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

OMB No 1545-0052 2008

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2008, or tax year beginning 10/01/08 9/30/09 , and ending Initial return Final return Amended return G Check all that apply Address change Name change Name of foundation Employer identification number Use the IRS 22-2571912 label. JERROLD SALMANSON FOUNDATION Telephone number (see page 10 of the instructions) Otherwise. 401-274-3400 print Number and street (or P O box number if mail is not delivered to street address) Room/suite or type. 155 SOUTH MAIN STREET If exemption application is pending, check here See Specific City or town, state, and ZIP code D 1. Foreign organizations, check here Instructions. **PROVIDENCE** RI 02903 2. Foreign organizations meeting the Check type of organization |X| Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust | Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here X Cash J Accounting method Fair market value of all assets at end Other (specify) If the foundation is in a 60-month termination of year (from Part II, col (c), 310, 987 (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here line 16) ▶\$ Part I Analysis of Revenue and Expenses (The (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net for chantable expenses per total of amounts in columns (b), (c), and (d) may not necessarily books income income purposes equal the amounts in column (a) (see pg. 11 of the instructions)] (cash basis only) 15,025 Contributions, gifts, grants, etc., received (attach schedule) Check ► If the foundation is **not** required to attach Sch B 2 Interest on savings and temporary cash investments 3 10,831 10,831 Dividends and interest from securities 4 Gross rents Net rental income or (loss) b ANNED MAR -34,609 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 100,739 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns & allowances b Less Cost of goods sold Gross profit or (loss) (attach schedule) C 0 11 Other income (attach schedule) ப -8,748 10,836 Total. Add lines 1 through 11 12 13 Compensation of officers, directors, trustees, etc. Expensi 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) STMT 1 1,250 1,250 Accounting fees (attach schedule) h Operating and Administrative 2010 Other professional fees (attach schedule) 17 Interest 85 216 Taxes (attach schedule) (see page 14 of the instructions) STMT 2 Odden. UT 19 Depreciation (attach schedule) and depletion 20 21 Travel, conferences, and meetings 22 Printing and publications 1,638 1,372 266 STMT 3 23 Other expenses (att sch) Total operating and administrative expenses. 3,104 1,372 1,601 Add lines 13 through 23 30,560 30,560 Contributions, gifts, grants paid 25 1,372 32,161 33,664 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12. -42,412 Excess of revenue over expenses & disbursements 9,464 Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-) Form 990-PF (2008)

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

275,161

4

5

6

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5)-Part II, column (b), line 30

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income			
(a) List and descr 2-story bnck war	tibe the kind(s) of property sold (e.g., real estate ehouse, or common stock, 200 shs MLC Co.)	1	(b) How acquired (P—Purchase D—Donation	(c) Date acq (mo , day,	
1a SEE WORKSHEET		-			
b		 			
<u> </u>			 		
<u>d</u>	-				
_ e	(f) Depreciation allowed	(a) Cost o	or other basis	-	h) Gain or (loss)
(e) Gross sales price	(or allowable)		ense of sale	•	e) plus (f) minus (g)
а					
b					
С					
d					
е					
Complete only for assets showing	g gain in column (h) and owned by the fo		1		Gains (Col (h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i)		, but not less than -0-) or esses (from col (h))
			•		
ab				·	
C					
d					
e					
2 Capital gain net income or (net c	apital loss) If gain, also enter in If (loss), enter -0- in			2	-34,609
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and (6	_			
	, column (c) (see pages 13 and 17 of the	·			
If (loss), enter -0- in Part I, line 8				3	······································
Part V Qualification U	nder Section 4940(e) for Reduc	ed Tax on Net	Investment Incom	ne	
	nis part blank ction 4942 tax on the distributable amoun ilify under section 4940(e). Do not compl		base period? Yes	X No	
1 Enter the appropriate amount in	each column for each year, see page 18	of the instructions	before making any entri	es	
(a) Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying distribution		(c) e of nonchantable-use asse	ts	(d) Distribution ratio col (b) divided by col (c))
2007		,797	352,2	39	0.039169
2006	16	,387	352,8		0.046438
2005			304,8		
2004			271,7		
2003		50	247,6	33	0.000202
2 Total of line 1, column (d)				2	0.085809
_	5-year base period—divide the total on I has been in existence if less than 5 years	•		3	0.028603
•	able-use assets for 2008 from Part X, line			4	286,458
	iolo-use assets for 2000 from 1 are A, fine				
5 Multiply line 4 by line 3			•	. 5	8,194
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)			6	95
7 Add lines 5 and 6				7	8,289
8 Enter qualifying distributions from If line 8 is equal to or greater that	n Part XII, line 4 in line 7, check the box in Part VI, line 1b	, and complete that	t part using a 1% tax rat	8 e See	32,161
the Part VI instructions on page	18				Form 990-PF (2008

