u> </u>
	escribe the organization's mission	<u> </u>		
	RT CHARITABLE CAUSE	S		
2 Did the o	rganization undertake any significant p	rogram services during the year which were no	t listed on	
the prior	Form 990 or 990-EZ?			Yes X No
If "Yes,"	describe these new services on Sched	ule O		
3 Did the o	rganization cease conducting, or make	significant changes in how it conducts, any pre-	ogram	
services'				Yes X No
	describe these changes on Schedule C			
		each of the organization's three largest progra		
		nd section 4947(a)(1) trusts are required to rep		
allocation	ns to others, the total expenses, and re	venue, if any, for each program service reporte	ed	
		26 657	21,810 ) (Revenue \$	
4a (Code		26,657 including grants of \$ NONPROFIT ORGANIZATION		)
		SCIENTIFIC, LITERARY,		
	ENTS SERVED	SCIENTIFIC, HITERARI,	DEVELOPMENT	
19 CT1	ENIS SERVED			
4b (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4D (COde	/(Expenses $\psi$	moduling grants or \$\psi\$	) (November 4	,
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
•				
4d Other pro	gram services (Describe in Schedule			

including grants of \$ ) (Revenue \$ 26,657 (Must equal Part IX, Line 25, column (B))

4e Total program service expenses ▶ \$

Part IV Checklist of Required Schedu	les
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	ļ	X
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	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete			7.7
	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	<u> </u>	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			x
_	Schedule D, Part I	6		Λ
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	,		х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			x
_	complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	8		A
9	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
40	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
10	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,	- 10		
11	Parts VI, VIII, IX, or X as applicable	11		x
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
12	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U S?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
~	business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		X
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, Part II	15		X
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, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		<u> </u>
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 questions			
	24b-24d and complete Schedule K If "No," go to question 25	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<del></del>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			v
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			x
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			v
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	990	<u>X</u>
		mio-	- UUU	120001

### Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		-	
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,		-	
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
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? If "Yes," complete Schedule R, Part		]	
	VI	37		X

Form **990** (2008)

Pi	art v Statements Regarding Other IRS Filings and Tax Compliance				Т	1
4-	Enter the number congress in Poy 2 of Form 1006, Applied Summers and Transmitted of				Yes	No
1a	•	1a	0			
<b>.</b>	U.S. Information Returns. Enter -0- if not applicable.  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable					1
С	gaming (gambling) winnings to prize winners?	labic		1c	Ì	x
22		1	1	<del></del>		<del></del>
2a	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		1_0	2b		
ь	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	• •		20	+	<del>                                     </del>
	instructions)			<b>:</b>		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	hv				
ou	this return?	-,		3a	1	x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	1	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other au	thority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other final	-				
	account)?			4a		X
b	If "Yes," enter the name of the foreign country				T	-
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign B	ank				]
	and Financial Accounts					1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	n?		5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity					
	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a	ļ	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	s or				
	gifts were not tax deductible?			6b	ļ	-
7	Organizations that may receive deductible contributions under section 170(c).					-
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more the	an				
	\$75?				<del></del>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	-	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			_		
_	required to file Form 8282?	١	ſ	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a per	sonai		7.		<b></b> .
	benefit contract?			7e 7f	<del> </del>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.	( /			<del></del>	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C a			7 <u>g</u>		A
h	required?	15		7h		x
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	tion		<del></del>	1	<u> </u>
0	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spons			ļ		1
	organization, have excess business holdings at any time during the year?	omig		8	Ì	x
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				1	
а	Did the organization make any taxable distributions under section 4966?			9a		x
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	_	Х
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a				[
b	Gross income from other sources (Do not net amounts due or paid to other sources against			[		1
	amounts due or received from them )	11b				1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	0,41?	,	12a	<b>.</b>	ļ
h	If "Yes " enter the amount of tax-exempt interest received or accrued during the year	12b	1	ţ	1	t

