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### Form 990-PF

## **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

2009

OMB No 1545-0052 1

The contributions, gifts, grants paid expenses and disbursements betting the contributions, gifts, grants paid expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if		14. 110	TOTAL COLUMN					. 7		
Use the IRS   Name of foundation   Address change	For	cale	ndar year 2009, or tax year l	peginning	<u> </u>	·	, and e	nding		
Use the IRS   Name of foundation   Name of found	G	Chec	call that apply	nıtıal retui	n	Initial return of a f	ormer public o	harity	Final return	1
Description			A	mended i	return	Address char	nge		Name change	
DEWISH COMMENTY ENDOWNENT ASSOCIATES	1100	, the	Name of foundation						A Employer identification	number
Otherwise, C/O MARVIN GLAZIER  print			ITEGITOU COM	LIUNI	Y ENDO	WMENT ASSOCI	ATES			
print   Number and street (or PC Down Authority Invalid is not derivered to stroot addressed on Power			M / O M A D T T T T T	GLAZ	IER				01-6020765	
See Specific Copy or town, state, and ZIP code    Management   Content   Con	_	_		box numbe	er if mail is not de	elivered to street address)		Room/suite	B Telephone number	
Instructions   Dark of Control   Dark of Control				•						15
The Check type of organization   X   Section 501(c)(3) exempt private foundation   Continuous   The Check type of organization   X   Section 501(c)(3) exempt private foundation   Continuous   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   X   Section 501(c)(3) exempt private foundation   The Check type of organization   The Check type of organizati		•	I LIIV OF IOWN STATE AND	ZIP code	)				C If exemption application is p	pending, check here
H Check type of organization   X  Section 501(c)(3) exempt private foundation   Section 4947(c)(1) nonexempt charactable trust   Other (seach)   Cher (seach	Inst	ructi				9			D 1 Foreign organizations	s, check here
Section 3497(3)(1) nonexampt charable frust □ Other taxable private foundation from Part II, col (c), line 16) and 14 sested and of year I Accounting method (C) and 16 sested and of year I Accounting method (C) and 16 sested and of year I Accounting method (C) and 16 sested and of year I Accounting method (C) and 16 sested and of year I Accounting method (C) and 16 sested and of year I Accounting (Part I, col (c), line 16) (Part II, col (c), line 16) (Part III, col (c), line 16) (Part	H	Check	type of organization	Section	n 501(c)(3) ex	cempt private foundation			2 Foreign organizations me check here and attach co	eeting the 85% test,
Fair market value of all assets at end of year (from Part II), cot (c), ine 16)	Г	_					ation			
Part II   cot (c), line 16	l Fa				1-			ual		
T 31, 652,  Part I   Analysis of Revenue and Expenses (the lotter of amounts to the on cash basis) under section 507(0)(1/8), check here ▶   Part I   Analysis of Revenue and Expenses (the lotter of amounts of blue the part of the lotter of amounts of blue the part of the lotter of amounts of blue the part of the lotter of amounts of the part of the lotter of amounts of the part of the lotter of the lotte				<b>,</b>	l —	•			1	
Part	-		731	652.			basis)			
Contributions, grits, grants, etc., received   2	_					1		vestment		(d) Disbursements
Contributions, grits, grants, etc., received   2		41 1	(The total of amounts in column necessarily equal the amounts	ns (b), (c), ar un column (	nd (d) may not a) )					
2 Check ■ X   illes touchasons not required to stack Sch 8   3   illustration havings and temporary   8   8   0.57   8   0.57   STATEMENT   1   1   3.79   11   3.79   11   3.79   STATEMENT   2   3   Gross rents   11   3.79   11   3.79   11   3.79   STATEMENT   2   3   Gross rents   10   10   10   10   10   10   10   1		1				500.			N/A	
Interest on awrings and temporary   8,057.   8,057.   STATEMENT 1		1					<u> </u>	·		
## A Dividends and interest from securities ## 5a Gross rents   5a Gross rents		1				8.057.		8,057.		STATEMENT 1
Sa Gross rents   B   Net rental income or (loss)		1 .			c					<del></del>
D   Net rental income or (loss)		1		i Securitie	3	12,0,0	<del></del>			
Section   Sect		i								
Description		1		note not on	line 10	<3.716.	<b></b>			<del> </del>
