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## 990-PF

Department of the Treasury Internal Revenue Service Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

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

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

OMB No 1545-0052

2008

Fo	r cal	endar	year 2008, or tax year beginning	10/1/2008 , a	nd ending	9/	/30/2009	
G	Che	ck ali t	hat apply: Initial return F	ınal return 🔲 Aı	mended return		Address change	Name change
U	se th	e IRS	Name of foundation			A E	Employer Identification nu	mber
Iabel. Otherwise, print  COCCHIARO FAMILY FOUNDATION  Number and street (or P O box number if mail is not delive						91-1	909063	
				elivered to street address)	Room/suite	ВТ	elephone number (see pag	e 10 of the instructions)
print or type. P.O. BOX 42			P.O. BOX 42			(603	3)968-8307	
S	•	ecific	City or town, state, and ZIP code			C if	exemption application is pe	nding, check here
In	struc	tions.	HOLDERNESS	NH	03245	D 1.	. Foreign organizations, che	ck here
Н	Che	ck type	e of organization: X Section 501(c)(3) exe	mpt private foundati	on	] 2,	. Foreign organizations mee	eting the 85% test,
	] Se	ction 49	947(a)(1) nonexempt charitable trust	Other taxable private	foundation	<u>،</u> ا	check here and attach con	
1	Fair	marke	t value of all assets at end J Accounting	method <sup>.</sup> X Casl	h		private foundation status wander section 507(b)(1)(A), c	
			m Part II. col (c).	pecify)		Fif	the foundation is in a 60-mi	onth termination
	_	16)	\$ 679,340 (Part I, column (	d) must be on cash bas	sis )	u	nder section 507(b)(1)(B), c	heck here
Pa	rt I	Anai	ysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Not increase		(a) Advisted not	(d) Disbursements
			ts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net investm	ient	(c) Adjusted net income	for chantable purposes
		the am	ounts in column (a) (see page 11 of the instructions) )	books				(cash basis only)
	1	Contril	outions, gifts, grants, etc., received (attach schedule)	10,000	<u> </u>			
	2	Check	If the foundation is <b>not</b> required to attach Sch. B	,, , , ,		,		W
	3	Intere	st on savings and temporary cash investments	0		0	<del></del>	
∌	4	Divide	ends and interest from securities	72			72	
MI N 7	5	a Gross	rents		ļ	0		
			ental income or (loss) 0		<u> </u>			
ĭ	6	. •	ain or (loss) from sale of assets not on line 10	0				
JAN 1 2 Revenue	ا ۔		sales price for all assets on line 6a 0		<u> </u>			
₹¥	7	•	al gain net income (from Part IV, line 2)			0	<del> </del>	
			nort-term capital gain .				0	
	9		re modifications . sales less returns and allowances  O					
SCANNED			sales less returns and allowances  Cost of goods sold  0	•				
2	1		profit or (loss) (attach schedule)	0				
ల్లు	11		income (attach schedule)	0		s re	EIVED O	
(00)	12		Add lines 1 through 11	10,072			9 72	
	13		ensation of officers, directors, trustees, etc	10,072			4 2010	
Expenses	14	•	employee salaries and wages	•	181.J	416 G	1 4 ZUIU , Igh	<del> </del>
ē	15		on plans, employee benefits			-		
S.	16		fees (attach schedule)	0		GO	EN UI O	0
	ļ	Accou	inting fees (attach schedule)	510		6	510	0
tive		Other	professional fees (attach schedule)	_0		0	0	0
Administrati	17	Intere		5			5	
is.	18	Taxes	(attach schedule) (see page 14 of the instructions)	0		0	0	0
ᆵ	19	Depre	ciation (attach schedule) and depletion	0		0	0	
Þ	20	Occup	•					<del></del>
	21		, conferences, and meetings		<del></del> -			<del></del>
and	22		g and publications		-	_	_	
g	23		expenses (attach schedule)	5		0	5	0
atii	24		operating and administrative expenses.	500		^	520	•
er	25		nes 13 through 23 butions, gifts, grants paid	520		0	520	0 18,850
Operating	26		xpenses and disbursements. Add lines 24 and 25	18,850			500	
_	27		<del></del>	19,370		0	520	18,850
			act line 26 from line 12	0 200				
			s of revenue over expenses and disbursements vestment income (if negative, enter -0-)	-9,298		0		
			ted net income (if negative, enter -0-)					
		- nujus	tod not moonie (ii negative, enter -0-)				0	