Form	990-PF (2008) JERROLD SALMANSON FOUNDATION 22-2571912		F	age 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling letter (attach copy of ruling letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		_	<u>95</u>
	here ▶ X and enter 1% of Part I, line 27b	•	•	,
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			95
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			95
6	Credits/Payments			
а	2008 estimated tax payments and 2007 overpayment credited to 2008 6a 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			95
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2009 estimated tax ▶ Refunded ▶ 11		_	
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b	l	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	A 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	ļ .	Х
	If "Yes," attach the statement required by General Instruction T		1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) MA, RI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			<u> </u>
-	or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on			
	page 27)? If "Yes," complete Part XIV	9	1.	_ X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
-	names and addresses	. 10		<u> </u>
		Form 9	90-PF	(2008)

Form	990 PF (2008) JERROLD SALMANSON FOUNDATION 22-257	1912 _			F	age 5
P:	art VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption a	ipplication?		_13	_X_	<u> </u>
	Website address ► N/A					_
14		Telephone no	401-2	74-	340	0
	155 SOUTH MAIN ST.		0000			
	Located at ▶ PROVIDENCE, RI	ZIP+4 ▶	02903	•		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	s 1	4-1			
	and enter the amount of tax-exempt interest received or accrued during the year	<u>▶ </u>	15	_		
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Reg	uirea			V	L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	· · · · · · · · · · · · · · · · · · ·	□ v	X No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	A NO			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	Yes	X No			
	disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No X No X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person. (5) Transfer any income or assets to a disqualified person (or make any of either available for		110			
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if					
	the foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Re					
-	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	•	▶ 🗌			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, th	at	_			
	were not corrected before the first day of the tax year beginning in 2008?			1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a priva	te				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and	_				
	6e, Part XIII) for tax year(s) beginning before 2008?	∐ Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)	(2)				
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)			2b		X
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years her	re				
	▶ 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business	П.,	X No			
	enterprise at any time during the year?	∐ Yes	X No			
b	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation of					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the large 10 and)5 C				
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		N/A	3b		1
4~	foundation had excess business holdings in 2008.)	irnoses?	14/14	4a	 	x
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable pu			70	-	-
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopard charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning			4b	1	x
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning	.5 2000:				 _

Form	1990-PF (2008) JERROLD SALMANSON FOUNDATION	22-2	571912				Page 6
Pa	art VII-B Statements Regarding Activities for Which F	orm 4720 May Be	Required (co	ntinue	:d)		
5a	During the year did the foundation pay or incur any amount to			_	_		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (sec	tion 4945(e))?		Yes [X No	1 1	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,				1 1	
	directly or indirectly, any voter registration drive?			Yes [X No		
	(3) Provide a grant to an individual for travel, study, or other similar purpos	es?		Yes [X No		
	(4) Provide a grant to an organization other than a charitable, etc., organization		_		_		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the			Yes [X No		
	(5) Provide for any purpose other than religious, charitable, scientific, litera		_	_	_		
	educational purposes, or for the prevention of cruelty to children or anir			Yes	X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify		escribed in	•		1	
_	Regulations section 53 4945 or in a current notice regarding disaster assist				N/A	5b	ĺ
	Organizations relying on a current notice regarding disaster assistance che			▶Ĭ	¬ '		
С	If the answer is "Yes" to question 5a(4), does the foundation claim exempti						
ŭ	because it maintained expenditure responsibility for the grant?		N/A	Yes	□ No		
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)	1					
6a	Did the foundation, during the year, receive any funds, directly or indirectly,						
va	on a personal benefit contract?	to pay promisino		Yes	X No		
ь	Did the foundation, during the year, pay premiums, directly or indirectly, on	a nersonal henefit contr	_	, , ,	==,	6b	x
U	If you answered "Yes" to 6b, also file Form 8870	a personal benefit conti	act			"	
70	At any time during the tax year, was the foundation a party to a prohibited t	av shelter transaction?		Yes	X No		
/a	If yes, did the foundation receive any proceeds or have any net income attr		_	, 55	N/A	7b	
	art VIII Information About Officers, Directors, Trustees			/ Paid			
F	and Contractors	, i oulidation main	agero, mgm,	, i dia	p.o,	555,	
_	List all officers, directors, trustees, foundation managers and their comp	operation (see page 22)	of the instruction	ne)			
	List all officers, directors, trustees, foundation managers and their comp	(b) Title, and average		(d) C	ontributions to	T (e)	Expense
	(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	plans	ontributions to oyee benefit and deferred npensation	acc	ount other lowances
	ERROLD A. SALMANSON PROVIDNECE	TRUSTEE			ilpensation	†	iowanoco_
		0		اه	c	,	0
	55 SOUTH MAIN ST RI 02903			1			
						 	