Part Vi Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the commissioning processes, processes, processes, or charges in Schedule O. See instructions  I all the first harmoner of voting members that are independent  I all to be the manufact of voting members that are independent  I all to be the manufact of voting members that are independent  I all to be directly or directly critically or the voting members that are independent  I all to be directly or directly critically or the voting members that are independent  I all the commission of evidence for trustees, or key employee he was a family relationship or a business relationship with any other officer, directly, rauske, or key employees to a family profit of the programation of the directly or supplied to the commission of the program of the directly supplied to the profit of the program of the directly supplied to the profit of the program of the directly supplied to the profit of the program of the directly and the profit of the program of the directly and the profit of the program of the directly and the profit of the government body where the profit of the government body before it was flied? All organizations are locally to a clinically and profit of the government body.  I the government of the directly of the profit of the government body before it was flied? All organizations are locally of the profit of the government of the directly of the government of the directly of the government of the government of the government of the gover	Sec	tion A.,Governing Body and Management						
a Criter the number of violage members of the governing body be Either the number of violage members in that see independent Did any officer, director, fusiles, or key employee have a family relationship or a business relationship with any other officer, director, fusiles, or key employees to a management company or other person?  3 Did the organization deligate control over management duries customarily performed by or under the direct business of officer, director, fusiles, or key employees to a management company or other person?  3 LX Did the organization based any significant charges to its organizational documents since the prior Form 990 was filled?  4 LX Did the organization based any significant charges to its organizational documents since the prior Form 990 was filled?  5 LX Did the organization have members or stockholders?  6 Does the organization have members or stockholders?  7 Does the organization have members or stockholders?  8 Did the organization organization have members or stockholders?  9 Did the organization organization have members or stockholders?  9 Did the organization organization have members organization the meetings held or written actions undertaken cluring the year by the following:  1 The powering body?  8 Did the organization have local chapters, branches, or affiliates?  9 Did the organization have local chapters, branches, or affiliates?  9 Did the organization have local chapters, branches, or affiliates?  9 Did the organization have local chapters, branches, or affiliates?  9 Did the organization have local chapters, branches, or affiliates?  10 Was a copy of the Form 900 provided to the organization's governing the activities of such chapters, affiliates, and provides a stockhold organization have written provided to the organization's provided by the organization and activities of the organization and activit							Yes	No
1a Enter the number of vicing members of the governing body Enter the number of vicing members in at see independent 2 Dot any officer, director, trustee, or key employee have a family relaborating or a business relaboration with any other officer, director, trustee, or key employee? 3 Dot the organization of officers, director, trustee, or key employee and officers of officers or trustees, or key employee and officers, director, trustee, or key employee to the organization of officers, director or trustees, or key employee to a majorate of officers, director or trustees, or key employee. 4 Dot the organization make any significant changes to its organizational documents since the prior Form 980 was filled? 5 Dot the organization have members, stockholders, or other persons who may elect one or more members. 6 Does the organization have members or subcholders, or other persons who may elect one or more members of the governing body? 7 Does the organization have members, stockholders, or other persons? 8 Does the organization to the governing body subject to approval by members, stockholders, or other persons? 9 Does the organization contemporareously document the meetings held or written actions undertaken during the year by the following 1 Does the organization contemporareously document the meetings held or written actions undertaken during the year by the following 1 The governing body? 1 Base to committee with authority to act on behalf of the governing body? 2 Base to committee with authority to act on behalf of the governing body? 3 Does the organization have written persons and procedures governing the activities of such chapters. 3 Does the organization have written persons and procedures governing the activities of such chapters. 3 Does the organization have written persons of the governing body? 3 Does the organization in the worther policies and procedures governing the activities of such chapters. 4 Does the organization have written process, farry, the organization and process of the such activitie		For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the	е					
b Enter the number of voting members that are independent  2		circumstances, processes, or changes in Schedule O See instructions	I	l		-		
2 Del dar y officer, director, triustes, or keye employee? 3 Did the organization delegate control over imanagement duties customarily performed by or under the direct 3 supervision of officers, directors, nustees or key employee? 4 LX 5 Did the organization nake any significant changes to sto organizations to the professor? 5 Did the organization become aware during the year of a misterial diversion of the granization make any significant changes to sto organizations documents since the prior Form 990 was filled? 4 LX 5 Did the organization have become aware during the year of a misterial diversion of the organizations assesses? 5 LX 6 Dids the organization have members or stockholders? 7 Did be organization have members or stockholders. Or other persons who may elect one or more members 6 file governing body? 7 A VX 6 A vary denousors of the governing body subject to approval by members, stockholders, or other persons? 7 Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following: 9 Each committee with authority to act on behalf of the governing body? 9 Does the organization have local diapters, branches, or affiliates? 9 Did the organization have local diapters, branches, or affiliates? 9 Signification of the provided to the organization of the organization of the provided to the organization of the provided to the provided to the organization of the provided to the organi	1a	Enter the number of voting members of the governing body	1a ]			_		
any other officer, director, flustese, or key employee?  3 Odd the organization delegated control over management duties custionanly performed by or under the direct supervision of officers, cirrectors or trustees, or key employees to a management company or other person?  3 X  4 Dot the organization have members or stockholders?  5 Dot the organization have members or stockholders?  6 Does the organization have members or stockholders?  7 Does the organization have members, stockholders?  8 Oos the organization have members, stockholders?  8 Does the organization have members, stockholders?  9 Does the organization have members, stockholders?  10 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  10 Are any decosons of the governing body subject to approval by members, stockholders, or other persons?  10 Does the organization on the organization have well any subject to approval by members, stockholders, or other persons?  10 Does the organization have be to add the stockholders or other persons?  10 Was a copy of the Form 990 provided to the properties of the organization and stockholders or other persons of the portion of the persons of the portion of the persons of the portion of the persons of the persons of the portion of the persons of the persons of the persons of the persons of the portion of the persons of the portion of the persons of the persons of the persons of the portion of the persons of the	b	Enter the number of voting members that are independent	1b	5				
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13	С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	•				,	
14		describe in Schedule O how this is done				12c	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision  a The organization's CEO, Executive Director, or top management official?  b Other officers or key employees of the organization?  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 arrangement with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ CT  Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply  Own website Another's website ▼ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ JIM WOOD  P O BOX 213	13	Does the organization have a written whistleblower policy?				13		
independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision  a The organization's CEO, Executive Director, or top management official?  b Other officers or key employees of the organization?  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 arrangement with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  15b X  X  15a X  X  b If "Yes," has the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement  the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard  the organization's exempt status with respect to such arrangements?  16a X  The organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard  the organization's exempt status with respect to such arrangements?  16b V  The organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard  the organization's exempt status with respect to such arrangements?  16b V  The organization in joint venture arrangements arrangement with a participation in joint venture or similar arrangement  The organization in joint venture arrangement applicable federal tax law, and taken steps to safeguard  the organization in joint venture arrangements arrangement applicable federal tax law, and taken steps to safeguard  the organization in joint venture arrangements arrangement applicable federal tax law, and taken steps to safeguard  the organization in joint venture arrangements arrangement applicable federal tax law, and taken steps to safeguard	14	Does the organization have a written document retention and destruction policy?				14		X
a The organization's CEO, Executive Director, or top management official?  b Other officers or key employees of the organization?  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 arrangement with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  15a X  x  b If "Yes," has the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement  the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  16b X  x  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate the organization to evaluate  the organization's exempt status with respect to such arrangements?  16a X  b If "Yes," has the organization to evaluate  the organization's participation to evaluate  the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard  the organization's exempt status with respect to such arrangements?  16a X  b If "Yes," has the organization to evaluate  the organization's exempt status with respect to such arrangements?  16b V  The organization to evaluate  t	15	• • • • • • • • • • • • • • • • • • • •						
b Other officers or key employees of the organization?  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 arrangement with a taxable entity during the year?  16a X  1		independent persons, comparability data, and contemporaneous substantiation of the deliberation and de	cision					
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 arrangement with a taxable entity during the year?  16a X  16a X  16a X  16a X  16a X  16a X  16a IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	а	The organization's CEO, Executive Director, or top management official?				15a		
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  □ Own website □ Another's website ▼ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ JIM WOOD  P O BOX 213	b	Other officers or key employees of the organization?				15b	_	<u>X</u>
with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website ☐ Another's website ☒ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ JIM WOOD  P O BOX 213		Describe the process in Schedule O (see instructions)						
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate  its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard  the organization's exempt status with respect to such arrangements?  Section 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)  available for public inspection. Indicate how you make these available. Check all that apply  Own website  Another's website  Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization  JIM WOOD  P O BOX 213	16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement						
the organization's exempt status with respect to such arrangements?  Section 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  □ Own website □ Another's website ▼ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ JIM WOOD  P O BOX 213		with a taxable entity during the year?				16a		X
the organization's exempt status with respect to such arrangements?  Section 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website Another's website X Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ JIM WOOD  P O BOX 213	b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate						
Section 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  □ Own website □ Another's website ▼ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ JIM WOOD  P O BOX 213		its participation in joint venture arrangements under applicable federal tax law, and taken steps to safegua	ard					
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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website Another's website X Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ JIM WOOD  P O BOX 213		the organization's exempt status with respect to such arrangements?				16b		
Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website. Another's website. Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the organization.  JIM WOOD.  P. O. BOX. 213	<u>Sec</u>	tion C. Disclosure	_					
available for public inspection. Indicate how you make these available. Check all that apply  Own website. Another's website. Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the organization.  JIM WOOD.  P. O. BOX. 213	17	List the states with which a copy of this Form 990 is required to be filed   CT						
Own website Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public  State the name, physical address, and telephone number of the person who possesses the books and records of the organization JIM WOOD  P O BOX 213	18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501	(c)(3)s	s only	/)			
<ul> <li>Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public</li> <li>State the name, physical address, and telephone number of the person who possesses the books and records of the organization JIM WOOD</li> <li>P O BOX 213</li> </ul>		available for public inspection. Indicate how you make these available. Check all that apply						
policy, and financial statements available to the public  State the name, physical address, and telephone number of the person who possesses the books and records of the organization  JIM WOOD  P O BOX 213		Own website Another's website X Upon request						
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► JIM WOOD P O BOX 213	19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	ct of in	iteres	st			
organization ▶ JIM WOOD P O BOX 213		policy, and financial statements available to the public						
• · · · · · · · · · · · · · · · · · · ·	20	State the name, physical address, and telephone number of the person who possesses the books and rec	cords o	of the	•			
·								
	W		<u> 0</u>	649	92			

