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, Form 999

Department of the Treasu Internal Revenue Service

Return of Private Foundation

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

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

2008

OMB No 1545-0052

Fo	cale	endar year 2008, or tax year beginning	DEC	1, 2008		, and e	nd ing	NOV 30, 2009	
G	Chec	ck all that apply: Initial return		Final return		Amended retu	ım 🗀	Address change	Name change
11	se the	RS Name of foundation				<u></u>		A Employer identification	number
·	labe	el.							
0	therw	· · · · · · · · · · · · · · · · · · ·						31-6277525	· · · · · · · · · · · · · · · · · · ·
	prin	· ·		elivered to street address)			Room/suite	B Telephone number	21
	or typ	peifie 34 HORLIN HILDH DIR	EET					614-224-43	31
	struct	ions City or town, state, and ZIP code	1 - 2	010				C if exemption application is p	
-			15-3					D 1. Foreign organizations	s, Check here
H				cempt private foundation		49.		2. Foreign organizations me check here and attach or	omputation
		ection 4947(a)(1) nonexempt charitable trus		Other taxable private for no method. X Car				E If private foundation sta	
		narket value of all assets at end of year		ng method. (🔼 Gai ther (specify)	sn	Accr	uai	under section 507(b)(1	
e i		Part II, col. (c), line 16) 1,676,344. (Par			ish t	asis.)		F If the foundation is in a under section 507(b)(1)	
	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) in	.,,	(a) Revenue and	1	(b) Net in	vectment	(c) Adjusted net	(d) Disbursements
- 1615. - 1615.	251.A.	(The total of amounts in columns (b), (c), and (d) in necessarily equal the amounts in column (a))	nary not	expenses per book	s	(D) INSC III		income	for chantable purposes (cash basis only)
~_ 	1			197,67	1.				
	2	Check ▶ ☐ If the foundation is not required to attach			1				
<u>></u>	3	Interest on savings and temporary cash investments		44,680			4,680.		STATEMENT 1
	4	Dividends and interest from securities		8,73	7.		8,737.	8,737.	STATEMENT 2
ij	5	a Gross rents						_	
	t	Net rental income or (loss)							
ζ,	, 6a	Net gain or (loss) from sale of assets not on line 10			_				
)	i t	Gross sales price for all							
	7	Capital gain net income (from Part IV, line 2)					0.		
	8	Net short-term capital gain				······		0.	<u> </u>
	9	Income modifications							
	1 .	and allowances							
		Less Cost of goods sold		<u> </u>					
	1	Gross profit or (loss)	•						
	11 12	Other income		251,088	3 -	5	3,417.	53,417.	
_	13	Compensation of officers, directors, trustees, etc			5.1	<u> </u>	0.	0.	0.
	14	Other employee salaries and wages					<u></u>		
	15	Pension plans, employee benefits	·						
S.		Legal fees			\neg				
Expenses	b	Accounting fees STMT	3	295	5.		0.	0.	0.
Ex	C	Other professional fees							
<u>8</u>	17	Interest	. ,		\Box				
trat	18	Taxes	.						
Sic	19	Depreciation and depletion			\dashv			<u> </u>	
Administrative	20	Occupancy			\dashv				
Á	21	Travel, conferences, and meetings	.	 	\dashv				
an	22	Printing and publications	ا ، ړ	150	+		0.	0.	0.
ting	23	Other expenses STMT	· * ·	13(' '				1
Operating and	24	Total operating and administrative		445	,		0.	0.	0.
Ô	25	expenses. Add lines 13 through 23 Contributions, grifts, grants paid		50,000				<u></u>	50,000.
		Total expenses and dispursance of the Control of th	~	30,000	-				1 20,000
			ال	50,445	5.		0.	0.	50,000.
_	27	Add lines 24 and 25 Subtract the 26 from line 12: Excess or revenue over expenses and disputement	<u>ğ</u>		\neg				
	a	Excess of Fevenue over expenses and dispulsement	%	200,643	3.				
	b	Net investment income (I negative, enter -0-)	띄			5	3,417.		
		Adjusted net in One no sette enter O).			\perp		,	53,417.	
		I HA For Privacy Act and Panerwork Res	inclina /	Art Notice see the inst	zueti	one			Form 990-PF (2008)

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Form 990-PF (2008)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions.