2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 4 616,788 5 Decreases not included in line 2 (itemize) ▶ 5 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 616,788

Part IV Capital Gains a	nd Losses for Tax on Inves	tment Inco	me		·
	ne kınd(s) of property sold (e g , real estat use, or common stock, 200 shs MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
1a		-			
b					
С					
d					
_e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	or other basis ense of sale	, ,	in or (loss) (f) minus (g)
<u>a</u> (	0		0		
_ <b>b</b>	*		0		
<u>c</u>	<del></del>		0		
<u>d</u> 0	<del></del>	<del> </del>	0		
e Consider only for constants of a	1	h 4h	0		
Complete only for assets sno	wing gain in column (h) and owned				ol (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	, ,	ess of col (i) ol (j), if any		ot less than -0-) <b>or</b> from col (h))
<b>a</b> 0	<del></del>	0VE/ CC	0:	Losses (	iioiii cor (ii))
<b>a</b> 0	+ · · · · · · · · · · · · · · · · · · ·	<del>-</del> · · · ·	0		<del></del>
<u>c</u> 0	-		0		
<b>d</b> 0			0		
e 0			0		
2 Capital gain net income or		so enter in Pa	art I, line 7 \	2	
	or (loss) as defined in sections	1222(5) and	(6):		
	line 8, column (c) (see pages 1	13 and 17 of	the }	ľ	
instructions). If (loss), ente				3	
Part V Qualification Un	der Section 4940(e) for Rec	duced Tax o	on Net Investme	ent Income	
(For optional use by domestic	private foundations subject to t	he section 49	40(a) tax on net i	nvestment income	e. <b>)</b>
If section 4940(d)(2) applies, I	eave this part blank.				
Was the foundation liable for t	he section 4942 tax on the distr	ibutable amo	unt of any vear in	the base period?	☐ Yes ☐ No
	ot qualify under section 4940(e				
	ount in each column for each ye			tions hefore makir	ng any entries
(a)	The cach column for each year	l	; TO OF THE HISTIAC	lions before makir	(d)
Base period years	(b)		(c)	Dis	stribution ratio
Calendar year (or tax year beginning			of nonchantable-use as	(COI (D)	divided by col (c))
2007		185		,400	0.057975
2006		089		,405	0.067230
2005		376		,592	0 068121
2004		694		,976	0.096709
2003	49,	366	464	,900	0.106186
2 Total of line 1, column (d)					ດ ລຸດຄວາ
	or the 5-year base period—divid				0.396221
	undation has been in existence				0.079244
and number of years the re	undation has been in existence	ii icoo tilaii o	ycais	·   •	0.01324
4 Enter the net value of none	charitable-use assets for 2008 f	rom Part X, II	ne 5 .	. 4	485,410
5 Multiply line 4 by line 3 .				5	38,466
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)			6	
<b>7</b> Add lines 5 and 6				7	38,466
<b> </b>					
If line 8 is equal to or great	ns from Part XII, line 4 er than line 7, check the box in		ib, and complete	8 that part using a 1	18,850 % tax rate See
the Part VI instructions on	page 18				

Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of	he ins	truct	ions)
1	a 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		O	) _
	here ▶ ☐ 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		0	1
4	Substitution of the Common substitution of the C		0	<del>  -</del>
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  Credits/Payments			<del>' </del>
_	a 2008 estimated tax payments and 2007 overpayment credited to 2008   6a   0			l
	b Exempt foreign organizations—tax withheld at source . 6b			
	c Tax paid with application for extension of time to file (Form 8868)  6c  0			
	d Backup withholding erroneously withheld  6d	•		
7	Total credits and payments Add lines 6a through 6d	- 4 -	. 0	
8	Enter any penalty for underpayment of estimated tax. Check here		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . 9		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0	
11	Enter the amount of line 10 to be Credited to 2009 estimated tax ▶ 0 Refunded ▶ 11		0	
Pa	rt VII-A Statements Regarding Activities			
1:	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
•	participate or intervene in any political campaign?	1a		X
1	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		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			
(	Did the foundation file Form 1120-POL for this year?	1c		Х
(	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation   \$ (2) On foundation managers   \$			
(	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			ļ
	on foundation managers   \$			l
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		ĺ	
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
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  The state of the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b	N/A	<del>  ^-</del>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	IVA	Х
•	If "Yes," attach the statement required by General Instruction T	<u> </u>		<del>  ^</del>
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	Х	
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	
8 8	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► NH			
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			<u> </u>
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	_		
	or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on page 27)?			
4.0	If "Yes," complete Part XIV	9_		<u> X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing			
	their names and addresses	10		Х

		_		
Par	t 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		×
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of    ■ Richard Cocchiaro    Telephone no    (603)968-83	07		
	Located at ► P.O. Box 42 Holderness NH ZIP+4 ► 03245			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		_	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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 the benefit or use of a disqualified person)?			
	(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 )			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	-		
	that were not corrected before the first day of the tax year beginning in 2008?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	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?			,
<b>L</b>	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)			1
	(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)	 2h	·	<b>y</b>
С		2b		
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here  20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			ŧ
	enterprise at any time during the year? Yes No			
b	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation			,
-	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			!
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			i
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2008)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable			
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008?	4b		Χ

Рa	ri VII-E Statements Regarding Activiti	es for Which For	n 4720 May Be I	<b>(continuea)</b>	
5a	During the year did the foundation pay or incur any	amount to			_
	(1) Carry on propaganda, or otherwise attempt to	o influence legislation	(section 4945(e))?	Yes	X No
	(2) Influence the outcome of any specific public	election (see section 4	1955), or to carry		
	on, directly or indirectly, any voter registration	n drive?		· · · Yes _	X No
	(3) Provide a grant to an individual for travel, stu	dv. or other similar pui	moses?	Yes	X No
	(4) Provide a grant to an organization other than	•	•		_
	in section 509(a)(1), (2), or (3), or section 49	-		Yes	X No
	(5) Provide for any purpose other than religious,	charitable, scientific, I	iterary, or		_
	educational purposes, or for the prevention of			Yes	X No
ь	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to qua	lify under the except	ons described in	_
	Regulations section 53 4945 or in a current notice	regarding disaster ass	istance (see page 22	of the instructions)?	5b N/A
	Organizations relying on a current notice regarding	disaster assistance c	heck here	▶[	
C	If the answer is "Yes" to question 5a(4), does the f	oundation claim exemp	ption from the		_
	tax because it maintained expenditure responsibility of "Yes," attach the statement required by Regulation	•	5(d)	Yes	No
6a	Did the foundation, during the year, receive any ful	nds, directly or indirect	ly, to pay		
	premiums on a personal benefit contract? .			Yes	X No
þ	Did the foundation, during the year, pay premiums If you answered "Yes" to 6b, also file Form 8870	, directly or indirectly, o	on a personal benefit	contract?	6b
7a	At any time during the tax year, was the foundation	a party to a prohibited	d tax shelter transact	ion? Yes [	X No
b	If yes, did the foundation receive any proceeds or	have any net income a	ttributable to the trar	saction?	7b
Р	art VIII Information About Officers,	Directors, Truste	ees, Foundation	Managers, Highly Pa	aid Employees,
	and Contractors				
1	List all officers, directors, trustees, found	ation managers an	d their compensa	tion (see page 22 of the	e instructions).
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Ric	hard Cocchiaro	President			
P.C	). Box 42 Holderness NH 03245	00		)	0 0
Jan	et Cocchiaro	Vice Pres			
P.C	). Box 42 Holderness NH 03245	00	(	)	0 0
	***************************************				
		00	(	)	0 0
			_		
_		00	•	1	0 0
	Compensation of five highest-paid employ If none, enter "NONE."	ees (other than the	ose included on I		he instructions).
	Name and address of an Armin State of the Control o	(b) Title, and avera		(d) Contributions to employee benefit	(e) Expense account,
(a)	Name and address of each employee paid more than \$50,	hours per week devoted to position		plans and deferred	other allowances
NO	W.	devoted to position	511	compensation	
NO	NE		00		
			.00	0	0 0
	***************************************		.00	o	0
			.00		<del> </del>
			ı	1	1
			.00	ol	0 0
	· · · · · ·		.00	0	0 0
			.00	0	0 0
	al number of other employees paid over \$50,0				