Net short-term capital gain   9   Income modifications   10a and disvances   10a and disvances   10b   10c	ine	"	Gross sales price for all	9 (	929.		<u> </u>			
Net short-term capital gain   9   Income modifications   10a and disvances   10a and disvances   10b   10c	ζē	٦,					· · · · · · · · · · · · · · · · · · ·	0.	· · · · · · · · · · · · · · · · · · ·	
9 Income modifications 10a of Gross sales less returns 10 tess Cost of goods sold 1 C Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees 17 Interest 18 Taxes 17 Interest 17 Interest 18 Taxes 17 Interest 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Pinting and publications 22 Pinting and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, grifts, grants paid 26 Contributions, grifts, grants paid 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 28 Detail income (if negative, enter -0) 29 C Adjusted net income (if negative, enter -0) 20 Calpisch del income (if negative, enter -0) 21 Adjusted net income (if negative, enter -0) 22 Calpisch del income (if negative, enter -0) 23 Calpisch del income (if negative, enter -0) 24 Adjusted net income (if negative, enter -0) 25 Calpisch del income (if negative, enter -0) 26 Calpisch del income (if negative, enter -0) 27 Subtract line 26 from line 20 calpisch del income (if negative, enter -0) 28 Calpisch del income (if negative, enter -0) 29 Calpisch del income (if negative, enter -0) 20 Calpisch del income (if negative, enter -0) 29 Calpisch del income (if negative, enter -0) 20 Calpisch del income (if negative, enter -0)	æ	, R			,					
10a and loweness   11   10a and loweness   11   10a and loweness   12   10a and loweness   13   14   15   15   15   15   15   15   15							<del></del>	*** **** *****************************		- <del>                                     </del>
D   Less Cost of goods sold   c   Gross profit or (loss)     11   Other income   50.   50.   STATEMENT   3     12   Total. Add lines 1 through 11   16,270.   19,486.   RECEIVED   0     13   Compensation of officers, directors, trustees, etc   0.   0.   RECEIVED   0     14   Other employee salaries and wages   15   Pension plans, employee benefits   16 a Legal fees   NUV 1 7   2010   C   C   C     15   Legal fees   D   Accounting fees   STMT   4   1,535.   750.   OGDEN, UT   C   C   C     16   Legal fees   STMT   5   T   Interest   T   Int		-	Gross sales less returns				·			
C Gross profit or (loss)   10 Other income   12 Total. Add lines 1 through 11   16,270.   19,486.   RECEIVED   0   0   0   0   0   0   0   0   0						r min to our P telepoor	1			*
11 Other income   12   Total. Add lines 1 through 11   16 , 270 .			-	·			<u> </u>			······································
12 Total. Add lines 1 through 11   16,270			, , ,			50.	<del></del>	50.	_	STATEMENT 3
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net Income (if negative, enter -0-)			****	11			1	9,486.	DEG	
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 4 A, 053. 4, 053. 0 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 3 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)					s etc					VED 7 0.
To reinstul plants, emproyee believing  If a Legal fees  b Accounting fees  c Other professional fees  17 Interest  18 Taxes  STMT 5  19 Depreciation and depletion  20 Occupancy  21 Travel, conferences, and meetings  22 Printing and publications  Cother expenses  STMT 6  4,053.  4,053.  0  Cother expenses  STMT 6  4,053.  4,053.  0  Cother expenses  STMT 6  4,053.  4,958.  Contributions, gifts, grants paid  Contributions, gifts, grants paid  Contributions, gifts, grants paid  Contributions, gifts, grants paid  Cother expenses and disbursements  Add lines 24 and 25  Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)			•	•				<del></del> -	101	701
16a Legal fees b Accounting fees C Other professional fees 17 Interest 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net Investment income (if negative, enter -0-) c Adjusted net Income (if negative, enter -0-)		1	• •	-			<u> </u>		18 NOV 1 7	2010 8