7

8

534.

50,000.

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

_	m 990-PF (2008) ALFRED E. TONTI TRUST		<u>-6277</u>			Page 4
. P	art VI 'Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ii	nstru	ctior	าร)
1	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	Ţ				
	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)	ŀ	1		,	
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			5	34.
,	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-)	2	Ī			0.
3		3			5	34.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0-	5			5	34.
6	Credits/Payments:					
	a 2008 estimated tax payments and 2007 overpayment credited to 2008	<u> </u>	1			
	b Exempt foreign organizations - tax withheld at source	7	1			
	c Tax paid with application for extension of time to file (Form 8868)	1			•	
	d Backup withholding erroneously withheld	7				
7		7	ĺ			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	1			7.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			5	41.
10	Companyment of the 7 is many than the total of time 5 and 0 extently amount around	10	 			
11	Enter the amount of line 10 to be. Credited to 2009 estimated tax	11	 .			
	art VII-A Statements Regarding Activities	<u> </u>				
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	a in			Yes	No
	any political campaign?	0 111		1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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 publish			10		
		eu or			:	į
_	distributed by the foundation in connection with the activities.			10		X
	Did the foundation file Form 1120-POL for this year?	•		16		<u> </u>
•	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 • (2) On foundation managers. ▶ \$					į
_	()	<u>.</u>				ĺ
E	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0 •					
_				,		х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	•	•	2		
_	If "Yes," attach a detailed description of the activities.				-	1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	01				Х
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	٠		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	· N	1/A	4a		<u> </u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	· · · · · ·	1/A .	4b		х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		^
_	If "Yes," attach the statement required by General Instruction T.					
ь	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 of the state	te law			•	v
_	remain in the governing instrument?			6	v	X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
_	If "Yes," complete Part II, col. (c), and Part XV.				:	1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				:	
	ОН					
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	<u> </u>	ļ,
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca			,		
	year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .		<u></u>	10		X

Form 990-PF (2008) ALFRED E. TONTI TRUST	31-627	7525	Page 5
Part 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 instructions)		11	X
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
August 17, 2008?		12	Х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	··· ·· · · · · · · · · · · · · · · · ·		X
Website address ► N/A			
14 The books are in care of ► TOM TONTI Tel	ephone no. ▶614-22	24-43	31
Located at ▶ 34 NORTH HIGH STREET, COLUMBUS, OH	ZIP+4 ▶4	3215-	3010
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			ightharpoons
and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	N/	A
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	red		
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Y	es 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?	Yes X No		
(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?	Yes X No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No		
(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)?	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 Regulations			
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	▶□		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not c	orrected		
before the first day of the tax year beginning in 2008?		10	X
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)):		1 1	
a At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year	r(s) beginning		
before 2008?	Yes X No		
If "Yes," list the years ▶			
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 "N			
statement - see instructions)	N/A	2b	İ
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
>			
3a Did the foundation hold more than a 2% direct or indirect interest in any business 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 or disqualified			
May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 494			
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use s			
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 charit	ahla nurnosa that	74	-
had not been removed from jeopardy before the first day of the tax year beginning in 2008?		4b	x
nad not been removed from poparty before the mist day of the tax year beginning in 2000'	 	70	

