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Form 990

Return of Organization Exempt From Income Tax

2009

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009

B Check if applicable

Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
COAST GUARD FOUNDATION INC

D Employer identification number
04-2899862

E Telephone number
(860) 535-0786

F Gross receipts \$ 7,996,488

G Name and address of principal officer
ANNE B BRENGLE
394 TAUGWONK ROAD
STONINGTON, CT 063781807

H Room/suite

I Tax-exempt status 501(c) (3) (insert no) 4947(a)(1) or 527

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list (see instructions)
H(c) Group exemption number ►

J Website: ► WWW COASTGUARDFOUNDATION.ORG

K Form of organization Corporation Trust Association Other ►

L Year of formation 1986

M State of legal domicile MA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
 THE COAST GUARD FOUNDATION STRIVES TO HELP COAST GUARD MEN AND WOMEN STRENGTHEN THEIR SERVICE TO OUR NATION BY ENCOURAGING THEM TO EXCEL, ON DUTY AND OFF. THE FOUNDATION SUPPORTS NUMEROUS PROGRAMS AND PROJECTS THROUGH DONATIONS FROM INDIVIDUALS, CORPORATIONS AND THROUGH GRANTS AND SPECIAL FUNDRAISING EVENTS. THE FOUNDATION SUPPORTS ACADEMIC, ATHLETIC, AND LEADERSHIP EXCELLENCE FOR CADETS AT THE ACADEMY, OFFERS FINANCIAL RELIEF TO COAST GUARD FAMILIES WHO LOSE THEIR POSSESSIONS IN NATURAL DISASTERS OR LOSE A LOVED ONE IN SERVICE TO OUR COUNTRY, PROVIDES COLLEGE SCHOLARSHIPS TO DEPENDENTS OF ENLISTED PERSONNEL, FUNDS RECREATIONAL AND FAMILY-ORIENTED FACILITIES, AND SUPPORTS EDUCATIONAL AND MORALE PROGRAMS AT BASES, AND ON CUTTERS AROUND THE NATION, AS WELL AS HUNDREDS OF SMALLER PROJECTS FOR COAST GUARD MEMBERS AND THEIR FAMILIES, THROUGHOUT THE UNITED STATES

2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) **3** 30

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** 30

5 Total number of employees (Part V, line 2a) **5** 14

6 Total number of volunteers (estimate if necessary) **6** 200

7a Total gross unrelated business revenue from Part VIII, column (C), line 12 **7a** 5,540

b Net unrelated business taxable income from Form 990-T, line 34 **7b** 0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	4,707,751	4,839,102
9 Program service revenue (Part VIII, line 2g)		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	200,664	-211,983
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-716,440	-366,573
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,191,975	4,260,546

	Prior Year	Current Year
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	662,045	536,980
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	664,157	688,329
16a Professional fundraising fees (Part IX, column (A), line 11e)	107,280	83,302
b Total fundraising expenses (Part IX, column (D), line 25) ► 946,297		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,650,937	2,821,073
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	4,084,419	4,129,684
19 Revenue less expenses Subtract line 18 from line 12	107,556	130,862

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	5,786,496	6,245,741
21 Total liabilities (Part X, line 26)	176,703	168,260
22 Net assets or fund balances Subtract line 21 from line 20	5,609,793	6,077,481

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge
***** Signature of officer
ANNE B BRENGLE PRESIDENT Type or print name and title

Preparer's signature	TERENCE J MALAGHAN CPA	Date	Check if self-employed ►	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4	Sansiveri Kimball & Co LLP 107 Airport Road Westerly, RI 028913420		EIN ►	Phone no ► (401) 596-2000

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission

THE FOUNDATION SERVES AS THE PRINCIPAL NON-PROFIT ORGANIZATION FOR SOLICITING AND RECEIVING CHARITABLE CONTRIBUTIONS THAT WILL BENEFIT THE COAST GUARD AND THE COAST GUARD ACADEMY, SERVES AS GOOD WILL AMBASSADORS IN PROMOTING THE TRADITIONS AND DEEPER UNDERSTANDING OF THE ROLE OF THE UNITED STATES COAST GUARD IN SERVING AND PROTECTING THE UNITED STATES OF AMERICA AND THOSE WHO USE ITS WATERWAYS, AND ACTS IN ACCORDANCE WITH POLICIES, PROCEDURES AND GUIDANCE ADDRESSING THESE EFFORTS AS PROMULGATED BY THE UNITED STATES COAST GUARD