b Accounting fees STMT 4 1,535. 750. OCDEN, UT  Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 25 Total expenses and disbursements Add lines 24 and 25 25,755  20 Accounting fees STMT 4 1,535. 750. OCDEN, UT  19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 4,053. 4,053. 0  24 Total operating and administrative expenses. Add lines 13 through 23 25,755. 0  25 Contributions, gifts, grants paid 25,755. 25,755  26 Total expenses and disbursements Add lines 24 and 25 31,498. 4,958. 25,755  27 Subtract line 26 from line 12 4 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 14,528. N/A	ses			ononts			<b></b>			
c Cither professional fees  17 Interest  18 Taxes STMT 5 155. 155. 0  19 Depreciation and depletion  20 Occupancy  21 Travel, conferences, and meetings  22 Printing and publications  23 Other expenses STMT 6 4,053. 4,053. 0  24 Total operating and administrative expenses. Add lines 13 through 23 5,743. 4,958. 0  25 Contributions, gifts, grants paid 25,755. 25,755  26 Total expenses and disbursements Add lines 24 and 25 31,498. 4,958. 25,755  27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 14,528.	Ë	"		ST	rmt 4	1.535.	1	750.	0000	
17   Interest   18   Taxes   STMT   5   155   155   0     19   Depreciation and depletion   20   Occupancy   21   Travel, conferences, and meetings   22   Printing and publications   23   Other expenses   STMT   6   4,053   4,053   0     24   Total operating and administrative   expenses   Add lines   13 through   23   25,755   25   Total expenses and disbursements   Add lines   24   and   25   25,755     27   Subtract line   26   from line   12   a   Excess of revenue over expenses and disbursements   b   Net investment income (if negative, enter -0-)   c   Adjusted net income (if negative, enter -0-)   C   Adjusted net income (if negative, enter -0-)   N/A   C   C   C   C   C   C   C   C   C	e Expe	: ∣	-	~ -	<b>-</b>		†		L VOUEN,	UT 1
22 Printing and publications 23 Other expenses STMT 6 4,053. 4,053. 0  24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 25,755. 25,755  26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) (c Adjusted net income (if negative, enter -0-)	ē	17								
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22 Printing and publications 23 Other expenses STMT 6 4,053. 4,053. 0  24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 25,755. 25,755  26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) (c Adjusted net income (if negative, enter -0-)	. <u>E</u>	20					<del>                                     </del>			
22 Printing and publications 23 Other expenses STMT 6 4,053. 4,053. 0  24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 25,755. 25,755  26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) (c Adjusted net income (if negative, enter -0-)	P	21	• •	eetinas		·		-		
expenses. Add lines 13 through 23  5,743. 4,958. 0  25 Contributions, gifts, grants paid 25,755. 25,755  26 Total expenses and disbursements Add lines 24 and 25 31,498. 4,958. 25,755  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 14,528. N/A	9	22		comiga			†			
expenses. Add lines 13 through 23  5,743. 4,958. 0  25 Contributions, gifts, grants paid 25,755. 25,755  26 Total expenses and disbursements Add lines 24 and 25 31,498. 4,958. 25,755  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 14,528. N/A	. B	23	· ·	S	гмт 6	4,053.	,	4,053.		0.
expenses. Add lines 13 through 23  5,743. 4,958. 0  25 Contributions, gifts, grants paid 25,755. 25,755  26 Total expenses and disbursements Add lines 24 and 25 31,498. 4,958. 25,755  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 14,528. N/A	) <u> </u>	24								
25 Contributions, girs, grants paid 26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12 3 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)	era	-	•			5,743.	,	4,958.		0.
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	Ö	25	•					<del>-</del>		25,755
Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A							1			
27 Subtract line 26 from line 12  3 Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A		-"				31,498.	.]	4,958.	.	25,755
2 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A		27		2			1			
b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A		1			ursements	<15,228.	.>			
c Adjusted net income (if negative, enter -0-)								4,528.	'.'	
							1			
	923	501				Act Notice, see the instru	ctions.			Form <b>990-PF</b> (2009)