Form 990-PF (2008) ALFRED E. TONTI TRUST			31-62//5	<u> 25 </u>	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	🔲 Yo	es X No		
(2) Influence the outcome of any specific public election (see section 4955);				4	
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	🗀 Yı	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		1		,
509(a)(1), (2), or (3), or section 4940(d)(2)?		Yı	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or 1	for			,
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	in Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check it					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?			s 🔲 No		,
If "Yes," attach the statement required by Regulations section 53 494			1	- 1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?		Y	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If you answered "Yes" to 6b, also file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		s X No		
b If yes, did the foundation receive any proceeds or have any net income attribut				7b	
Information About Officers Diseases Truck					
Part VIII Paid Employees, and Contractors			•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acco	unt, other owances
TOM TONTI	TRUSTEE				_
34 NORTH HIGH STREET					
COLUMBUS, OHIO 43215	1.00	0.	0.		0.
					_
			•		
	<u> </u>				
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	· · · · · · · · · · · · · · · · · · ·		
	(b) Title, and average hours per week		(d) Contributions to	(e)	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acco	ount, other owances
IONE	devoted to position		conposation	<u>""</u>	
TONE					
		-	-		
	<u> </u>	 	· · · · - · · · ·	 	
				-	
				1	
	13.54	 		├	
		1		1	
		[ľ	1	

Total number of other employees paid over \$50,000

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	. 0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable 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 N/A	
2	· · · · · · · · · · · · · · · · · · ·
3	
<u> </u>	
4	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

Ė	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc., purposes		
а	Average monthly fair market value of securities	1a 1	0.
	Average of monthly cash balances	1b	
	Fair market value of all other assets	10	
ď		1d	0.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	T 2 T	0.
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here X and do not complete this part)	and certain	
1	Minimum investment return from Part X, line 6	1	
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)	1 1	
C	Add lines 2a and 2b	26	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add tines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	50,000.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.	į į	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	······
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	50,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	534. 49,466.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,466.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for th	e section

Form **990-PF** (2008)

Form 990-PF (2008) 31-6277525 ALFRED E. TONTI TRUST Page 9 Undistributed Income (see instructions) Part XIII (c) (d) (b) (a) Years prior to 2007 2007 2008 Corpus 1 Distributable amount for 2008 from Part XI, ٤. 0. 2 Undistributed income, if any, as of the end of 2007 0 a Enter amount for 2007 only b Total for prior years. 0 3 Excess distributions carryover, if any, to 2008 63,000 a From 2003 12,400. **b** From 2004 12,500c From 2005 d From 2006 e From 2007 87,900 f Total of lines 3a through e 4 Qualifying distributions for 2008 from Part XII, line 4 ▶\$ N/A 0 a Applied to 2007, but not more than line 2a . b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 0. d Applied to 2008 distributable amount 0 e Remaining amount distributed out of corpus Ō. 0 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: 87,900 2 Corpus Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract 0 line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed ... d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2007 Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2008. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2009 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 0 section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2003 63,000 not applied on line 5 or line 7 9 Excess distributions carryover to 2009. 24,900 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9:

a Excess from 2004

b Excess from 2005 .
c Excess from 2006 .
d Excess from 2007 ...
e Excess from 2008 ...

12,400

12,500.