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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.

  | X | Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A)	Name and Title Average						oply)	(D) Reportable	(E) Reportable	(F) Estimated
Name and The	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
TERRY WOODIN			ĺ							
CHAIRPERSON	2			X	<u> </u>			0	0	0
ROZ GALLAGHE										
TRUSTEE	1	<u> </u>						0	0	0
JIM WOOD								_		_
TREASURER	2	1_		X				0	0	0
DAVID JULIAN TRUSTEE	0 1							o	o	o
JON KAPLAN		1								
SECRETARY	2			X		1		0	0	0
				,						

			T	,	-		, , , , ,	,	d Highest Compensated E		,	= -
(A) Name and title	Avei hours	-	-	_	check		_	т —	(D) Reportable compensation	(E)  Reportable compensation	(F Estin amou	nated
·	we	eek	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	oth comper from organi and re organiz	nsation i the zation elated
<ul><li>1b Total</li><li>2 Total number of</li></ul>	ndıvıduals (ıncludı	ng those in 1	a) wł	no re	ceive	ed m	ore t	<b>▶</b> han	\$100,000 in reportable com	pensation from the		
organization >	0											Yes No
employee on line	1a? If "Yes," com	plete Schedu	le J f	for su	uch ir	ndıvı	dual		e, or highest compensated		3	х
									and other compensation from complete Schedule J for su		4	x
5 Did any person li	sted on line 1a red d to the organization								inrelated organization for ch person		5	х
	le for your five hig		sate	d inc	leper	nden	t cor	ntract	tors that received more that	n \$100,000 of		
compensation fro	m the organization (A) Name and busin								Descrip	(B) tion of services	C	(C) ompensation
						_						
				_								•
						_						
					_							
	<del></del> -											
	ndependent contra m the organization		ıng th	nose	ın 1)	who	rec	eive	d more than \$100,000 in		0	
AA	<u>sio organization</u>	· <u>-                                     </u>								<del>-</del>		n <b>990</b> (2008

Pa	irt V	III Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	<del></del>			<del></del>	revenue		512, 513, or 514
Program Service Revenue   Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
gra	b	Membership dues 1b		-		-	-
ts, an	С	Fundraising events 1c					
igi	d	Related organizations 1d		1		:	
sins,	е	Government grants (contributions) 1e					
utio	f	All other contributions, gifts, grants,					
e ii		and similar amounts not included above 1f	30,676				
or to	g						
၁ ဧ	h	Total. Add lines 1a-1f	<u> </u>	30,676			
ĭe			Busn. Code				
ver	2a						
R	b						
Vic.	С					<del></del>	
Ser	d						
am	е						-
ığo,	f						
P	g	Total. Add lines 2a-2f \	<u> </u>				
	3	Investment income (including dividends, intere	st, and				
		other similar amounts)	▶ ]	23,454	23,454		<del></del>
	4	Income from investment of tax-exempt bond p	roceeds 🕨				
	5	Royalties	<b>•</b>				
		(ı) Real (ıı)	Personal			-	
	6a	Gross Rents					-
	b	Less rental exps		1			-
	c	Rental inc or (loss)		1			:
	_d	Net rental income or (loss)					
	/a	sales of assets	ıı) Other				
		other than inventory 258,864					
	b	Less cost or other		•			
		basis & sales exps 252, 389					-
	c	Gain or (loss) 6,475		1			
	d	Net gain or (loss)		6,475	6,475		
	8a	Gross income from fundraising events		ŀ			
e l		(not including \$					
l en		of contributions reported on line 1c)		1		:	
& B		See Part IV, line 18 a					
Other Revenue	b	Less direct expenses b		Ì			
ŏ	C	Net income or (loss) from fundraising events	<u> </u>				
- 1	9a	Gross income from gaming activities		Ī			-
		See Part IV, line 19 a		1			
l		Less direct expenses b					
	С	Net income or (loss) from gaming activities			<del></del>		
	10a	Gross sales of inventory, less		1			
		returns and allowances a		1			
	b	Less cost of goods sold <b>b</b>		1			
ļ	С	Net income or (loss) from sales of inventory	<u> </u>				
Į	_	Miscellaneous Revenue	Busn. Code	1		:	
	11a	GOLF TOURNAMENT		15,008	15,008		
	b	ANNUAL ROTARY BBQ		13,149	13,149		
J	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d	▶	28,157			
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7	'd, 8c,				
		9c. 10c. and 11e	<b>•</b>	88,762	58,086	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) but are not required to complete columns (B), (C), and (D).