			Į				
				- 	·	+	
	O	ed en line 4 coo nogo	23 of the instru	ctions\	-		
2	Compensation of five highest-paid employees (other than those include	ed on line 1—see page	23 Of the mistru	cuons _j .			
	If none, enter "NONE."		<u> </u>	(d) Co	ontributions to	Τ	
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	emplo	yee benefit		Expense ount, other
	(2) (12.110 21.12 2	devoted to position	(0) 50	pians a	and deferred appensation		lowances
			 	 	·	+	
N	ONE						
				 -		+	
				1		1	
			-	+		+	
			1				
			 	+		+-	
			ļ	 		+	·
						1	
							
Tota	al number of other employees paid over \$50,000						
					F	orm 39	0-PF (2008)

Form 990-PF (20)	08) JERROLD SALMANSON FOUNDATION	22-2571912	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foun and Contractors (continued)	ndation Managers, Highly Paid En	
3 Five highes	st-paid independent contractors for professional services (see page	23 of the instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
			
Total number of	others receiving over \$50,000 for professional services		<u></u>
Part IX-A	Summary of Direct Charitable Activities		
	n's four largest direct charitable activities during the tax year. Include relevant statist and other beneficiaries served, conferences convened, research papers produced, e		Expenses
1 N/A			
2			
3			
			_
4			
Part IX-B	Summary of Program-Related Investments (see page	ge 23 of the instructions)	
	largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 N/A			
2			
-			
	-related investments. See page 24 of the instructions		
3			
Total. Add lines 1	1 through 3		

Form **990-PF** (2008)

32,161

32,066

3a

3b

4

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6

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Pa	rt XIII Undistributed Income (see page 26 o	f the instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2008 from Part XI,	Corpus	Years prior to 2007	2007	2008
	line 7				14,228
2	Undistributed income, if any, as of the end of 2007				
	Enter amount for 2007 only			16,648	
b	Total for prior years: 20 , 20 , 20		· · · · · · · · · · · · · · · · · · ·		
3	Excess distributions carryover, if any, to 2008				
а	From 2003	_			
	From 2004	_			
	From 2005				
	From 2006	4			
	From 2007	4			
	Total of lines 3a through e				
4	Qualifying distributions for 2008 from Part XII.				
	line 4 \(\bar{\sigma} \) \(\bar{32,161} \)			16,648	
	Applied to 2007, but not more than line 2a			10,040	
b	Applied to undistributed income of prior years (Election				
	required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				14,228
	Applied to 2008 distributable amount	1,285			11,220
	Remaining amount distributed out of corpus	1,265			
5	Excess distributions carryover applied to 2008				
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a))				
6	Enter the net total of each column as				
_	indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,285			
	Prior years' undistributed income Subtract				······································
D	line 4b from line 2b				
_	Enter the amount of prior years' undistributed				***************************************
C	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b Taxable	· · · · · · · · · · · · · · · · · · ·			
-	amount—see page 27 of the instructions				
е	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				
Ī	4a from line 2a Taxable amount—see page				
	27 of the instructions				
f	Undistributed income for 2008 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2009				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2003 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2009.				
	Subtract lines 7 and 8 from line 6a	1,285			
10	Analysis of line 9.				
а	Excess from 2004				
b	Excess from 2005				
С	Excess from 2006				
d	Excess from 2007				
e	Excess from 2008 1, 28	5			