Form **990-PF** (2008)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	l Employees,	
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, ente	r "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensa	ition
NONE		_
		0
		0
		0
		0
		. 0
Total number of others receiving over \$50,000 for professional services	•	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses	
1		
2		.,
3		
4		<del></del>
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	<del></del>	<del></del> ,
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	
1		
2	<del></del>	
All other program-related investments See page 24 of the instructions  3		
·		
Total. Add lines 1 through 3		0

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6

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. Part X see page 24 of the instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., numoses 1a 488.483 Average monthly fair market value of securities 1b 4,319 Average of monthly cash balances 1c Fair market value of all other assets (see page 24 of the instructions) Total (add lines 1a, b, and c) 1d 492,802 Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 2 2 Acquisition indebtedness applicable to line 1 assets 3 492.802 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 11/2 % of line 3 (for greater amount, see page 25 7.392 of the instructions) 5 485,410 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 6 Minimum investment return. Enter 5% of line 5 6 24,271 Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ightharpoonup and do not complete this part.) 1 24.271 1 Minimum investment return from Part X, line 6 2a Tax on investment income for 2008 from Part VI, line 5 . b Income tax for 2008 (This does not include the tax from Part VI) 2b 2c C Add lines 2a and 2b 3 24.271 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 24,271 5 5 Add lines 3 and 4 6 Deduction from distributable amount (see page 25 of the instructions) 6 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 24.271 Part XII Qualifying Distributions (see page 25 of the instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes а Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 18.850 1b Program-related investments—total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) . 3a Cash distribution test (attach the required schedule) 3b 18,850 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions) 5

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

18,850

1	Distributable amount for 2008 fro	om Part XI,	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
	line 7		,		-	24,271
2	Undistributed income, if any, as	of the end of 2007.			_ ~ ~ ~	
а	Enter amount for 2007 only				0	
b	Total for prior years. 20,	20, 20		0		
3	Excess distributions carryover, if	any, to 2008				
а	From 2003	NONE				
b	From 2004 .	NONE				
С	From 2005	26,546				
d	From 2006 .	55,089				
е	From 2007	NONE				
f	Total of lines 3a through e		81,635			
4	Qualifying distributions for 2008	from Part				
		18,850				
а	Applied to 2007, but not more the				ó	
	Applied to undistributed income					
	(Election required—see page 26	· · ·		o		
С	Treated as distributions out of co	·				
_	required—see page 26 of the ins		o			
d	Applied to 2008 distributable am	4				18,850
e			0			······································
5	Excess distributions carryover ap	· ·	5,421			5,421
•	(If an amount appears in column	-	<u> </u>		·····	
	same amount must be shown in		•			
6	Enter the net total of each colu		,			
•	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	76,214			
	Prior years' undistributed income				······································	
~	line 4b from line 2b	Cubildot	1	o		
^	Enter the amount of prior years'	undistributed				
·			1			
	income for which a notice of defi-	· 1				
	been issued, or on which the sec	` '				
	tax has been previously assesse			· · · · · · · · · · · · · · · · · · ·		
a	Subtract line 6c from line 6b Tax					
_	amount—see page 27 of the inst			0		
е	Undistributed income for 2007 S	l l	4			
	4a from line 2a Taxable amount	—see page 27 of the				!
	instructions				0	
f	Undistributed income for 2008. S		•			
	lines 4d and 5 from line 1 This a	mount must				
_	be distributed in 2009					0
7	Amounts treated as distributions					
	corpus to satisfy requirements in					!
	section 170(b)(1)(F) or 4942(g)(3	3) (see page 27 of				
	the instructions) .		<u>.</u>			<del></del>
8	Excess distributions carryover from	om 2003				
	not applied on line 5 or line 7 (se	e page 27 of the	•			
	instructions)	. [	0			
9	Excess distributions carryover	to 2009.				•
	Subtract lines 7 and 8 from line 6	Sa	76,214			
10	Analysis of line 9					
а	Excess from 2004	o			į	
b	Excess from 2005	21,125				
С	Excess from 2006 .	55,089				
d	Excess from 2007	0	ļ	i		
e	Excess from 2008	0				