	All other organizations must			ete columns (b), (c), and	
	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	(D) Fundraising expenses
1	Grants and other assistance to governments and				<u> </u>
	organizations in the U.S. See Part IV, line 21	21,810	21,810		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				_
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages			****	
7 8	Pension plan contributions (include section 401(k)				
J	and section 403(b) employer contributions)		ļ		
9	Other employee benefits	+		·	
10	Payroll taxes			<u>-</u>	
11	Fees for services (non-employees)				
	Management				
	Legal				
	Accounting	333	333		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	437	437		<del>  </del>
14	Information technology				
15	Royalties				
16	Occupancy			·	
17	Travel			<u>.</u>	
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials		<u></u>		
20	Conferences, conventions, and meetings Interest				<del></del>
20 21	Payments to affiliates		-		
22	Depreciation, depletion, and amortization				
23	Insurance	4,077	4,077		
24	Other expenses Itemize expenses not	1			
	covered above (Expenses grouped together	1			‡
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а					ļ
b				<u> </u>	
С					
d		-	· <del></del>		
e	A				-
f	All other expenses	26 657	26,657		
25_	Total functional expenses. Add lines 1 through 24f	26,657	20,037		
26	Joint Costs. Check here ► if following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				

1   Cash—non-interest beaming		an /	X Balance Sneet		(A)	<u> </u>	(E	3)			
2 Savings and temporary cash investments 3 Peticipas and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, flustess, key employees, or other related parties. Complete Part I/of Schedule L 6 Receivables from current and former officers, directors, flustess, key employees, or other related parties. Complete Part I/of Schedule L 7 Receivables from current and former officers, directors, flustess, key employees, or other related parties. Complete Part I/of Schedule L 7 Receivables from current and former officers of defined under section 4958(I/S) and persons described in section 4958(I/S) Complete Part I/of Schedule L 7 Receivables from current and former officers and the section 4958(I/S) Complete Part I/of Schedule D 8 Perpade reprises and deferred charges 10s Land, buildings, and equipment cost basis b Less accumulated depreciation Complete Part I/of Schedule D 10s Investments—other Schedule Sae Part IV, line 11 11 Investments—other Schedule Sae Part IV, line 11 12 Investments—other Schedule Sae Part IV, line 11 13 Investments—other Schedule Sae Part IV, line 11 14 Intengible assests 15 Ofbor assest Sae Part IV, line 11 15 Total assests. Add lines 1 through 15 Investments—other schedules Sae Part IV, line 11 16 Total assests. Add lines 1 through 15 Investments—other schedules Sae Part IV, line 11 17 Accounts payable and acrosed expenses 17 Total intended Sae Part IV, line 11 18 Total assests. Add lines 1 through 15 Investments—other schedules Sae Part IV, line 11 19 Deferred revenue 19 Deferred revenue 20 Deferred revenue 21 Escrea account liabelities 2 through 25 Investments and demonstrations and demonstrations and schedules and liabelities and liabeli	_				Beginning of year	<u> </u>	End o	f year			
3 Pedages and grants receivable, nat 4 Accounts receivable, not 5 Receivables from current and formor officers, directors, frustees, key employees, or other ristate parties. Complete Part I/I of Schedule L 6 Receivables from other disqualified parasons (see defined under section 4560((i/)) and persons described in section 4958(c)(3(8) Complete Part I/I of Schedule L 7 Notes and loans receivable, net 8 Part I/I of Schedule L 8 Persons described in section 4958(c)(3(8) Complete Part I/I of Schedule L 9 Prepaid expenses and deforted charges 10a Lands hubitings, and equipment cost basis b Less accumulated deprecation Complete Part I/I of Schedule D 11 Investments—publish securities 11 Investments—publish securities 12 Investments—other securities Sane Part I/I ine 11 13 Investments—publish securities 15 Other assets See Part I/I, line 11 14 Intanapole assets 15 Other assets See Part I/I ine 11 15 Total assets, Add lines 1 through 15 Investments—greated expenses 17 Accounts payable and accrued expenses 18 Service account liabilities and control described in 19 18 Grants payable and accrued expenses 19 Deferred revenue 19 Deferred medical payable and accrued expenses 19 Deferred medical payable and account liability Complete Part I/I of Schedule D 25 Escrows account liabilities (Schedule D 26 Secured medigages and notes payable to unrelated third parties 20 Unsecured notes and loans payable 21 Unsecured notes and loans payable 22 Unsecured notes and loans payable and accounted third parties 23 Unsecured notes and loans payable and accounted third parties 24 Unsecured notes and loans payable and accounted third parties 25 Total liabilities. Add lines 17 through 25. 26 Total liabilities and feet assets from 90 Cash Manual Cash Part I/I of Schedule D 26 Total liabilities and feet assets from 90 Cash Manual Cash Part I/I of the Accounted Other Cash Part I/I of Schedule D 26 Total liabilities and feet assets from 90 Cash Manual Cash Part I/I of the Cash Part I		1	Cash—non-interest bearing								
A Accounts receivable, net  Frequenches from current and formor officers, directors, hustees, key employees, or other related parties Complete Part II of Schedule L  Frequenches from other disqualified persons (as defined under section 4856((1)) and persons described in section 4856(x)(3)(3) Complete Part II of Schedule L  The inventions for sale or use Part I of Schedule R  The inventions for sale or use Part V of Schedule D  Inventions payable and deprendent accountage  Land, buildings, and equipment cost base Less accumulated deprendent Complete Part V of Schedule D  Investments—publicly traded securities Inventionation—program-related See Part IV, line 11 Investments—publicly traded securities Investments—program-related See Part IV, line 11 Investments—program-related See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34)  Tother assets See Part VV, line 11 Total assets and accounted expenses Part V of Schedule D Deferred revenue D Deferred revenue D Deferred revenue D Tex-exempt bond labilities D Total assets compensated employees, and disqualified persons Complete Part I of Schedule D D D D D Secure of Complete Part V of Schedule D D D D D D D D Tex-exempt bond labilities, Add lines 17 through 29, and lines 33 and 34.  Unrescribed to current and formore officers, circlotis, hustons, key employees, highest compensated employees, and disqualified persons Complete Part I of Schedule D D D D D D D D D D D D D D D D D D D		2	Savings and temporary cash investments		238,942	2	1	.91,	56		
Secretary content and former officers, directors, insteeds, key employees, or other related prefers Complete Part I/or Schedule L		3	Pledges and grants receivable, net			3					
## complexes, or other felated parkers Complete Part If of Schedule L  ## Recevables from Other deaponal felar prisons (as defined under section 4858(Y,1)) and persons described in section 4858(Y,1) and persons described in section 4858(Y,2)(B) Complete Part I of Schedule L  ## Recevables and deferred charges   Prepart depends and deferred charges   Prepart of Schedule D   Part I of Sch		4				4					
Receivables from Other disqualified persons (as defined under section 4958(c/3)(8) Complete Part II of Schedule I.  7 Notes and loans reervable, net 8   7   7   7   7   7   7   7   7   7		5	Receivables from current and former officers, directors, to	rustees, key							