Part XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)		
1 a If the foundation has received a ruling of	r determination letter that	t it is a private operating			-
foundation, and the ruling is effective for	r 2008, enter the date of t	the ruling	. ▶		
b Check box to indicate whether the found	lation is a private operatir	g foundation described in	n section X	1942(j)(3) or 494	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total
investment return from Part X for	·				
each year listed	0.	0.	0.	0.	0.
b 85% of line 2a	0.	0.	0.	0.	0.
c Qualifying distributions from Part XII,					
line 4 for each year listed	50,000.	40,000.	11,000.	12,500.	113,500.
d Amounts included in line 2c not					
used directly for active conduct of			_		_
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities	50 000	40.000	11 000	10 500	112 500
Subtract line 2d from line 2c	50,000.	40,000.	11,000.	12,500.	113,500.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "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					0
listed					0.
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					•
512(a)(5)), or royalties)					0.
(2) Support from general public and 5 or more exempt					
organizations as provided in					•
section 4942(j)(3)(B)(III)					0.
(3) Largest amount of support from					•
an exempt organization					0.
(4) Gross investment income				105.000	0.
Part XV Supplementary Infor			t the foundation i	nad \$5,000 or mo	re in assets
at any time during th		istructions.)			
1 Information Regarding Foundation	_				_
a List any managers of the foundation who year (but only if they have contributed mo	have contributed more the	han 2% of the total contri letion 507(d)(2) \	butions received by the fo	oundation before the close	of any tax
, , , ,	sie than 40,000). (Gee se	Cuon 507 (u)(z))			
NONE	400/	-414			
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	of the ownership of a par	tnership or
**	a 10 % of groater interest	•			
NONE	0 100				
2 Information Regarding Contributio		• • •	•		
Check here Lift the foundation on the foundation makes gifts, grants, etc. (s	ty makes contributions to	o preselected charitable o	rganizations and does not	t accept unsolicited reque	sts for funds If
··································	··· ··· · · · · · · · · · · · · · · ·			ipiete items za, u, c, anu i	J.
a The name, address, and telephone number TOM TONTI	er of the person to whom	applications should be a	ddressed:		
34 NORTH HIGH STREET,	COLUMBIIC	OUTO 42215	=		
b The form in which applications should be		•	ould include:		
LETTER AND HISTORY OF	OKGMITEMT	LON	٠.	_	
c Any submission deadlines:					
	euch as his assamphical	armae obseitable fielde te	inde of institutions	nor factors:	
d Any restrictions or limitations on awards,	ancu as ny dendiabuicai	areas, chantable neids, k	เบร บา เมรินเนนเชทร, 01 0ไ	ier iactors:	
•					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	status of recipient				
a Paid during the year	or substantial contributor	recipient				
SEE STATEMENT 9			. > 3a	50,000.		
Total b Approved for future payment NONE				0.		

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated business income			uded by section 512, 513, or 514	(e)		
,	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income		
1 Program service revenue:	code		ade				
a			∤				
b							
C			ļ <u> </u>				
d							
B							
f							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments					44,680. 8,737.		
4 Dividends and interest from securities					8,737.		
5 Net rental income or (loss) from real estate:							
a Debt-financed property							
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							
then inventory							
· · · · · · · · · · · · · · · · · · ·							
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory		-					
11 Other revenue.							
ā					-		
b							
C							
d							
e							
12 Subtotal Add columns (b), (d), and (e)	i	0.		0.			
13 Total. Add line 12, columns (b), (d), and (e)				13	53,417.		
(See worksheet in line 13 instructions to verify calculations)							
Part XVI-B Relationship of Activities to	the Acco	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which income			contrit	outed importantly to the accor	plishment of		
the foundation's exempt purposes (other than by	providing fui	nds for such purposes)			·		
				···	·		
					···		
							
							
	 -	7			<u>,</u>		
					<u> </u>		
				 			
1							

P	art X	VII Information R Exempt Organ	legarding Transfers To nizations	and Transactions	and Relation	nships With No	ncharit	able		90 10
1	Did t	he organization directly or ind	lirectly engage in any of the follow	ing with any other organiza	ition described in s	ection 501(c) of		1	Yes	No
			c)(3) organizations) or in section 5							
•			dation to a noncharitable exempt o							
				•			1	a(1)		Х
							··· · · ·	a(2)		X
,		r transactions						9/5/		
٠			able exempt organization				1	b(1)	- 1	X
			onchantable exempt organization				1	b(2)		X
							•			X
			, or other assets					b(3)		X
			s				–	b(4)		$\frac{\Lambda}{X}$
	• •	Loans or loan guarantees						b(5)	-	X
			embership or fundraising solicitati					b(6)		
			ailing lists, other assets, or paid er	-				1c		<u>X</u>
đ			"Yes," complete the following sch						ts,	
			foundation. If the foundation recen		alue in any transact	ion or sharing arrange	ement, shov	w In		
	colur		other assets, or services received							
(a)	Line no	(b) Amount involved	(c) Name of noncharitable	le exempt organization	(d) Descrip	tion of transfers, transacti	ons, and shar	ing ama	ingeme	nts
			N/A							
					-					
						 	-			
										