Par	t XIV Private Operating Foundations (	see page 27 of the		nd Part VII-A, qu	estion 9)			
1 a	1 a If the foundation has received a ruling or determination letter that it is a private operating							
	foundation, and the ruling is effective for 2008, enter the date of the ruling .							
	Check box to indicate whether the foundation is a	private operating foun	dation described in	n section	4942(J)(3) or	4942(j)(5)		
z a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total		
	investment return from Part X for each	(a) 2008	(b) 2007	(c) 2006	(d) 2005			
	year listed .	0	0	0		0		
	85% of line 2a	0	0	0	0	0		
·	line 4 for each year listed	o	o	o		0		
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0		
е	Qualifying distributions made directly for active conduct of exempt activities.							
3	Subtract line 2d from line 2c  Complete 3a, b, or c for the	0	, 0	0	0	0		
_	alternative test relied upon "Assets" alternative test—enter							
	(1) Value of all assets .					0		
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				,	0		
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	0	0	0		0		
C	"Support" alternative testenter							
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0		
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0		
	(3) Largest amount of support from an exempt organization					0		
	(4) Gross investment income .					0		
Pai	t XV Supplementary Information (Co	mplete this part o	only if the four	ndation had \$5,0	000 or more in			
	assets at any time during the ye	<del></del>	of the instruct	tions.)				
1 a	Information Regarding Foundation Managers of the foundation who have conbefore the close of any tax year (but only if they have been seen to be a se	ntributed more than 2%			he foundation			
Rich	nard & Janet Cocchiaro	are continued to more t	nan 40,000) (Gee	30011011 007 (4)(2) )				
	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which				rtion of the			
2	Information Regarding Contribution, Gran	nt, Gift, Loan, Scho	larship, etc., Pr	ograms:	-			
	Check here  if the foundation only makes unsolicited requests for funds. If the foundation may under other conditions, complete items 2a, b, c, as	contributions to prese akes gifts, grants, etc	elected charitable o	organizations and doe	es not accept viduals or organization	ons		
а	The name, address, and telephone number of the	person to whom apple	cations should be a	addressed				
Rich	ard Cocchiaro P.O. Box 42 Holderness NH 0	3245 (603)968-830	7					
	The form in which applications should be submitte			ould include				
App	liactions should be written and include the org	ganization's charitat	ole purpose					
C	Any submission deadlines							
100	NE							
d	Any restrictions or limitations on awards, such as l factors	by geographical areas,	charitable fields, k	kinds of institutions, o	or other			
NON	NE							

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During	the Year or Approved fo	r Future Pay	ment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business	or substantial contributor	recipient		
a Paid during the year SEE SCHEDULE ATTACHED				
				18,850
				0
				0
				0
				0
				0
				0
				0
				0
				0
	•			0
				0
		<u> </u>		0
				0
				0
· · · · · · · · · · · · · · · · · · ·				0
b Approved for future payment	<u> </u>	<del></del> 1	▶ 3a	18,850
Approved for fature payment				•
				0
				0
				0
				0
				0
				0
				0
				0
Total			▶ 3b	0
1001	<u> </u>	<u> </u>		