4658(f(11)) and persons described in section 4958(c)(3)(8) Complete Part II of Schedule L 7 Notes and loans receivable, net 17 Notes and loans receivable, net 18 Inventories for sale or use 19 Prepart of Schedule C Part II of Schedule D Part VI of Schedule D Part						5					
Part   I of Schedule		6									
Notes and loans receivable, net  Notes and loans receivable, net  Notes and loans receivable, net  Notes and loans receivable or use  Notes and loans receivable, net  Notes and loans receivable net  Notes and loans payable  Notes and loa				3) Complete							
8   Prepare depenses and deforted charges   9   9   9   9   9   9   9   9   9						6					
10a	ets	7	, -		· · · · · · · · · · · · · · · · · · ·	7					
10a	256	8			<u> </u>	8					
b Less accumulated depreciation Complete Part VI of Schedule D 11 Investments—publicity taded securities 12 Investments—publicity taded securities 13 Investments—publicity taded securities 14 Intrustments—publicity taded securities 15 Investments—publicity taded securities 16 Intrustments—publicity taded securities 17 Intrustments—publicity taded securities 18 Intrustments—publicity taded securities 19 Intrustments—publicity taded securities 10 Intru	۵	9		1 1		9					
Part N of Schedule D		10a	- ' '	10a							
1		b	·								
13   Investments—program-related See Part IV, line 11   13   13   14   Intangible assets   14   15   15   15   15   15   15   15					100	10c	<del></del>				
13   Investments—program-related See Part IV, line 11   13   14   Intangble assets   14   15   Other assets See Part IV, line 11   15   Total assets. Add lines 1 through 15 (must equal line 34)   700, 223   16   720, 276   17   Accounts payable and accrued expenses   27,700   18   18,600   19   Deferred revenue   20   Tax-exempt bond liabilities   20   21   Escrow account liabilities   22   Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule D   22   Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule D   22   22   23   24   Unsecured notes and loans payable   25   Other liabilities. Add lines 17 through 25   27,700   26   18,600   27,700   27,700   28   27,700   29   28   701,676   28   29   27,700   29   29   27,700   29   20   27,700   20   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   27,700   27,700   28   27,700   28   27,700   29   27,700   29   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,700   20   27,70		11	•		461,281		<u>_5</u>	28,	712		
14		1									
15 Other assets See Part IV, line 11   16   Total assets. Add lines 1 through 15 (must equal line 34)   700,223   16   720,276   17   700,000   17   17   17   17   17   17   17											
16   Total assets. Add lines 1 through 15 (must equal line 34)   700 , 223   16   720 , 276     17   Accounts payable and accrued expenses   17   18   18 , 600     18   Grafts payable   27 , 700   18   18 , 600     19   Deferred revenue   20   Tax-exempt bond liabilities   20   21   20     20   Tax-exempt bond liability Complete Part IV of Schedule D   21   22   23   24   24   24     21   Earow account liability Complete Part IV of Schedule D   21   22   24   24   24   24   24   25   25		14	14								
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Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34.  17 Unrestricted net assets 18 Temporarily restricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here Danie and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Total net assets or fund balances 32 Total labilities and net assets/fund balances 33 Total labilities and net assets/fund balances 34 Total labilities and net assets/fund balances 36 Total statements and Reporting  1 Accounting method used to prepare the Form 990			·								
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Temporarily restricted net assets  27 Unrestricted net assets  28 Temporarily restricted net assets  29 Permanently restricted net assets  Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  33 Total net assets or fund balances  34 Total liabilities and net assets/fund balances  700,223 34 720,276  Part XI Financial Statements and Reporting  Yes No  Accounting method used to prepare the Form 990 □ Cash X Accrual □ Other  Were the organization's financial statements audited by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to lines 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?  2a X  S 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?	es		_	🕻 and		1					
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Part XI Financial Statements and Reporting  Yes No Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to lines 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?  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?	E I		•								
Part XI Financial Statements and Reporting  Yes No Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to lines 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?  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?	Ĕ			. —		29					
Part XI Financial Statements and Reporting  Yes No Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to lines 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?  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?	正			e ▶ ∐		1					
Part XI Financial Statements and Reporting  Yes No Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to lines 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?  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?	٥					1					
Part XI Financial Statements and Reporting  Yes No Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to lines 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?  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?	ets.										
Part XI Financial Statements and Reporting  Yes No Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to lines 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?  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?	SS		-	· · · · · · · · · · · · · · · · · · ·							
Part XI Financial Statements and Reporting  Yes No Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to lines 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?  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?	₹۱		-	other funds	670 500				<del></del>		
Part XI Financial Statements and Reporting  Yes No Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to lines 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?  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?	ξ			•							
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Accounting method used to prepare the Form 990		III A	Financial Statements and Reporting	<del></del>		<del></del>		.,	Г <del></del>		
Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to lines 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?  2a	1	Acc	ounting method used to prepare the Form 990	ash 🗓 Accrual 🗆 Ot	her		F	Yes	NO		
b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to lines 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?  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 X	_		• • • • • • • • • • • • • • • • • • • •				22		x		
c If "Yes" to lines 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?  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 X			-	·	•			X			
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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 X	J										
the Single Audit Act and OMB Circular A-133?	За										
							30		x		
	b		-	ıts?							