										
							_			
				······································		·				
2a			tly affiliated with, or related to, one			I				_
	ın sec	tion 501(c) of the Code (other	r than section 501(c)(3)) or in sec	ction 527?			. []	Yes	X] No
b	If "Yes	complete the following sche	edule.							
		(a) Name of org	anization	(b) Type of organization		(c) Description of r	elationship			
		N/A								
						·				
									-	
Т	Under po	enaities of perjury, I declare that I ha	ave examined this return, including acco	ompanying schedules and state	ments, and to the bes	t of my knowledge and b	elief, It is true	, correc	ţ,	
- 1	and com	plete. Declaration of preparer (other	r than taxpayer or fiduciary) is based on	all information of which prepare	er has any knowledge.	,				
		June 21		1 10/11/10	+	125 tac				
<u>e</u>	Sir	nature of officer or trustee	man to re	Date	Title					
러	i i	· · · · · · · · · · · · · · · · · · ·				Check if	Preparer's i	dentifvi	חם חייר	ber
<u>Б</u>	ح م	Preparer's	Marinhan /						y .10/1	
<u>.</u> ا	중절	signature /	OT AC TOTAL		10/11/10		L			
٥	20.0	Firm's name (or yours NICH)		CO., INC.		EIN >				
	Preparer's Use Only			TE 300						
L		address, and ZIP code COLUI	MBUS, OHIO 4322	U		Phone no				

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2008

Employer identification number

ALFRED E. TONTI TRUST 31-6277525 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

	1	1	
Page	L of	■ of Part I	

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)	Schedule B	(Form 990,	990-EZ,	or 990-PF)	(2008)
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. Name of organization

Employer identification number

ALLERE			1-62//323
Part I	Contributors (see instructions)		
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	KINGSWOOD TOWNHOUSES 34 NORTH HIGH STREET COLUMBUS, OHIO 43215-3010	\$\$	Person X 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
			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 Omnicash 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 Oncash Occash (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

FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	IPORARY C	ASH II	NVESTMENTS	STATEMENT]
SOURCE						AMOUNT	
FIRST BANK OF OHIO MORGAN STANLEY					40,850.		
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A			44,6	80.
FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
MORGAN STANLEY	•		8,737.		0.	8,7	37.
TOTAL TO FM 990-PF, PART I, I	LN 4		8,737.		0.	8,73	37.
FORM 990-PF	ACC	COUNTI	NG FEES	········		STATEMENT	3
DESCRIPTION	(1 EXPER PER I		(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		295.		0.		0.	0.
TO FORM 990-PF, PG 1, LN 16B		295.		0.		0.	0.
FORM 990-PF	CO	THER EX	XPENSES			STATEMENT	4
DESCRIPTION	(<i>F</i> EXPEN PER E	ISES	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
INVESTMENT FEES		150.		0.		0.	0.

FORM 990-PF OTHER INCREASES IN NET ASSETS OR FU	UND BALANCES	STATEMENT	5
DESCRIPTION		AMOUNT	
INCREASE IN MARKET VALUE SECURITIES		9,94	10.
TOTAL TO FORM 990-PF, PART III, LINE 3		9,94	10.
FORM 990-PF CORPORATE STOCK		STATEMENT	6
DESCRIPTION	BOOK VALUE	FAIR MARKET	נ
MORGAN STANLEY SMITH BARNEY	110,093.	110,09	93.
TOTAL TO FORM 990-PF, PART II, LINE 10B	110,093.	110,09	3.
FORM 990-PF CORPORATE BONDS		STATEMENT	7
DESCRIPTION	BOOK VALUE	FAIR MARKET	ľ
MORGAN STANLEY SMITH BARNEY	47,855.	47,85	55.
TOTAL TO FORM 990-PF, PART II, LINE 10C	47,855.	47,85	55.
FORM 990-PF OTHER LIABILITIES		STATEMENT	8
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
CONTRIBUTIONS PAYABLE	0.	50,00	00.
TOTAL TO FORM 990-PF, PART II, LINE 22	0.	50,00	00.