Pa	rt XIV Private Operating Fou	ındations (see p	age 27 of the inst	ructions and Par	t VII-A, question 9)		
1a	If the foundation has received a ruling or	determination letter th	nat it is a private opera	ting			
	foundation, and the ruling is effective for 2008, enter the date of the ruling						
b	Check box to indicate whether the foundation	ation is a private opera	ating foundation descri	bed in section 4	1942(j)(3) or 4942	?(j)(5)	
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total	
	income from Part I or the minimum	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total	
	investment return from Part X for	(4)		1		· · · · · ·	
	each year listed	: !					
b	85% of line 2a						
	Qualifying distributions from Part XII,				-	•	
С							
	line 4 for each year listed				 		
d	Amounts included in line 2c not used directly						
	for active conduct of exempt activities						
е	Qualifying distributions made directly						
	for active conduct of exempt activities						
	Subtract line 2d from line 2c	<u></u>					
3	Complete 3a, b, or c for the						
	alternative test relied upon						
а	"Assets" alternative test—enter						
	(1) Value of all assets						
	(2) Value of assets qualifying under						
	section 4942(j)(3)(B)(i)						
b	"Endowment" alternative test—enter 2/3 of						
	minimum investment return shown in Part						
	X, line 6 for each year listed		<u> </u>	<u> </u>			
С	"Support" alternative test—enter						
	(1) Total support other than gross						
	investment income (interest,						
	dividends, rents, payments on						
	securities loans (section						
	512(a)(5)), or royalties)	*					
	(2) Support from general public						
	and 5 or more exempt organizations as provided in						
	section 4942(j)(3)(B)(iii)						
	(3) Largest amount of support from	-					
	an exempt organization				:		
	(4) Gross investment income						
Pa	rt XV Supplementary Inforr	nation (Complete	e this part only if	the foundation I	nad \$5,000 or more	in assets	
•	at any time during the				·		
1	Information Regarding Foundation Ma						
а	List any managers of the foundation who		re than 2% of the total	contributions received	d by the foundation		
	before the close of any tax year (but only						
	JERROLD A. SALMANSON	_					
b	List any managers of the foundation who	own 10% or more of	the stock of a corpora	tion (or an equally larg	je portion of the		
	ownership of a partnership or other entity						
	NONE	,	•				
2	Information Regarding Contribution, G	rant, Gift, Loan, Sch	olarship, etc., Progra	ms:			
_	— — —				does not accept		
	Check here ▶ ☐ If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or						
	organizations under other conditions, co	-	· · · · · · · · · · · · · · · · · · ·	,			
	The name, address, and telephone num			ıld be addressed.			
а	N/A	ou or the person to w	applications silve				
	,						
b	The form in which applications should be	submitted and inform	nation and materials th	ev should include		-	
	N/A			•			
							
	N/A		<u></u>				
d	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable t	ields, kinds of instituti	ons, or other factors		
	SEE STATEMENT 5					000 PF	

DAA

3 Grants and Contributions Paid During the			, .	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor			
Name and address (home or business) a Paid during the year SEE STATEMENT 6	any foundation manager or substantial contributor	recipient	contribution	30,560
Total b Approved for future payment N/A			. ▶ 3a	30,560
Total		<u> </u>	▶ 3b	

DAA

Part XVI-	A Analysis of Income-Producing Ac	tivities				
nter gross an	nounts unless otherwise indicated		ed business income	Excluded	by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	Related or exempt function income (See page 28 of
1 Program s	ervice revenue			code		the instructions)
a			<u> </u>	-		
				1		
ď ——				 		
e		-		1		
f						
g Fees a	and contracts from government agencies					
2 Membersh	up dues and assessments					
	savings and temporary cash investments			14	5	
	and interest from securities			14	10,831	······································
	income or (loss) from real estate					
	inanced property			-		
	ebt-financed property income or (loss) from personal property			1	-	
	stment income			1 -		
	iss) from sales of assets other than inventory			14	-34,609	
-	e or (loss) from special events					
	fit or (loss) from sales of inventory					
	nue a					
		_		_		
c		-		-		
		-				
ee	Add solumno (b) (d) and (o)	- 			-23,773	0
	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e)	L	<u> </u>	1	13	
	et in line 13 instructions on page 28 to verify calculat	ions)				
Part XVI-I			ent of Exempt P	urpose	s	
Line No.	Explain below how each activity for which incom	e is reported in c	column (e) of Part XVI	-A contrib	outed importantly to	
Elile No. ▼	the accomplishment of the foundation's exempt	purposes (other	than by providing fund	ds for suc	h purposes) (See	
	page 28 of the instructions)					
N/A_						
				-		
. <u> </u>						
						
·						
				_		
					··	-
 .						
	 					