Part XVI-A Analysis of Income-Producing Activities

91-1909063

Enter gross amounts unless otherwise indicated.	Unrelated bus	siness income	Excluded by section	(e)	
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
1 Program service revenue					<del></del>
a		0		0	
b	·	0		0	<del></del>
c		0		0	
d		0		0	
e	ļ	0		0	<del></del>
f	ļ	0		0	
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities		•	14	72	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</b> Not debt-financed property .					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory				0	
9 Net income or (loss) from special events			-		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a		0		0	0
b		0		0	0
c		0		0	0
d		0		0	0
e		0		0	O
12 Subtotal Add columns (b), (d), and (e)		o		72	0
13 Total. Add line 12, columns (b), (d), and (e)		-,		13	72
(See worksheet in line 13 instructions on page 28 to verify calcu	ulations )				
Part XVI-B Relationship of Activities to the Acc		of Exempt Pi	irnoses	<del></del>	
Line No. Explain below how each activity for which income	e is reported in colu	ımn (e) of Part X\	/I-A contributed in		
the accomplishment of the foundation's exempt p page 28 of the instructions.)	ourposes (other tha	in by providing fur	nds for such purpe	oses) (See	
page 20 of the instructions.)					
	<del></del>	<del></del>			
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		<del></del>		<del></del>	<del></del>

Form 990-PF	(2008)	COCCHIAR	O FAMILY FOUNDATION	91-1909063	Page 1	3
Part XVII	_		sfers To and Transactions a	and Relationships With Noncha	aritable	
4 Did 4h	Exempt Organiz		nage in any of the following with	h any other organization described	Yes No	_
1 Did the	e organization directly	or indirectly of	engage in any of the following with	h any other organization described or in section 527, relating to political	1es No	<u></u>
	zations?	le (other than	section 30 No/(3) Organizations/ C	of its section of the following to political		
•		s foundation to	a noncharitable exempt organiza	ation of:		
					1a(1) X	
. ,	her assets				1a(2) X	
` '	transactions:					_
(1) Sa	ales of assets to a nor	ncharitable ex	empt organization		1b(1) X	
			able exempt organization		1b(2) X	
		•	er assets		1b(3) X	
					1b(4) X	
	ans or loan guarante				1b(5) X	
• •			hip or fundraising solicitations . sts, other assets, or paid employe		1b(6) X	
		_				_
value	of the goods, other as	sets, or service	ces given by the reporting foundar	<ul> <li>Column (b) should always show th tion. If the foundation received less talue of the goods, other assets, or so</li> </ul>	han fair market	
(a) Line no	(b) Amount involved	(c) Name	of noncharitable exempt organization	(d) Description of transfers, transactions, an	d sharing arrangements	
	(	)				
	(	o l				
	<del>-</del>	)				_
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	<u> </u>					_
2n la 4h a .	[	<u>- 1                                   </u>	-4-d th			_
			ated with, or related to, one or mo other than section 501(c)(3)) or in		Yes ☐ No	
	," complete the follow			355(1017 027 :	] 103 [] 110	
	(a) Name of organization		(b) Type of organization	(c) Description of relation	onship	_
	<del></del>					
					<del></del>	_
			<u> </u>	<u>_L</u>		_
				schedules and statements, and to the best of many is based on all information of which preparer is		
l belle		piete Deciaration	or preparer tourer main taxpayer or nouclary	7 is based on all information of which preparer	ias any knowledge	
K	uchard M C.	ز سد بامار س	1 /	alableg Dunda	<i>T</i>	
Sig	nature of officer or trustee	, 50, 50, 50	, Da	2/26/09 Preside	-0.	_

Date

OHN RILEY & COMPANY, P.C.

12/20/2009

PENTER BARNSTEAD, NH 03225-0234

Check If

self-employed ▶

Sign Here

Preparer's

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

signature

Preparer's identifying number (see **Signature** on

Phone no (603)776-1120

#### 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

**Employer identification number** Name of the organization **COCCHIARO FAMILY FOUNDATION** 91-1909063 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 Check if your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.) **General Rule** X For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ) . . . Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990,

990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF).

			n 1 1
	(Form 990, 990-EZ, or 990-PF) (2008)  prganization	Page 1 of 1 of Part  Employer identification number	
	ARO FAMILY FOUNDATION	91-1909063	
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Richard & Janet Cocchiaro	\$ 10,000	Person X Payroll Noncash
	P O. Box 42 Holderness NH 03245 Foreign State or Province Foreign Country	Ψ	(Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	Foreign State or Province Foreign Country:	\$0_	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
3	Foreign State or Province. Foreign Country	\$ <u>0</u>	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
4	Foreign State or Province: Foreign Country	\$0	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
5	Foreign State or Province. Foreign Country	\$0	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
6			Person Payroli