FORM 990-PF

STATEMENT

	DURING THE YEAR		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
EWTN 5817 OLD LEEDS RD., IRON DALE, AL 35210	CHARITABLE USES	501-C	5,000.
ARCHDIOCESE OF MILITARY SERVICES PO BOX 96168, WASHINGTON DC, 20077	CHARITABLE USES	501-C	400.
WATTERSON BUILDING CAMPAIGN 99 E. COOKE RD., COLUMBUS, OHIO 43214	CHARITABLE USES	501-C	2,000.
BOYS TOWN 200 FLANAGAN BLVD., BOYSTOWN, NB 68010	CHARITABLE USES	501-C	2,000.
CROSS INTERNATIONAL CATHOLIC OUTREACH PO BOX 63, AKRON, OHIO 44398-8101	CHARITABLE USES	501-C	7,000.
VETERANS OF FOREIGN WARS PO BOX 8958, TOPEKA, KS 66608-8958	CHARITABLE USES	501-C	100.
FOOD FOR THE POOR 6401 LYONS ROAD, COCONUT CREEK, FL 33073	CHARITABLE USES	501-C	3,000.
HOLY FAMILY SOUP KITCHEN 584 W. BROAD ST., COLUMBUS, OHIO 43214	CHARITABLE USES	501-C	6,000.
J.O.I.N. 578 E. MAIN ST., COLUMBUS, OHIO 43215	CHARITABLE USES	501-C	6,000.

GRANTS AND CONTRIBUTIONS

ALFRED E. TONTI TRUST		31-6277525
MID OHIO FOOD BANK 1625 W. MOUND ST., COLUMBUS, OHIO CHARITABLE USES 43223	501-C	500.
OUR LADY OF THE MIRACULOUS MEDAL 5225 REFUGEE RD., COLUMBUS, OHIO CHARITABLE USES 43232	501-C	500.
OUR LADY OF PEACE 20 E. DOMINION BLVD., COLUMBUS, CHARITABLE USES OHIO 43214	501-C	500.
ROSEMONT CENTER 2440 DAWNLIGHT AVE., COLUMBUS, CHARITABLE USES OHIO 43211	501-C	1,000.
SALVATION ARMY 966 E. MAIN ST., COLUMBUS, OHIO CHARITABLE USES 43205	501-C	1,000.
ST. AGATHA-ST. VINCENT DEPAUL 1860 NORTHAM RD., UPPER CHARITABLE USES ARLINGTON, OHIO 43220	501-C	5,000.
ST. ALOYSIUS 2165 W. BROAD ST., COLUMBUS, OHIO CHARITABLE USES 43227	501-C	1,500.
ST. JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST. JUDE PLACE, MEMPHIS, TN CHARITABLE USES 38105	501-C	1,000.
ST. PHILLIP THE APOSTLE 1573 ELAINE RD., COLUMBUS, OHIO CHARITABLE USES 43227	501-C	500.
NOTRE DAME FIGHTING SPIRIT CAMPAIGN PO BOX 519, NOTRE DAME, IN 46556 CHARITABLE USES	501-C	6,000.

ALFRED E. TONTI TRUST		31-6277525
WOSU . DEPT'0935, COLUMBUS, OHIO 43210 CHARITABLE USES	501-C	1,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3A		50,000.

THE COLUMBUS DISPATCH PROOF OF PUBLICATION

STATE OF OHIO, FRANKLIN COUNTY. SS:

Carla Daniel Classified Operations Manager

The Columbus Dispatch, a newspaper published at Columbus, Franklin County, Ohio, with a daily paid Circulation of over 200,000 copies, personally appeared and made oath that the notice of which a true copy is hereunto attached was published in The Columbus Dispatch for 1 Time(s) on

Annual return of the Alfred E Torti Trust available for review. Call Tom Tonti for appoint ment (614) 224-1333

September 5, 2010

and that the rate charged therefore is the same as that charged for commercial advertising for like services.

subscribed and Sworn on this 12th day of October 2010 as witness my hand and seal of office.