	+					
			 			Form 990-PF (2008

orm	<u>1990-PF (</u>	2008) JERROLD S	SALMANS	ON FOUNDATI	ON		<u> 22-25</u> 7:	L912			Pa	ge 13
Pa	ırt XVII	Information Reg	_	insfers To and Tr	ansaction	is an	d Relationsh	ips With N	loncharital	ole	_	
1	Did the c	organization directly or ind	rectly engag	e in any of the following	with any ot	her or	ganization descr	ibed			Yes	No
		n 501(c) of the Code (other		•	-		-					
	organiza				•							
а	_	s from the reporting found	lation to a no	ncharitable exempt ord	anization of							
_	(1) Cash	_		monantable exempt erg	a24.1011 01					1a(1)	1 1	X
	• •											X
	(2) Othe									1a(2)		
D		insactions										37
		s of assets to a noncharit	•	•						1b(1)	\vdash	<u> </u>
	(2) Purc	hases of assets from a no	oncharitable i	exempt organization						1b(2)		X
	(3) Rent	al of facilities, equipment	, or other ass	ets						1b(3)		<u> </u>
	(4) Rein	nbursement arrangements	S							1b(4)		<u> </u>
	(5) Loar	is or loan guarantees								1b(5)		X
	(6) Perfe	ormance of services or mi	embership or	fundraising solicitation	s					1b(6)		X
С	Sharing	of facilities, equipment, m	ailing lists, o	ther assets, or paid em	ployees					1c		X
	•	swer to any of the above i	•	· · · · · · · · · · · · · · · · · · ·		n (b) :	should always si	now the fair m	arket			
_		the goods, other assets, o										
		any transaction or sharing										
											monto	
<u>\ \ N</u>	a) Line no	(b) Amount involved	(c) Name	of noncharitable exempt o	rganization	(d)	Description of tra	insiers, transaci	tions, and snann	y arrange	ements	
Ν/.	<u> </u>		 									
			ļ									
												
							_			_		
			1									
			<u> </u>	· ····								
			İ		· · · · · · · · · · · · · · · · · · ·	-			<u> </u>			
			 									
			 									
		 -	<u> </u>						 			
			 									
			<u> </u>									
2a		undation directly or indirectly or indirectly of the	-							Y	es X	No
b		complete the following so										
		(a) Name of organization		(b) Type of organiz	zation			(c) Description	on of relationship			
	N/A											
_												-
								···········				-
					L							
	Under per	nalties of perjury, I declare that true, correct, and complete	it I have examii Declaration of i	ned this return, including ac preparer (other than taxpay	companying s er or fiduciary)	chedule	es and statements, ed on all informatio	and to the best n of which prepa	of my knowledge arer has anv knov	e and vledae		
		101		property (outlot trial, tempe)	12/	/		Truste				
	14	7/4 - 11 - 12 - 12 - 12 - 12 - 12 - 12 - 1	wan	<u> </u>	14/12/	/0	_	1/wsce	<u>e</u>			
اره	Signa	ature of officer or trustee			Date /			itle		_		
Sign Here	//						Date		Prepa	rer's ident	fying	
Ŧ	U_{\perp}					}		Check if	numb	er (see Si	gnature o	on
5	_ર્જૂ <u>₹</u>	Preparer's						self-employed	d ▶ 🗍 page:	30 of the ir	structions	s)
တြ	Paid Preparer's Use Only	•	. ROSENS	STEIN, CPA				',-		0083		
	P P P P P P P P P P P P P P P P P P P	Firm's name (or yours if		TEIN, HALPE	R & MA	SET	LI, LLP		1	· · · · · ·		
	٦ ٦	, , ,		DEN LANE	v. 1-45	ـــ ســـ ســــــــــــــــــــــــــــ	,		EIN ▶ 05	-039	185	7
		self-employed), address,		DENCE, RI	02904		·		Phone no 40			
		and ZIP code	LVOAT	DUNCE, RI	レムフリエ				CHOILE NO TE O	<u> </u>		