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 845,514 including grants of \$) (Revenue \$)
 SUPPORT TO THE UNITED STATES COAST GUARD AT LARGE THE COAST GUARD FOUNDATION CONTRIBUTES TO THE UNITED STATES COAST GUARD BY PROMOTING THE GENERAL WELFARE OF THOSE IN THE SERVICE. THE FOUNDATION SUPPORTS EDUCATION, DEVELOPS LEADERSHIP POTENTIAL AND PROVIDES MORALE SUPPORT TO THOSE WHO SERVE. THE COAST GUARD FOUNDATION WORKS HAND IN HAND WITH THE COAST GUARD'S EDUCATION GRANT PROGRAM TO SUPPLEMENT THE TUITION ASSISTANCE PROGRAM SO ENLISTED PERSONNEL HAVE ACCESS TO FUNDS FOR BOOKS, FEES AND SUPPLIES THAT MIGHT OTHERWISE BE OUT OF REACH. COAST GUARD FOUNDATION FUNDS PROVIDE SUPPORT FOR PROGRAMS INITIATED ON THE UNIT LEVEL THAT ARE INTENDED TO IMPROVE MORALE AND HONOR AND VALUE THE COAST GUARD MEMBERS' SERVICE TO THE COUNTRY. THE COAST GUARD FOUNDATION ALSO PROVIDES FUNDS FOR SPECIAL CAPITAL PROJECTS IDENTIFIED BY COAST GUARD HEADQUARTERS, SWIMMING POOLS, RECREATION CENTERS AND MULTI-PURPOSE COURTS, FOR EXAMPLE, PROVIDE SUPPORT TO LARGER COAST GUARD COMMUNITIES, AND IN PARTICULAR OFTEN BENEFIT THOSE SERVING IN REMOTE LOCATIONS THAT LACK LOCAL RESOURCES

4b (Code) (Expenses \$ 1,479,822 including grants of \$) (Revenue \$)
 SUPPORT TO THE UNITED STATES COAST GUARD ACADEMY THE COAST GUARD FOUNDATION PROVIDES MARGIN OF EXCELLENCE FUNDING THAT PROMOTES ATHLETICS, SAILING, ACADEMICS AND ACTIVITIES AT THE US COAST GUARD ACADEMY TO ENSURE A QUALITY EDUCATIONAL EXPERIENCE FOR ITS CADETS. INITIATIVES INCLUDE ACADEMIC ENRICHMENT PROGRAMS THAT BRING WELL-KNOWN GOVERNMENT FIGURES TO THE ACADEMY TO INTERACT WITH CADETS ON AN INDIVIDUAL CLASS-LEVEL AND THE CADET CORPS AS A WHOLE. ENRICHMENT PROGRAMS AND EQUIPMENT FOR THE ACADEMIC DISCIPLINES PUT THE ACADEMY PROGRAMS ON A PAR WITH OTHER PRESTIGIOUS COLLEGES, UNIVERSITIES AND SERVICE ACADEMIES. THE COAST GUARD FOUNDATION HAS COLLABORATED WITH THE ACADEMY TO DEVELOP LEADERSHIP SKILLS THROUGH A QUALITY WATERFRONT PROGRAM, BY PROVIDING SAIL TRAINING VESSELS AND COACHING STAFF FOR CADETS TO DEVELOP SEAMANSHIP SKILLS THAT ARE SECOND TO NONE