Foreign State or Province: Foreign Country (Complete Part II if there is a noncash contribution )

Noncash

Line	23 (990-PF) - Other Expenses	5	0	5	0
	Description	Revenue and expenses per books	Net investment income	Adjusted net income	Disbursements for charitable purposes
1		0	0	0	O
2	Postage	5		5	
3					
4					
5					
6					
7					
8					
9					
10					

## Part II, Line 10b (990-PF) - Investments - Corporate Stock

			620,466	620,466	577,950	679,340
		Num shares/	(a) Book value	(b) Book value	FMV	(c) FMV
L	Description	face value	beg of year	end of year	beg of year	end of year
1	KForce Inc.		• 605,656		566,277	666,665
2	NASDAQ Unit Ser 1		14,810	14,810	11,673	12,675
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13			- ·			
14						
15						
16						
17			-			

Part II, Line 22 (990-PF) - Other Liabilities

Part	II, Line 22 (990-PF) - Other Liabilities	0	3,678
	Description	(a) Beginning balance	(b) Ending balance
1	Margin loan - Schwab		3,678
2			
3			
4			
5			
6			
7			
8			
9			
10			

Part VII-A, Line 8b (990-PF) - Copy of Form 990-PF to Attor	ney General	
Did the foundation furnish a copy of Form 990-PF to the State Attorney General?	Yes X No	
If No, please provide an explanation: Not required by New Hampshire state law		
<u> </u>		
		<del></del>

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Par	Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors	Compensat	tion of Officers	s, Director		stees and	<b>Trustees and Foundation Managers</b>	on Manag	jers	0	0		0
		Check "X"			.l		Foreign		Average			Expense	ı
	Name	if Business	Street	Ç	State	Zip Code	Country	Title	Hours Devoted   Compensation	Compensation	Benefits	Account	
-	Richard Cocchiaro		P O Box 42	Holderness	H	NH 03245		President		0	0		10
7	Janet Cocchiaro		P O Box 42	Holderness	돌	03245		Vice Pres		0	0		10
က													
4													ı
2													ı
9													1
7													!
80													ı
6													1
10													1

Part XV, Lines 1a-1b (990-PF) - Information Regarding Foundation Managers

	7(1) 211100 1a 1b (000 1 1 ) 11110	rinia a o ri i to garanig i	_ <del> </del>
	Manager Name	Check "X" if Manager contributed more than 2% of the total contributions received by the foundation	Check "X" if Manager owns 10% or more of the stock of a corporation of which the foundation has a 10% or greater interest
1	Richard & Janet Cocchiaro	X	
2			
3			
4			
5	-		
6			
7			
8			
9			
10			

# COCCHIARO FAMILY FOUNDATION TIN 91-1909063 FORM 990-PF FYE 9/30/09 PART XV - CONTRIBUTIONS PAID DURING THE YEAR

Recipient	Relationship	Foundation <u>Status</u>	Purpose of Contribution	<u>Amount</u>
Catholic Charities of New Hampshire	NONE	170(c)	Humanıtarian	5,150
Fezziwig Foundation	NONE	170(c)	Human / Educ	5,000
Care Net	NONE	170(c)	Humanitarian	250
Squam Lakes Association	NONE	170(c)	Educational	100
Squam Lakes Science Center	NONE	170(c)	Educational	500
Holy Trinity Church	NONE	170(c)	Religious	2,750
The Circle Program	NONE	170(c)	Humanitarian	2,000
Ophelia Project	NONE	170(c)	Humanitarian	250
New Hampshire Public Radio	NONE	170(c)	Educational	200
The Whole Village	NONE	· 170(c)	Humanitarian	200
Squam Lakes Conservation Society	NONE	170(c)	Educational	600
New hampshire Catholic Charities	NONE	170(c)	Humanıtarıan	50
New Hampshire Master Chorale	NONE	170(c)	Educational	250
Holderness School/Walker Scholarship Fund	NONE	170(c)	Educational	1,000
First Star	NONE	170(c)	Humanitarian	70
Plymouth Area Community Closet	NONE	170(c)	Humanitarian	480
				18,850