C/O MARVIN GLAZIER

01-6020765

Page 2

Part II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of year	
column should be for end-ol-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	3,992.	22,532.	22,532.
2 Savings and temporary cash investments	113,567.	64,103.	64,103.
3 Accounts receivable ▶			
Less: allowance for doubtful accounts			<del></del>
4 Pledges receivable ▶			
Less: allowance for doubtful accounts			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other		i	
disqualified persons			
7 Other notes and loans receivable			
Less: allowance for doubtful accounts			
8 Inventories for sale or use			<u> </u>
9 Prepaid expenses and deferred charges  10 Investments - U.S. and state government obligations. STMT: 7	071 060	201 060	200 407
To a nivestinients - 0.5. and state government obligations 51111 7	271,062.	301,062.	308,487.
b Investments - corporate stock STMT 8	222,760.	222,135.	289,543.
c Investments - corporate bonds			
11 Investments land, buildings, and equipment basis			
Less accumulated depreciation			
12 Investments - mortgage loans	66 774	E2 00E	16 007
13 Investments - other STMT 9	66,774.	53,095.	46,987.
14 Land, buildings, and equipment basis			
Less accumulated depreciation			
15 Other assets (describe )			
1	670 155	662 027	721 652
16 Total assets (to be completed by all filers)	678,155.	662,927.	731,652.
17 Accounts payable and accrued expenses			
18 Grants payable			
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (december 1)			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
22 Other liabilities (describe )			
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted	678,155.	662,927.	
25 Temporarily restricted	7,0,200	00-,0-1	
25 Temporarily restricted   26 Permanently restricted   Foundations that do not follow SFAS 117, check here   and complete lines 27 through 31.			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds			
28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances			
29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	678,155.	662,927.	
2			
31 Total liabilities and net assets/fund balances	678,155.	662,927.	
Part III Analysis of Changes in Net Assets or Fund B	· ···	<u> </u>	
Part III Analysis of Changes in Net Assets of Fund B			
1 Total net assets or fund balances at beginning of year - Part II, column (a), line	30		680 455
(must agree with end-of-year figure reported on prior year's return)		1	678,155.
2 Enter amount from Part I, line 27a		2	<u>&lt;15,228.</u> >
3 Other increases not included in line 2 (itemize)		3	0.
4 Add lines 1, 2, and 3		4	662,927.
5 Decreases not included in line 2 (itemize)		5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	662,927.

923511 02-02-10

	ISH COMMUNITY EN MARVIN GLAZIER	NDOWMEN	T ASSOCI	ATES	01-	6020765 Page
	and Losses for Tax on I	nvestmen	t Income			
(a) List and desc 2-story brick wa	ribe the kind(s) of property sold (e.q irehouse; or common stock, 200 sh	g., real estate, is MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acqui (mo., day, yi	
1a PUBLICLY TRADE	D SECURITIES					<del>-  </del>
b CAPITAL GAINS						
c						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain oi (e) plus (f) n	
a 90,244.		1	94,64	5.		<4,401
b 685.		†	··			685
C		†				<del></del>
d		<del> </del>		<del></del>		<del></del>
e		· · · · · · · · · · · · · · · · · · ·				
	g gain in column (h) and owned by	the foundation	on 12/31/69		Gains (Col (h	) data minus
Demplote only for abboto shown	(i) Adjusted basis		cess of col. (i)	coi.	(k), but not le	ss than -0-) or
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any		Losses (from	
a		ļ				<4,401
b						685
<u>c</u>						
<u>d</u>		1				· · · · · · · · · · · · · · · · · · ·
е						
2 Capital gain net income or (net ca	pital loss) { If gain, also ente	er in Part I, line D- in Part I, line	7 7	} 2		<3,716
3 Net short-term capital gain or (los	•					
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	•			}   3	l	N/A
Part V   Qualification U	nder Section 4940(e) for	r Reduced	Tax on Net	Investment Inc	ome	
(For optional use by domestic private	<del></del>			<del></del>		
(1 or opnosital about a delinoons private		10 10(2) 12 0		,		
If section 4940(d)(2) applies, leave the	nis part blank.					
Was the foundation liable for the sec	tion 4042 tay on the distributable an	nount of any ve	ar in the bace ner	ind2		Yes X No
				iou.		[ ] 163 [22] 140
If "Yes," the foundation does not qual  Enter the appropriate amount in (				<u> </u>		
(a)		Tuctions before	making any entire		<del></del>	(d)
Base period years Calendar year (or tax year beginnii	(b) Adjusted qualifying dis	etributions	Not value of no	(c) ncharitable-use assets		Distribution ratio
			Net value of flor			(b) divided by col. (c))
2008		17,742.	<del></del>	743,999		.064169
		38,248.		816,623		.04683
2006		37,021.		781,958		.04734
2005		36,630.		762,888		.04801
2004		35,125.		746,640	•	.04704
2 Total of line 1, column (d)					2	.253409
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the number	of years		
the foundation has been in exister	· ·	• •	·	•	3	.050682
4 Enter the net value of noncharitati	le-use assets for 2009 from Part X,	line 5			4	696,442
5 Multiply line 4 by line 3					5	35,297
6 Enter 1% of net investment incon	ne (1% of Part I. line 27h)				6	145
	(					
7 Add lines 5 and 6					7	35,442
8 Enter qualifying distributions from		a 1b and same	late that sad war	a a 10/ tay rata	8	25,755
See the Part VI instructions	line 7, check the box in Part VI, line	e io, and comp	nete that ball using	y a 1/0 lax idle.		