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2008

Name of the organization

Employer identification number

JERROLD SALMAN	ISON FOUNDATION	22-2571912
Organization type (check one))	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	overed by the General Rule or a Special Rule . (Note . Only a section 501(c)(7), (8), or (for both the General Rule and a Special Rule. See instructions.)	10)
General Rule		
	g Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mone) e contributor. Complete Parts I and II	y or
Special Rules		
under sections 509(a)) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the (1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990 and II	on of the
during the year, aggre), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one or gate contributions or bequests of more than \$1,000 for use exclusively for religious, cha ducational purposes, or the prevention of cruelty to children or animals. Complete Parts	aritable,
during the year, some not aggregate to more the year for an exclusi), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributions for use exclusively for religious, charitable, etc., purposes, but these contributions that box is checked, enter here the total contributions that were receive vely religious, charitable, etc., purpose. Do not complete any of the parts unless the Geration because it received nonexclusively religious, charitable, etc., contributions of \$5,00 cm.	ributions did ed during neral Rule
990-EZ, or 990-PF), but they n	re not covered by the General Rule and/or the Special Rules do not file Schedule B (For nust answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading o neir Form 990-PF, to certify that they do not meet the filing requirements of Schedule B	of their

	3 (Form 990, 990-EZ, or 990-PF) (2008)		Page ⊥ of ⊥ of Part
	rganization OLD SALMANSON FOUNDATION		ployer identification number 2 - 2571912
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JERROLD SALMANSON 155 SOUTH MAIN STREET PROVIDENCE RI 02903	\$ 15,025	Person X Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
NO.	Name, address, and Air + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
NO.	Name, address, and zir + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
140.	mand, asserted, and an in-y	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
,,,,,		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Form 990-PF	Ca	apital Gains and Losses	for Tax on Investme	ent Incor	ne	2008
	For calenda	ar year 2008, or tax year beginning	10/01/08 , and	ending 9	/30/09	
Name					Employer Ider	itification Number
JERROLD SAI	LMANSON	FOUNDATION			22-2571	912
		pe the kind(s) of property sold, e.g., real estate arehouse, or common stock, 200 shs. MLC Co	(b) How	acquired (c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
(1) I SHARES	SILVER			nation		1/22/09
(2) POWER SHA			P			1/22/09
(3) VANGUARD	INTL E		P			1/22/09
	WLD B	OND	P			7/14/09
(5) I SHARES	BARCLA	Y AGG	P			9/15/09
(6) I SHRS DO			P			9/15/09
(7) I SHRS DO	W JONE	S	P			3/04/63
(8)						
(9)						
(10) (11)						
(12)					.	
(13)						
(14)						
(15)						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		(D. D	(m) Contact the basis		(h) Gour	or (loca)
(e) Gross sales p	orice	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(e) plus (or (loss) f) minus (g)
(1) 9,	332		14,78	8		-5,456
	499		19,07			-6,580
(3) 14,	197		29,85			15,654
	748		42,39			-1,647
	399		10,20			199
	101		13,59			-3,495 -1,976
 	463		5,43	-		-1,910
(8)			 			
(9) (10)						
(11)						
(12)						
(13)						
(14)						
(15)						
Complete only for a	seate showing	g gain in column (h) and owned by the f	oundation on 12/31/69			
(i) FMV as of 12		(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(I) Gains (C col (k), but not l Losses (fro	ol (h) gain minus less than -0-) or m col (h))
(1)					 -	-5,456
(2)						-6,580
(3)						15,654
(4)						-1,647
(5)						199
(6)					·	-3,495
(7)						-1,976
(8)					· · · · · · · · · · · · · · · · · · ·	
(9)				_ 		
(10)						
(11)						·
(12)						
(14)						
(15)						