NOTARY PUBLIC - STATE OF OHIO

Murchatt

My

Veronica H. Hill Notary Public, State of Onto My Commission Expires 11-05-2013

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Type or print ALFRED E. TONTI TRUST ALFRED E. TONTI TRUST Sumble, street, and room or suite no. if a P.O. box, see instructions. 20 E. DOMINION BLVD.	• If you a	tre filing for an Automatic 3-Month Extension, complete only Part I and check this box are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of the	•	
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file incorne fear returns. Electronic Filing (e-file). Generally, you can electronically file Form 8865 if you want a 3-month automatic extension of time to file one of the returns returned below (in continuation) amonth extension or (2) you file Forms 900-T). However, you cannot file Form 8865 electronically (f) you want the additional (not automatic) amonth extension or (2) you file Forms 900-Di. 6000, or 8070, group returns, or a composite or consolicated Form 800-T, instead, when it is a file of the form of the form you want is a confidence on the form of the form you file of the Charlins & Nonprofiles. Name of Exempt Organization ALFRED E - TONTI TRUST Number, street, and room or suite no. If a P.O. box, see instructions. ALFRED E - TONTI TRUST Number, street, and room or suite no. If a P.O. box, see instructions. COLUMBUS, OH 4 3214-2737 Check type of return to be filed (file a separate application for each return): Form 990-Di. Form 990-Di. Form 990-T (corporation) Form 990-Di. Form 990-T (per 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-T (trust other than above) Form 990-Di. Form 990-Di. Form 990-Di. Potential Pote			filed Fo	rm 8868.
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file once that returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (in months for a corporation required to file Form 990-TI, However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Form 990-TI, however, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Form 990-TI, form 990-TI, form 1990-TI, instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, vist waw is applied and click on e-file for Charities & Nonprofits. **Name of Exempt Crganization** **ALFRED E. TONTI TRUST** **Number, street, and room or suite no. If a P.O. box, see instructions.** **20 E. DOMINION BLVD.** **Number, street, and room or suite no. If a P.O. box, see instructions.** **20 E. DOMINION BLVD.** **Number, street, and room or suite no. If a P.O. box, see instructions.** **COLUMBUS**, OH 43214-2737** **Check type of return to be filed(file a separate application for each return): **Form 990-BL** **Form 990-BL** **Form 990-BL** **Form 990-FF* **Fo	Part L	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
to file income tex returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8968 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Form 990-T hostead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, vist wave is quefilled and click on e-file for Charities & Nonprofits. Name of Exempt Organization ALFRED E. TONTI TRUST Alfred Exemptor or suite no. If a P.O. box, see instructions. Employer identification number name semicons ALFRED E. TONTI TRUST Alfred Exemptor or suite no. If a P.O. box, see instructions. COLUMBUS OH 43214-2737 Check type of return to be filed (file a separate application for each return): Form 990			mplete 	> □
noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 980-Beloctronically of (1) you want the additional (not automatic) "			n exter	nsion of time
ALFRED E. TONTI TRUST ALFRED E. TONTI TRUST	noted bei (not autor you must	ow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electror natic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or co submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic f	ncally r	f (1) you want the additions ated Form 990-T. Instead,
ALFRED E. TONTI TRUST Number, street, and room or suite no. If a P.O. box, see instructions. OE DOMINION BLUD. City, town or post office, state, and ZIP code. For a foreign address, see instructions. COLUMBUS, OH 43214-2737 Check type of return to be filed (file a separate application for each return): Form 990 Form 990-T (corporation) Form 990-E Form 990-E Form 990-F (see. 401(a) or 408(a) trust) Form 990-F Form 6069 Form 990-F Form 1041-A TOM TONTI The books are in the care of P 34 NORTH HIGH STREET - COLUMBUS, OH 43215-3010 Telephone No. P 614-224-4331 FAX No. P If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box If it is for part of the group, check this box If the organization does not have an office or place of business in the United States, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If the organization of the properties of the extension of time until JULY 15, 2010 To file the exempt organization return for the organization named above. The extension is for the organization's return for: Calendar year or If this is tax year is for less than 12 months, check reason: If this application is for Form 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	• -	Name of Exempt Organization	Emp	loyer identification numb
Counting your return service in service in the case of Pom 900		ALFRED E. TONTI TRUST	3	1-6277525
City, town or post office, state, and ZIP code. For a foreign address, see instructions. COLUMBUS, OH 43214–2737 Check type of return to be filed (file a separate application for each return): Form 990 Form 990-T (corporation) Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-FF Form 1041-A Form 8870 TOM TONTI Tole books are in the care of ▶ 34 NORTH HIGH STREET — COLUMBUS, OH 43215—3010 Telephone No. ▶ 614-224-4331 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until JULY 15, 2010 Is for the organization's return for: I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until JULY 15, 2010 Is for the organization's return for: I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until JULY 15, 2010 Is for the organization's return for: I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until JULY 15, 2010 Is for the organization's return for: I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until JULY 15, 2010 Is for the organization's return for: I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until JULY 15, 2010 If this application is for form 990-PF or 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. B if this application is for Form 990-PF or 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. B if this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax	due date for filing your			
Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-PF Form 1041-A Form 6069 TOM TONTI The books are in the care of > 34 NORTH HIGH STREET - COLUMBUS, OH 43215-3010 Telephone No. > 614-224-4331 FAX No. > If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for all members the extension will cover. If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for all members the extension will cover. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until JULY 15, 2010 to file the exempt organization return for the organization named above. The extension is for the organization's return for: Calendar year or Calendar year or Calendar year or Calendar year Or		City, town or post office, state, and ZIP code. For a foreign address, see instructions. COLUMBUS, OH 43214-2737		
The books are in the care of 34 NORTH HIGH STREET - COLUMBUS, OH 43215-3010 Telephone No. 614-224-4331	Forn	n 990	227 069	
JULY 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for: □ calendar year or □ X tax year beginning DEC 1, 2008, and ending NOV 30, 2009 2 If this tax year is for less than 12 months, check reason: □ Initial return □ Final return □ Change in accounting period in this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	Telepho	one No. 34 NORTH HIGH STREET - COLUMBUS, OH 432 one No. 614-224-4331 FAX No. ganization does not have an office or place of business in the United States, check this box for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	nis Is fo	r the whole group, check t
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ 0 b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 0 c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	ıs for	JULY 15, 2010, to file the exempt organization return for the organization named at the organization's return for: calendar year or		The extension
nonrefundable credits. See instructions. b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	2 If this	s tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting per
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			3a	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).				
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			13.49	
	depo	sit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	\(\frac{1}{2}\)	