## JEWISH COMMUNITY ENDOWMENT ASSOCIATES

Form 990-PF (2009) 01-6020765 C/O MARVIN GLAZIER Page 4 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 291. b Domestic foundations that meet the section 4940(e) requirements in Part V, check 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-) 3 4 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: 727. a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 727. 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 436. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 436 . Refunded ▶ 11 Enter the amount of line 10 to be Credited to 2010 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X 1a any political campaign? X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b 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 X c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 • (2) On foundation managers. ▶ \$ (1) On the foundation > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ X 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 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 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A 4b b If "Yes," has it filed a tax return on Form 990-T for this year? X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 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 X remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) ME 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) Х 86 of each state as required by General Instruction G? If "No," attach explanation 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 X year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

### JEWISH COMMUNITY ENDOWMENT ASSOCIATES

Form 990-PF (2009)

C/O MARVIN GLAZIER

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C/O IMMOVIN CENTERIAL	<del></del>		
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	1 1	1	
section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		_X
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
August 17, 2008?	_12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ► N/A			
14 The books are in care of ► MARVIN GLAZIER Telephone no. ► 207-94	7-69	915	
Located at ▶ P O BOX 919, BANGOR, ME ZIP+4 ▶04	402	-09	19
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
and enter the amount of tax-exempt interest received or accrued during the year	N.	/A	
Part 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)		İ	
a disqualified person?		İ	
(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		ŀ	
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		ŀ	
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 corrected			
before the first day of the tax year beginning in 2009?	1c	1	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)).	i l		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1		
before 2009? X Yes No			
If "Yes," list the years ▶ 2008 , , ,			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions.)	2b	X	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
<b>▶</b>		-	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1	1	
during the year?	1 !		
b If "Yes," did it have excess business holdings in 2009 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) 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 2009) N/A	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 2009?	4b		Х
	m <b>990</b>	-PF(	2009)

mpensation of five highest-paid employees (other than those i	ncluded on line 1). If none	, enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
NONE				
		<del></del>	-	-
	<del>                                     </del>			
	<del></del>		ļ	-
	-			
	(a) Name and address of each employee paid more than \$50,000	(a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position	devoted to position	(a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deterred compensation

7	<b>/</b> \( \)	MARVITN	GLAZIER
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Part VIII Paid Employees, and Contractors (continued)		
3 'Five highest-paid independent contractors for professional services. If none, enter (a) Name and address of each person paid more than \$50,000		- Company
NONE	(b) Type of service	(c) Compensation
NONE	<del> </del>	
		<del></del>
	<del>-                                    </del>	<del></del>
<del></del>	<del> </del>	
Total number of others receiving over \$50,000 for professional services		<b>▶</b> C
Part IX-A Summary of Direct Charitable Activities		· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	tical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers pro-	duced, etc.	Expenses
1 N/A		
2		
3		
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		
	<del></del>	
Total Add lines 4 through 2		0.
Total, Add lines 1 through 3		Form <b>990-PF</b> (2009)

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P	art X` Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	689,527.
	Average of monthly cash balances	1b	17,521.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	707,048.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)   1e   0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	707,048.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,606.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	696,442.
6	Minimum investment return. Enter 5% of line 5	6	34,822.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	34,822.
2a	1 - 1		
b	Income tax for 2009 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	291.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	34,531.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	34,531.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	34,531.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		25 755
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	25,755.
	Program-related investments - total from Part IX-B	1b	
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		
	Suitability test (prior IRS approval required)	38	
	Cash distribution test (attach the required schedule)	3b	25 755
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	25,755.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		Λ
_	income. Enter 1% of Part I, line 27b	5	25,755.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	<del></del>
	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.	qualities fo	or the section

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C/O MARVIN GLAZIER

(a) Corpus	(b) Years prior to 2008	(c) 2008	( <b>d</b> ) 2009
			34,531.
			<del>-</del>
		29,172.	
			<del></del>
	0.		
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0.			
		25,755.	
	0.		
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0.			0.
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	0.		
	0.		
	0.		
		3,417.	
	1		
			24 521
			34,531.
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	0. 0. 0. 0.	0. 0. 0. 0. 0. 0. 0. 0.	0. 25,755. 0. 0. 0. 0. 0. 0. 3,417.