#### **SCHEDULE A**

(Form 990 or 990-EZ)

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

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

WALLINGFORD FOINDATION

Employer identification number

			MATITINGFORD	TOOKDAT TOK			_				. – <i>2 3 1 3</i> 4 (	70	
Pa	rt 1	Reas	son for Public Charity	Status (All organizations	s must c	omplete	e this p	oart.) (	see in	structi	ions)		
The o	rgar	nization is not	a private foundation because	e it is (Please check only <b>one</b> or	ganization	1)							
1		A church, co	nvention of churches, or ass	ociation of churches described in	section	170(b)(1)(	A)(i)						
2	П		scribed in section 170(b)(1)(				,,,						
3	П			ce organization described in sect	tion 170/b	)(1)(A)(ui)	(Attach	Sched	Jle H )				
4	П			d in conjunction with a hospital de						he hosp	utal's name		
		city, and stat	-	and the second s				,,,,,,,,,,,,			intai o marrio,		
5		•		of a college or university owned o	r operated	l by a gov	ornmont	al unit de	ne cribos	l in			
J				•	operated	i by a govi	citiiiietii	ai uiiit ut	SSCIIDEC	1 11 1			
e	$\Box$		(b)(1)(A)(iv). (Complete Part	•	-4: 470	/I- \							
6	$\dashv$		•	overnmental unit described in se			•			6.1			
7	Ш			substantial part of its support from	n a goverr	imentai ur	nit or troi	n the ge	nerai pi	JDIIC			
			section 170(b)(1)(A)(vi). (C	·									
8	37			70(b)(1)(A)(vi). (Complete Part I									
9	X	_	• •	) more than 33 1/3 % of its supp				•		•			
		•		pt functions—subject to certain e	•								
			=	id unrelated business taxable inc	,		11 tax) fi	om bus	nesses				
1	$\neg$		=	0, 1975 See <b>section 509(a)(2).</b> (		•							
10	_	•	•	exclusively to test for public safety	•	,	,,,,		,				
11	_	ŭ	•	exclusively for the benefit of, to pe			•	•					
		•		ed organizations described in sec	,	, , ,		' '' '		tion			
		<b>509(a)(3)</b> . Ch	neck the box that describes the	ne type of supporting organization	n and com	plete lines	11e thr	ough 11	h				
	_	а 📙 Туре	el <b>b</b> ∐ Typell	c Type III–Function	ally Integra	ated	d	∐ Тур	e III-Ot	her			
e {	_]	By checking t	this box, I certify that the orga	anization is not controlled directly	or indirec	tly by one	or more	disquali	fied				
		persons othe	r than foundation managers	and other than one or more publi	cly suppor	ted organ	ızatıons	describe	ed in see	ction			
		509(a)(1) or s	section 509(a)(2)										
f		If the organiz	ation received a written deter	rmination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	g				
		organization,	check this box										
g		Since August	t 17, 2006, has the organizati	ion accepted any gift or contribut	ion from a	ny of the							_
		following per	rsons?										
		(i) A persor	n who directly or indirectly co	ntrols, either alone or together w	ith person:	s describe	ed in (ii)					Yes	No
		and (III)	below, the governing body of	the supported organization?							11g(i)		
		` '	member of a person describ								11g(ii)		
			ontrolled entity of a person d	* *							11g(iii		
h		• •	• •	e organizations the organization	stroggus						[·· <del>·</del>	<u>"</u>	
			T	1	<del></del>		6454		()				
		of supported nization	(II) EIN	(iii) Type of organization (described on lines 1–9	1 ' '	organization sted in your		ou notify	organizat	is the	(vii) Am supp		
	3			above or IRC section		document?		of your	1	zed in the	555	,	
				(see instructions))			supp	ort?	U	S?			
					Yes	No	Yes	No	Yes	No			
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otal													

Page 2

Pá	art # Support Schedule for O				(1)(A)(iv) and <i>1</i>	170(b)(1)(A)(vi)	
	(Complete only if you che	ecked the box	<u>on line 5, 7, or</u>	8 of Part I.)			
Sec	tion A, Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						1.40
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						_
4	Total. Add lines 1-3						
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, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4		~	**			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						<del></del>
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)			<del>,</del>			.,
11	Total support. Add lines 7 through 10					L	
12	Gross receipts from related activities, etc (	see instructions)				12	
13	First five years. If the Form 990 is for the	organization's first,	second, third, fourtl	h, or fifth tax year a	is a section 501(c)(	(3)	
	organization, check this box and stop here						<b>&gt;</b>
Sec	tion C. Computation of Public Su	pport Percent	age	<u> </u>			
14	Public support percentage for 2008 (line 6,			<b>f</b> ))		14	- %
15	Public support percentage from 2007 Sche	dule A, Part IV-A, lı	ne 26f			15	%_
l6a	33 1/3 % support test—2008. If the organi	zation did not chec	k the box on line 13	3, and line 14 is 33	1/3 % or more, che	eck this box	
	and stop here. The organization qualifies a	is a publicly suppor	ted organization				▶∟
b	33 1/3 % support test—2007. If the organi	zation did not chec	k a box on line 13 c	or 16a, and line 15	ıs 33 1/3 % or more	e, check this	_
	box and stop here. The organization qualif	ies as a publicly su	pported organizatio	n			▶∟
17a	10%-facts-and-circumstances test—200	8. If the organization	n did not check a b	ox on line 13, 16a,	or 16b, and line 14	ıs 10% or	
	more, and if the organization meets the "fac	cts-and-circumstan	ces" test, check this	s box and stop he	re. Explain in Part l	V how the	_
	organization meets the "facts-and-circumst	ances" test. The or	ganızatıon qualıfies	as a publicly supp	orted organization		<b>&gt;</b>
b	10%-facts-and-circumstances test—200	7. If the organization	n did not check a b	ox on line 13, 16a,	16b, or 17a, and lin	(e) 2008  (e) 2008  12  (c) (3)  14  15  heck this box  ore, check this  14 is 10% or  1 IV how the  n line 15 is 10% or  1 IV how the	
	more, and if the organization meets the "fac	cts-and-circumstani	ces" test, check this	s box and <b>stop he</b>	r <b>e.</b> Explain in Part l'	V how the	_
	organization meets the "facts-and-circumst	ances" test. The or	ganization qualifies	as a publicly supp	orted organization		▶ _

Private foundation If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

18

Page 3

Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.)