SALMAJFOU JERROLD SALMANSON FOUNDATION 22-2571912 FYE: 9/30/2009	N FOUNDATION Federal (Statements		
35	Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	art I, Line 16b - Accoun	ting Fees	
Description ACCOUNTING FEE TOTAL	Total	Investment	Adjusted Net	Charitable Purpose \$ 1,250
	Statement 2 - Form 990-PF, Part I, Line 18 - Taxes	-PF, Part I, Line 18 - Ta	Kes	e e e e e e e e e e e e e e e e e e e
Description RI ATTORNEY GEN'L FEE MASS FEE FED TAX TOTAL	Fotal \$ 50 35 131 \$ 216	Net Investment \$	Adjusted Net	Charitable Purpose \$ 50 35
	Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses	Part I, Line 23 - Other E	xpenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES BANK COMMISSIONS AND FEES MISC	\$ 1,372 266	\$ 1,372	ស	\$ 266
TOTAL	\$ 1,638	\$ 1,372	o w	\$ 266
				1-3

SALMAJFOU JERROLD SALMANSON FOUNDATION

22-2571912

Federal Statements

FYE: 9/30/2009

Statement 4 - Form 990-PF, Part II, Line 13 - Other Investments

Description					
	_	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
COMMONWEALTH FINANCIAL					
	\$_	315,760 \$	256,680	COST	\$ 292,506
TOTAL	\$_	315,760 \$	256,680		\$ 292,506
Form 990-PF, Part XV	√, Line 1a	a - Managers Who	Contributed Ov	er 2% or \$5	5,000
Name of M	lanager			Amount	_
JERROLD A. SALMANSON			\$		_
TOTAL			\$		<u>0</u>
Form 990-PF, Part	t XV, Line	e 1b - Managers W	/ho Own 10% o	r More Stoc	<u>:k</u>
Name of M	lanager			Amount	_
NONE			\$		_
TOTAL			\$		0
					=

Statement 5 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

THE FOUNDATION DOES NOT ACCEPT UNSOLICITED APPLICATIONS FOR FUNDS. DETERMINATION OF RECIPIENTS OF FUNDS IS MADE AT THE DISCRETION OF THE FOUNDATION MANAGER.

SALMAJFOU JERROLD SALMANSON FOUNDATION 22-2571912 FYE: 9/30/2009

Statemen	to - rorm seu-rr, ran	Av, Line sa - Gr	Statement 6 - Form 990-PF, Part AV, Line 3a - Grants and Contributions Faid During the	•
Name	Address	!		
Address	Relationship	Status	Purpose	Amount
ADELE DUCOFF FDN.	4/N	DIRI.T.C	GENERAI, CHARITARIE	100
ADL	II / II			
, , ,	N/A	PUBLIC	GENERAL CHARITABLE	200
AIPAC	N/A	PUBLIC	GENERAL CHARITABLE	100
ALZHEIMERS	N/A	PUBLIC	GENERAL CHARITABLE	75
	N/A	PUBLIC	GENERAL CHARITABLE	125
	N/A	PUBLIC	GENERAL CHARITABLE	25
AMER. HEART ASSOC.	N/A	PUBLIC	GENERAL CHARITABLE	100
AMERICAN BREAST CANCER	N/A	PUBLIC	GENERAL CHARITABLE	50
AMERICAN CANCER SOCIETY	N/A	PUBLIC	GENERAL CHARITABLE	25
AMERICAN LUNG	N/A	PUBLIC	GENERAL CHARITABLE	25
AMERICAN RED CROSS	N/A	PUBLIC	GENERAL CHARITABLE	50
ARTHRITIS FDN.	N/A	PUBLIC	GENERAL CHARITABLE	20
BETH ISRAEL DEACONESS	N/A	PUBLIC	GENERAL CHARITABLE	100
BLACKSTONE PARK CONSERVAN	N/A	PUBLIC	GENERAL CHARITABLE	100
B'NAI B'RITH	N/A	PUBLIC	GENERAL CHARITABLE	50
BOSTON MARATHON	N/A	PUBLIC	GENERAL CHARITABLE	50
BOSTON UNIVERSITY	N/A	PUBLIC	GENERAL CHARITABLE	100
BOSION UNIVERSIII HILLEL	N/A	PUBLIC	GENERAL CHARITABLE	36