Fon	m 8868 (Rev. 4-2009)			Page 2
•	you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this	s box		▶ X
	e. Only complete Part II if you have already been granted an automatic 3-month extension on a previously f			
• 11	you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
P	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (n	o copies	needed).	
Тур	Name of Exempt Organization	Emp	oloyer identi	fication number
prin	ALFRED E. TONTI TRUST	3	31-6277	525
exten	late for 34 N. HIGH STREET	For	IRS use only	
returr	City, town or post office, state, and ZIP code. For a foreign address, see instructions. COLUMBUS, OH 43215-3010			
Che	ck type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		form 5227 form 6069	Form 8870
STO	P! Do not complete Part II if you were not already granted an automatic 3-month extension on a prev	ously fil	ed Form 88	68.
T∈ If • If box 4	I request an additional 3-month extension of time until OCTOBER 15, 2010.	this is fo	or the whole pers the exte	ension is for.
5	For calendar year, or other tax year beginning DEC 1, 2008 , and ending	NOV		
6	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in a	accounting period
7	State in detail why you need the extension TAXPAYER IS WAITING FOR A POTENTIAL AMENDED 1099 FROM TAXPAYER IS WAITING FOR A POTENTIAL AMENDED 1099 FROM	1 BRC	KERAGE	COMPANY.
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	P\$3.		
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
C	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	1		
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruction	s. 8c	\$	0.
	Signature and Verification			
Jnder t is tru	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to ie, correct, and complete, and that I am authorized to prepare this form			
Signat	ure > (CPA	Date	> 7-	9-10

Form 8868 (Rev. 4-2009)