923581 02-02-10

Part XIV Private Operating For	undations (see ins	structions and Part V	II-A. guestion 9)	N/A	30703 Tage 1
1 a If the foundation has received a ruling or d			1		
foundation, and the ruling is effective for 2					
b Check box to indicate whether the foundat			in section	4942(j)(3) or 494	2(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	g toutteation accomba	Prior 3 years	10 12())(0) 0.	-()/(0/
Income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
Investment return from Part X for			<del>                                     </del>	<del> `</del>	<del></del>
each year listed					
b 85% of line 2a			<del>                                     </del>		<del></del>
c Qualifying distributions from Part XII,			<del> </del>		
line 4 for each year listed				1	
d Amounts included in line 2c not			<del></del>		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			<del></del>	<del>                                     </del>	······································
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			<del> </del>	<del> </del>	
alternative test relied upon:					
a "Assets" alternative test - enter:				i	
(1) Value of all assets	· · · · · · · · · · · · · · · · · · ·				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
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)					
(2) Support from general public				†       †	<del></del> -
and 5 or more exempt	•				
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from			<del>                                     </del>	<del>                                     </del>	
an exempt organization					
(4) Gross investment income			<del></del>	<del> </del>	
Part XV   Supplementary Inform	nation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during the				• •	
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who h			tributions received by the	foundation before the close	of any tax
year (but only if they have contributed mor	e than \$5,000). (See se	ection 507(d)(2).)			
NONE					
b List any managers of the foundation who c			(or an equally large portion	on of the ownership of a par	tnership or
other entity) of which the foundation has a	10% or greater interes	t.			
NONE					
2 Information Regarding Contribution					
Check here Lifthe foundation only					
the foundation makes gifts, grants, etc. (se			<del> </del>	implete items 2a, b, c, and i	<u>.                                    </u>
a The name, address, and telephone number	•	• •		DD1 761 MT0116	
GRANTS ARE MADE AT TH				APPLICATIONS	
SENT TO: JCEA, C/O MA				C, ME 04402-0	1919
b The form in which applications should be s	submitted and informati	on and materials they s	should include:		
NONE				<del></del>	
c Any submission deadlines:					
MONE  d Any restrictions or limitations on awards, s	such as hy gengraphics	Largas charitable fields	kinds of institutions or o	ther factors	
NONE	and as by Beoglabille	. a. ouo, enumeroro neros	,as or montations, or t		
923601 02-02-10			<del></del>		orm 990-PF (2009)

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Part XV   Supplementary Informa				Γ
3 Grants and Contributions Paid During t		Payment	<del></del>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year CONGREGATION BETH		NONE	GENERAL SUPPORT	1,770
ABRAHAM-509(A)(1)		NONE	GENERAL SUPPORT	1,770
BANGOR, ME				
212,001, 112				
CONGREGATION BETH		NONE	GENERAL SUPPORT	8,190
EL-509(A)(1)	ł			-
BANGOR, ME				
CONGREGATION BETH		NONE	GENERAL SUPPORT	15,795
ISRAEL-509(A)(1)	1			
BANGOR, ME		{		
		-		
		J		
		1		
		]		
Total			▶ 3a	25,755
b Approved for future payment				
NONE				
NONE				
		J		
				Ì
		1		
¥			<b>A</b>	0
Total 923611 02-02 10	_ <del></del>	<del></del>	<b>▶</b> 3b	orm <b>990-PF</b> (2009

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	(C) Exclu-	ded by section 512, 513, or 514	(e)
E. D. D. D. D. D. D. D. D. D. D. D. D. D.	(a)			(d)	Related or exempt
1 Program service revenue:	Business	Amount	sion code	Amount	function income
a	1				<del></del>
	-	<del></del>	1 1		
0					<del></del>
d	-	<del></del>	+		·
е		<del></del>	1 1	-	
f	-		+		
g Fees and contracts from government agencies	_				
2 Membership dues and assessments	<del></del>		1 1		<del></del> -
3 Interest on savings and temporary cash		** *		·- ·-	
investments			14	8,057.	
4 Dividends and interest from securities	<u>-</u>		14	11,379.	<del></del>
5 Net rental income or (loss) from real estate:			1 1		
a Debt-financed property			1 "1		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			18	50.	
8 Gain or (loss) from sales of assets other					
than inventory	1		18	<3,716.	>
9 Net income or (loss) from special events		-			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	}				
b					
C					
d					
е					
12 Subtotal. Add columns (b), (d), and (e)			).	15,770.	0
13 Total. Add line 12, columns (b), (d), and (e)	•=			13	15,770
(See worksheet in line 13 instructions to verify calculations.	)				

# Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of Line No. the foundation's exempt purposes (other than by providing funds for such purposes). NOT APPLICABLE

Form **990-PF** (2009)

923621 02-02-10

For	n 990-F		IARVIN GLAZIER	JOWMENI ASSOC.		-6020765 Page 13	
	art X\			and Transactions a	nd Relationships With N		
		Exempt Organ			•		
1	Did th		rectly engage in any of the followi	ng with any other organization	n described in section 501(c) of	Yes No	
			)(3) organizations) or in section 5				
а		·	ation to a noncharitable exempt o				
_	(1) C	1a(1)  X					
	(2) (	1a(2) X					
ь		transactions:					
_		Gales of assets to a noncharita	ible exempt organization			1b(1) X	
			incharitable exempt organization			1b(2) X	
	` '	Rental of facilities, equipment,	. •			1b(3) X	
		Reimbursement arrangements				1b(4) X	
		oans or loan guarantees	•			1b(5) X	
			embership or fundraising solicitati	ons		1b(6) X	
c			ailing lists, other assets, or paid er			1c X	
			_		ays show the fair market value of the	ne goods, other assets.	
•					e in any transaction or sharing arrai		
			other assets, or services received		,	• ,	
(a)	Line no	(b) Amount involved	(c) Name of noncharitab		(d) Description of transfers, transf	actions, and sharing arrangements	
<u>`</u>			N/A				
_					<del></del>		
_							
_				<u></u> .			
_						· · · · · · · · · · · · · · · · · · ·	
					-		
_			<del></del>				
_							
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					<del>-</del>	· · · · · · · · · · · · · · · · · · ·	
-						·	
_							
		·		·	7		
2a	Is the	foundation directly or indirec	tly affiliated with, or related to, on	e or more tax-exempt organiz	ations described	<del></del>	
	ın sec	tion 501(c) of the Code (othe	r than section 501(c)(3)) or in se	ction 527?		Yes X No	
b	If "Ye:	s," complete the following sch	redule.				
		(a) Name of org	ganization	(b) Type of organization	(c) Description (	of relationship	
		N/A					
_		1					
	Under p	penalties of perjury, I declare that I I	have examined this return, including acc or than techniques or fiduciary) is based o	companying schedules and statements of which preparer	ents, and to the best of my knowledge an has any knowledge	d belief, it is true, correct,	
and complete/Declaration of preparer (other than tempayer or fiduciary) is based on all information of which preparer has any knowledge							
[ _	<b>\</b> -	/_///_	/	1/1/1/4/0	1 Mess.		
Sign Here	Sı	gnature of officer or trustee	//	Date / /	Title	I December 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
딜	υ .	Preparer's	( )	1	ate Check if	Preparer's identifying number	
Sign	aid arer's Only	signature	- 1 Chick		1/09/10 employed ► L	D00100865	
	Paid parer' e Only	Firm s name (or yours BERF	DUNN, MCNEI	L & PARKER, L	LC EIN ► 01	L-0523282	

Form **990-PF** (2009)

(207)942-1600

Phone no

address, and ZIP code BANGOR ,

36 PLEASANT STREET

ME 04401

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY C	ASH :	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
MERRILL MERCHANTS TRUST & INV	8,057.					
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A						57.
FORM 990-PF DIVIDEND	S AND INTE	REST FROM	SEC	URITIES	STATEMENT	2
SOURCE	GROS	S AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	) 
MERRILL MERCHANTS TRUST & IVS	БМТ	12,064.	685.		5. 11,37	
TOTAL TO FM 990-PF, PART I, I	IN 4	12,064.		685.	11,3	79.
FORM 990-PF	OTHER	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOK		(B) NET INVEST- MENT INCOME		
3333	_		50.	50	•	
TOTAL TO FORM 990-PF, PART I,	LINE 11 =		50.	50	•	
FORM 990-PF	ACCOUNT	ING FEES		**************************************	STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
ACCOUNTING	1,535	•	750	•		0.
TO FORM 990-PF, PG 1, LN 16B	1,535	•	750	•		0.
<b>-</b>						===