SALMAJFOU JERROLD SALMANSON FOUNDATION 22-2571912 FYE: 9/30/2009

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

a e e e e e	Address			
Address	Relationship	Status	Purpose	Amount
BRANDIES LIBRARY	N/A	PUBLIC	GENERAL CHARITABLE	25
BUREAU OF JEWISH EDUC.	17/17	PIBI.TC	GENERAL, CHARITARLE	50
CALVARY HOSPITAL HOSPICE	V/N			2. 2.
CAMP JORI	N/A	FOBLIC) ()
CI.AI.	N/A	PUBLIC	GENERAL CHARLIABLE	001
	N/A	PUBLIC	GENERAL CHARITABLE	100
CNRC	N/A	PUBLIC	GENERAL CHARITABLE	25
CONGREGATION BETH DAVID	N/A	PUBLIC	GENERAL CHARITABLE	150
CYSTIC FIBROSIS	N/A	PUBLIC	GENERAL CHARITABLE	25
DANA FARBER	N/A	PUBLIC	GENERAL CHARITABLE	1,175
EASTER SEALS	N/A	PUBLIC	GENERAL CHARITABLE	25
THE MEEI	N/A	PUBLIC	GENERAL CHARITABLE	200
FRIENDS OF ISRAELI DEFENS	N/A	PUBLIC	GENERAL CHARITABLE	50
HERCRI	N/A	PUBLIC	GENERAL CHARITABLE	200
HEBREW SENIOR LIFE	N/A	PUBLIC	GENERAL CHARITABLE	25
HIAS	N/A	PUBLIC	GENERAL CHARITABLE	100
HOSF	N/A	PUBLIC	GENERAL CHARITABLE	100
О 6 Н	N/A	PUBLIC	GENERAL CHARITABLE	25
HOSPICE OF THE GOOD SHEPA	N/A	PUBLIC	GENERAL CHARITABLE	20

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SALMAJFOU JERROLD SALMANSON FOUNDATION

Federal Statements

FYE: 9/30/2009

		Year (continued)	Year (continued)	
Name	Address			
Address	Relationship	Status	Purpose	Amount
JDRF	N/A	PUBLIC	GENERAL CHARITABLE	100
JEWISH FED. OF R.I.	v / w	OT TOTAL	ם ופגחומגווי וגמקומה	
CINITA YMMIT	N/A	FUBLIC		000'01
Semestr MI Tesor	N/A	PUBLIC	GENERAL CHARITABLE	200
COSELLIN DIABELES	N/A	PUBLIC	GENERAL CHARITABLE	100
LEOKEMIA & LIMPROMA SOCIE	N/A	PUBLIC	GENERAL CHARITABLE	25
LUSIGARIEN FUN.	N/A	PUBLIC	GENERAL CHARITABLE	2,000
ממאדת הס יוסתאי	N/A	PUBLIC	GENERAL CHARITABLE	25
MAKCH OF DIMES	N/A	PUBLIC	GENERAL CHARITABLE	25
MAKINE TOIS FOR TOIS	N/A	PUBLIC	GENERAL CHARITABLE	100
MIRIAM HOSPITAL FDN.	N/A	PUBLIC	GENERAL CHARITABLE	200
MULTIPLE SCLEROSIS	N/A	PUBLIC	GENERAL CHARITABLE	25
NARRAGANSETT FIREFIGHTERS	N/A	PUBLIC	GENERAL CHARITABLE	25
PANCKEATIC CANCER ACTION	N/A	PUBLIC	GENERAL CHARITABLE	2,000
PARKINSON'S RESEARCH FUN.	N/A	PUBLIC	GENERAL CHARITABLE	50
	N/A	PUBLIC	GENERAL CHARITABLE	50
	N/A	PUBLIC	GENERAL CHARITABLE	200
	N/A	PUBLIC	GENERAL CHARITABLE	40
K.I. FBS	N/A	PUBLIC	GENERAL CHARITABLE	25

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SALMAJFOU JERROLD SALMANSON FOUNDATION

Federal Statements

FYE: 9/30/2009

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

100 100 100 250 25 4,409 50 Amount Purpose GENERAL CHARITABLE Status PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC Relationship Address N/AN/AN/AN/A N/A N/AN/ASOUTH COUNTY HOSPITAL Address SPECIAL OLYMPICS Name TEMPLE EMANU EL SALVATION ARMY TEMPLE BETH EL RISD MUSEUM U-H HILLEL

TOTAL

WHEELER SCHOOL

100

30,560

25

GENERAL CHARITABLE

GENERAL CHARITABLE

GENERAL CHARITABLE

PUBLIC

PUBLIC

N/A

N/A

N/A

UNICEF

WGBH

PUBLIC

50