	(Complete ettly it you ettl	201104 1110 2011 0		,			
	ction A. Public Support	<del> </del>				Г	
Ca	llendar year (or fiscal year beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,623	1,938	975	1,440	30,676	36,65
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	60,227	59,833	41,294	43,268	54,676	259,29
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	61,850	61,771	42,269	44,708	85,352	295,95
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b						
8	Public support (Subtract line 7c from	61,850	61,771	42,269	44,708	85,352	
•	line 6)						295,95
Sec	tion B. Total Support	_					
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	61,850	61,771	42,269	44,708	85,352	295,95
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	24,782	13,749	35,006	29,882	23,454	126,87
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	24,782	13,749	35,006	29,882	23,454	126,87
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)	86,632	75,520	77,275	74,590	108,806	422,82
14	First five years. If the Form 990 is for the o organization, check this box and stop here		<u> </u>	, or fifth tax year as	a section 501(c)(3	)	<u> </u>
	tion C. Computation of Public Su						
15	Public support percentage for 2008 (line 8, o	.,		))		15	69.9938 %
16_	Public support percentage from 2007 Sched			· <u>-</u>		_   16	69.1742 %
	tion D. Computation of Investmer					17	30 0062 %
17	Investment income percentage for 2008 (line Investment income percentage from 2007 S			iuiiiii (1 <i>))</i>		17	30 0062 % 25.7784 %
18 19a	33 1/3 % support tests—2008. If the organ			and line 15 is mo	re than 33 1/3 % a		23.7704 //
	17 is not more than 33 1/3 %, check this box	x and <b>stop here</b> . Th	ie organization qua	lifies as a publicly s	supported organizat	ion	<b>▶</b> 2
b	33 1/3 % support tests—2007. If the organ line 18 is not more than 33 1/3 %, check this						▶ [

Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

**Supplemental Information**. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions) Part IV

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047 2008

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Employer identification number Name of the organization 22-2979408 WALLINGFORD FOUNDATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) 3 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_ \_ \_ \_ \_ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

P	art III Organizations Maintaining	Collections of Art, I	Historical Treas	sures, or Other	Similar Assets	(continued)
3	Using the organization's accession and other items (check all'that apply)	records, check any of the fo	llowing that are a sig	gnificant use of its col	llection	
а	Public exhibition	<b>d</b> Loan o	or exchange progran	าร		
b	Scholarly research	e Other				
С	Preservation for future generations					
4	Provide a description of the organization's coll Part XIV	lections and explain how the	ey further the organiz	ration's exempt purpo	ose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	be maintained as part of the	e organization's colle	ction?		Yes No
P	Trust, Escrow and Custod				ed "Yes" to Form	1 990,
	Part IV, line 9, or reported a				<del>-</del>	
1a	Is the organization an agent, trustee, custodia	n or other intermediary for c	ontributions or other	assets not		🗖
	included on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIV a	and complete the following to	able			<del></del>
					<del></del>	Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year			i	1e	
f	Ending balance				<u>1f</u>	
	Did the organization include an amount on For	m 990, Part X, line 21?				Yes No
	If "Yes," explain the arrangement in Part XIV	1.1.1.1	1 (1) (1 - 2) (1 - 2)		( 0 / 1 ) 40	
Pa	rt V Endowment Funds. Comp					1 (1) 5
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance		······································			
b	Contributions		<u></u>			<u> </u>
C	Investment earnings or losses	_				
d	Grants or scholarships					·
е	Other expenditures for facilities					
_	and programs					
t	Administrative expenses	·				***************************************
g	End of year balance				i	<u> </u>
2	Provide the estimated percentage of the year of					
a	Board designated or quasi-endowment	"				
b	Permanent endowment					
C	Term endowment   %			stand for the		
sa	Are there endowment funds not in the possess	sion of the organization that	are neid and adminis	stered for the		Yes No
	organization by					
	(i) unrelated organizations					3a(i)
	(ii) related organizations	ustad as resulted as Cabadi	de D2			3a(ıi)
	If "Yes" to 3a(ii), are the related organizations I					3b
	Describe in Part XIV the intended uses of the cart VI Investments—Land, Buildi			Part Y June 10		
ra	Investments—Land, Buildi Description of investment	(a) Cost or other basis	(b) Cost or oth		preciation	(d) Book value
	Description of Arrestmont	(investment)	basis (other)	'' '	p. 33/4/1011	(4) DOON FAILUE
1a	Land	<del>                                     </del>	<del>                                     </del>		·	
	Buildings		<del> </del>		_	
	Leasehold improvements					
	Equipment					
	Other					
	Add lines 1a-1e (Column (d) should equal For	rm 990, Part X, column (B),	line 10(c))		<b>•</b>	

Part VII	Investments—Other Securities. See Form	n 990, Part X, line 12.	•
	(a) Description of security or category ' (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial deriv	atives and other financial products		
Closely-held ed	quity interests		
Other			
	_ <b> </b>		
	(b) should equal Form 990, Part X, col (B) line 12)	<b></b>	
Part VIII	Investments—Program Related. See For		
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	<del></del>		
	_ <del>_</del>		
	(b) should equal Form 990, Part X, col (B) line 13)		
Part IX	Other Assets. See Form 990, Part X, line		
-	(a) Descript	ion	(b) Book value
<del></del>		<del></del>	
<del>-</del>			<del> </del>
<del></del> -		<del></del>	<del></del>
<del></del>	<del></del>		<del></del>
			<del></del>
Total (Column	(b) should equal Form 990, Part X, col (B) line 15)		<b>•</b>
Part X	Other Liabilities. See Form 990, Part X, li	ne 25	
	(a) Description of liability	(b) Amount	<del></del>
Federal income	<del></del>		
T COCTOT IT COTTO			
	<del></del>		
<del></del>			
		<del></del>	
	<del></del>		
Total (Column	(b) should equal Form 990, Part X, col (B) line 25)	<u> </u>	
	vide the text of the footnote to the organization's financial	<del></del>	ion's liability for

uncertain tax positions under FIN 48

P	art XI Reconciliation of Change in Net Assets from Form 990 to Fig	inand	cial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	88,762
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	26,657
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	62,105
4	Net unrealized gains (losses) on investments			4	-32,952
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	32,952
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	29,153
_ <b>P</b> a	art XII Reconciliation of Revenue per Audited Financial Statements	s Wit	th Revenue per Retu	ırn	
1	Total revenue, gains, and other support per audited financial statements		ļ	1	82,329
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			ŀ	
а	Net unrealized gains on investments	2a	-32,952	1	
b	Donated services and use of facilities	2b		1	
С	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIV)	2d		1	
е	Add lines 2a through 2d			2e	-32,952
3	Subtract line 2e from line 1			3	115,281
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	-26,519	]	
С	Add lines 4a and 4b			4c	-26,519
_5_	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)		<u></u>	5	88,762
<u> P</u> :	art XIII Reconciliation of Expenses per Audited Financial Statement	ts W	ith Expenses per Re	<u>eturn</u>	
1	Total expenses and losses per audited financial statements		ļ	1	53,176
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			1	
а	Donated services and use of facilities	2a	,	1	
b		2b			
С		2c		1	
d	Other (Describe in Part XIV)	2d		1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	ſ		3	53,176
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а		4a	0.5.51.0	1	
b	Other (Describe in Part XIV)	4b	-26,519		06 -10
С	Add lines 4a and 4b		-	4c	-26,519
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	26,657
	ert XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a		4, Part IV, lines 1b		
	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b				
	PART XI, LINE_8 RECONCILATION_OF CHANGES -	OTI	HER		
1	DIRECT FUNDRAISING EXPENSE		\$		2 <u>6,519</u>
_			<del>-</del>		
-1	<u> DIRECT FUNDRAISING EXPENSE</u>		- <del>-</del> <del>-</del> \$		_ <u>-26,519</u>
_					
_1	PART XII, LINE 4B - REVENUE AMOUNTS INCLUDED	ON_	<u> кетоки – отн</u>	FK -	
1	DIRECT FUNDRAISING EXPENSE		\$		-26,519
			. <b></b>		
_			<b>- -</b>		