FORM 990-PF	TAXES			STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM			
FOREIGN TAXES PAID	155.	155.			0		
TO FORM 990-PF, PG 1, LN 18	155. 155		155.		0.		
FORM 990-PF	OTHER E	XPENSES	<del>-</del>		STATEMENT	6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM			
AGENCY FEES SUPPLIES/POSTAGE	4,038.	4,	038.			0.	
TO FORM 990-PF, PG 1, LN 23	4,053.	4,053.			0.		
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBLI	GATIONS	STATEMENT	7	
DESCRIPTION	U.S GOV'		вос	OK VALUE	FAIR MARKET	г	
MERRILL BANK - GOVERNMENT BOX	NDS X	301,06		301,062.	308,487.		
TOTAL U.S. GOVERNMENT OBLIGA	•		301,062.	308,48	87.		
TOTAL STATE AND MUNICIPAL GO	VERNMENT OBL	IGATIONS		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
					308,48		

FORM 990-PF	CORPORATE STOCK		STATI	EMENT 8	
DESCRIPTION		BOOK VALUE		MARKET ALUE	
MERRILL BANK - COMMON STOCKS	<del>-</del>	222,13	5.	289,543.	
TOTAL TO FORM 990-PF, PART II,	LINE 10B	222,13	5. —	289,543.	
FORM 990-PF	OTHER INVESTMENTS		STATI	EMENT 9	
DESCRIPTION	VALUATION METHOD	BOOK VALUE		MARKET ALUE	
MERRILL BANK - MUTUAL FUNDS	COST	53,09	5.	. 46,987	
TOTAL TO FORM 990-PF, PART II,	LINE 13	53,09	53,095.		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
NORMAN MINSKY		<del></del> -		ACCOUNT	
PO BOX 919 BANGOR, ME 044020919	DIRECTOR 1.00	0.	0.		
		0.	0.	ACCOUNT 0.	
BANGOR, ME 044020919  EDWARD M. HARROW PO BOX 919	1.00 DIRECTOR-CHAIR			O.	
BANGOR, ME 044020919  EDWARD M. HARROW PO BOX 919 BANGOR, ME 044020919  LESTER COHEN PO BOX 919	1.00 DIRECTOR-CHAIR 1.00 DIRECTOR	0.	0.	ACCOUNT	

JEWISH COMMUNITY ENDOWMEN	T ASSOCIATES C/		01-60	020765
MARVIN GLAZIER PO BOX 919 BANGOR, ME 044020919	TREASURER 1.00	0.	0.	0.
PATTIE RAPPAPORT PO BOX 919 BANGOR, ME 044020919	SECRETARY 1.00	0.	0.	0.
LOUISE SMALL PO BOX 919 BANGOR, ME 044020919	DIRECTOR 1.00	0.	0.	0.
VALERIE LEVY PO BOX 919 BANGOR, ME 044020919	DIRECTOR 1.00	0.	0.	0.
BARBARA ROLNICK PO BOX 919 BANGOR, ME 044020919	DIRECTOR 1.00	0.	0.	0.
JOHN MILLER PO BOX 919 BANGOR, ME 044020919	DIRECTOR 1.00	0.	0.	0.
NOAH NESIN PO BOX 919 BANGOR, ME 044020919	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	0.	0.	0.

Form 8	868 (Rev. 4-2009)			Page 2
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and	check this bo	x	► X
	Only complete Part II if you have already been granted an automatic 3-month extension on a p			
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
	Additional (Not Automatic) 3-Month Extension of Time. Only file the	onginal (no co	pies needed).	
Type o	Name of Exempt Organization  JEWISH COMMUNITY ENDOWMENT ASSOCIATES  C/O MARVIN GLAZIER		Employer ide	ntification number
File by t extende due date	Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use o	
filing the return S Instructi	City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
		m 1041-A [ m 4720 [	Form 5227 Form 6069	
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension	on a previou	sly filed Form	8868.
Tel  ● If ti  ■ If ti  box ■  4  5  6  7	For calendar year 2009, or other tax year beginning  If this tax year is for less than 12 months, check reason:  State in detail why you need the extension	ox	Change	in accounting period
	COMPLETE AND ACCURATE RETURN.			
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less nonrefundable credits. See instructions.  If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and experiences.		8a \$	727.
_	tax payments made. Include any prior year overpayment allowed as a credit and any amount p previously with Form 8868.		8b \$	727.
c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See	•	8c \$	0.
it is tru	Signature and Verification  penalties of perjury, I declare that I have examined this form, including accompanying schedules and stater e, correct, and complete, and that I am authorized to prepare this form.	ments, and to the		wledge and belief,
Signat	ure Fre Much Title F	•	Date ► d	orm <b>8868</b> (Rev. 4-2009)

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