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

2008	Open to Public
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▶ Attach to Form 990.

× ŝ Inspection X Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed (h) Purpose of grant or assistance ☐ Yes Employer identification number non-cash assistance (g) Description of 22-2979408 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisal, assistance other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (c) IRC section if applicable General Information on Grants and Assistance Enter total number of section 501(c)(3) and government organizations (b) EIN WALLINGFORD FOUNDATION the selection criteria used to award the grants or assistance? (a) Name and address of organization Enter total number of other organizations or government Name of the organization Part ! Part II

Schedule I (Form 990) 2008

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

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ge	
Д.	I

22-2979408

Schedule | (Form 990) 2008 WALLINGFORD FOUNDATION

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of (c) Amount of cash grant Use Schedule I-1 (Form 990) if additional space is needed. (b) Number of recipients (a) Type of grant or assistance Part IV Part III

#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
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Name of the organization

WALLINGFORD FOUNDATION

Employer identification number 22-2979408

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990 FORM 990 REVIEWED AND APPROVED BY TREASURER PRIOR TO MAILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
TRUSTEES ARE SURVEYED EACH YEAR ON POTENTIAL CONFLICTS OF INTEREST.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE GENERAL PUBLIC UPON WRITTEN REQUEST.

Form <b>990</b>	<u> </u>	Special Events Schedule								
Form <b>990</b>	For calendar year 2008, or ta	x year beginning	7/01/08 , and	d ending	6/30/09	2008				
ame .					Employer Ider	tification Numbe				
WALLINGFORD	FOUNDATION				22-2979	408				
	(A)	(B)	(C)	Oth		Total				
Gross receipts	30,582	24,094	0			54,67				
Less contributions Gross revenue	30,582	24,094	0		0 -	54,67				
Less direct expenses	4	10,945				26,51				
Net income (loss)	15,008	13,149	0			28,15				
(B) (C) Others	ANNUAL ROTARY	BBQ								

• ,

## Form **8868**

(Rev April 2009)

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

(1,01,1,01,1,01)	-, T			_						
Department of the Internal Revenue			► Fil	e a separate ap -	plication for each	return.				
		omatic 3-Month Extensi	on, comple	ete only Part I a	nd check this box					▶ X
<ul><li>If you are</li></ul>	filing for an Add	ditional (Not Automatic)	3-Month E	ktension, comp	lete only Part II (o	n page 2 of this for	m)			
		ess you have already beer								
Part I		3-Month Extensio								
A corporation Part I only	required to file I	Form 990-T and requesting	an autom	atic 6-month ext	ension—check this	box and complete				▶ □
All other corpo	orations (includir ome tax returns	ng 1120-C filers), partnersi	nips, REMI	Cs, and trusts m	ust use Form 7004	to request an exte	nsion of			, П
		nerally, you can electronica	ally file Form	n 8868 if voi: wa	ent a 3-month auton	natic extension of t	ıme to file			
		(6 months for a corporati								
		e additional (not automati			•					
		solidated Form 990-T Ins						nm		
		electronic filing of this forn								
Туре ог	T	npt Organization						yer ide	ntification nu	mber
print								•		
File by the		FORD FOUNDAT					22-2	<u> 2979</u>	408	
due date for filing your return See	Number, stree P.O. BO	et, and room or suite no If OX 213	a P.O box	, see instruction	s					
instructions	City, town or p	oost office, state, and ZIP of		foreign address	s, see instructions	-				
Check type of	return to be fil	ed (file a separate applica	tion for eac	ch return)						
X Form 99			П	Form 990-T (c	orporation)			Г	Form 4720	
Form 99					ec 401(a) or 408(a	) trust)			Form 5227	
Form 99	0-EZ		П		ust other than abov				Form 6069	
Form 99	0-PF		П	Form 1041-A		-,			Form 8870	
		<del></del> -	<u> </u>		·					
The books	are in the care of	of <b>JIM WOOD</b>								
Telephone				FAX No I						_
-		have an office or place of								▶ ∐
		, enter the organization's f	our digit Gr	oup Exemption	Number (GEN)		If this is			
	oup, check this			of the group, ch	eck this box	▶ 📙 and a	attach		•	
list with the na	ames and EINs	of all members the extensi	on will cove	er						
		month (6 months for a cor , to file the exempt organiz								
for the org	ganızatıon's <b>re</b> tu	rn for								
	alendar year	or								
<b>▶</b> X ta	ax year beginnin	g 7/01/08, and	ending	6/30/09						
2 If this tax	year is for less t	han 12 months, check rea	son [	Initial return	Final return	Change i	n accoun	ting per	nod	
• • •		m 990-BL, 990-PF, 990-T	, 4720, or	6069, enter the	tentative tax,					
		edits See instructions					3a	\$		-
		m 990-PF or 990-T, enter	-		s estimated tax		]	١.		
		ny prior year overpaymen					3b	\$		
		e 3b from line 3a Include			•					
	•	or, if required, by using EF	iro (Elect	ionic rederal la	ax Payment		1_			
	See instructions	o on plastropia final willed	rough costs	this East 2000	Farm 0450 50	) 4 F 0070 5	3c	<b>)</b>		
<b>aution.</b> If you a r payment instr		e an electronic fund withd	awai With	uns rorm 8868,	see Form 8453-EC	vana ⊢orm 8879-E	<u>:</u> U			
		Reduction Act Notice,	no Inst	ntions.					0000	
or Privacy Act	and LaherMou	. Reduction Act Notice, S	ee mstru(	AUUIIS.				F	om 8868 (R	ev 4-2009)