4c (Code) (Expenses \$ 359,483 including grants of \$) (Revenue \$)
 SUPPORT TO COAST GUARD FAMILIES THE COAST GUARD FOUNDATION PROVIDES VITAL SUPPORT TO COAST GUARD FAMILIES, WITH SCHOLARSHIPS FOR DEPENDENTS OF ENLISTED MEMBERS TO MAKE HIGHER EDUCATION ATTAINABLE AND AFFORDABLE. THE DISASTER RELIEF FUND, ESTABLISHED IN THE WAKE OF HURRICANE KATRINA, PROVIDES ASSISTANCE TO COAST GUARD MEMBERS AND FAMILIES WHO HAVE LOST PROPERTY AND POSSESSIONS BECAUSE OF A NATURAL DISASTER. THROUGH THE FAMILY DISASTER RELIEF FUND, THE FOUNDATION ASSISTS FAMILIES WHO HAVE SUFFERED THE ULTIMATE HARDSHIP, LOSING A LOVED ONE IN THE LINE OF DUTY WHILE SERVING OUR COUNTRY. FINANCIAL ASSISTANCE AND RESOURCES ARE MADE AVAILABLE TO THE FAMILIES. THE FALLEN HEROES SCHOLARSHIP FUND PROVIDES FOR THE HIGHER EDUCATIONAL NEEDS OF THE COAST GUARD FAMILY MEMBERS WHOSE PARENT HAS PERISHED IN THE LINE OF DUTY

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 2,684,819

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors?

3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

5 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV

10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V

11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.

- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.
- Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.
- Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.
- Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.
- Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.
- Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.

12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

12a Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No

If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12a No

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III

17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I

18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		
6		No
7		No
8		No
9		No
10	Yes	
11	Yes	
12	Yes	
13		No
14a		No
14b		No
15		No
16		No
17	Yes	
18	Yes	
19		No
20		No

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	No	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	No	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	No	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	No	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	No	
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a	No	
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	No	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	No	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	29	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	No	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	No	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	No	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	No	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	34	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	35	No	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36	No	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	37	No	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	38	Yes	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O			

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	20
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	14
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
4b	If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	4b	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).	7a	Yes
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
7d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	No
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	Yes
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.	9a	
9b	Did the organization make any taxable distributions under section 4966?	9b	
10	Section 501(c)(7) organizations. Enter	10a	
10b	Initiation fees and capital contributions included on Part VIII, line 12	10b	
11	Section 501(c)(12) organizations. Enter	11a	
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body . . .	1a	30	
b Enter the number of voting members that are independent . . .	1b	30	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No	
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	No	
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	No	
6 Does the organization have members or stockholders?	6	No	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	No	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	No	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	No
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes
11a Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes
13 Does the organization have a written whistleblower policy?	13	Yes
14 Does the organization have a written document retention and destruction policy?	14	Yes
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	Yes
b Other officers or key employees of the organization	15b	Yes
If "Yes" to line a or b, describe the process in Schedule O (See instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ► MA , NY , MD , FL , CA , RI , AL , WA , AZ , AK , MI , NJ , AR , GA , IL , KS , KY , LA , ME , MN , MS , NC , ND , NH , NM , OH , OK , OR , PA , SC , TN , UT , VA , WI , WV
18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply <input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► SUZAN SPRINGER 394 TAUGWONK ROAD STONINGTON, CT 06378 (860) 535-0786

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

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

1b Total	284,322	0	17,349
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **2**

		Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 0		

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	2,469,425			
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,369,677			
	g Noncash contributions included in lines 1a-1f \$		915,963			
	h Total. Add lines 1a-1f		4,839,102			
Program Service Revenue		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)					
			60,465		60,465	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross Rents	(I) Real	(II) Personal			
	b Less rental expenses	89,880				
	c Rental income or (loss)	89,880				
	d Net rental income or (loss)		89,880			89,880
7a Gross amount from sales of assets other than inventory	(I) Securities	(II) Other				
	2,223,682	108,300				
b Less cost or other basis and sales expenses	2,603,831	599				
c Gain or (loss)	-380,149	107,701				
d Net gain or (loss)		-272,448		-272,448		
8a Gross income from fundraising events (not including \$ 2,469,425 of contributions reported on line 1c) See Part IV, line 18						
	a	593,330				
b Less direct expenses	b	1,131,512				
c Net income or (loss) from fundraising events		-538,182		-538,182		
9a Gross income from gaming activities See Part IV, line 19						
	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances						
	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11a MISCELLANEOUS INCOME		900,099	40,689	40,689		
b TRUSTEE DUES		900,099	35,500	35,500		
c SALE OF PROMOTIONAL IT		453,220	5,540		5,540	
d All other revenue						
e Total. Add lines 11a-11d		81,729				
12 Total revenue. See Instructions		4,260,546	-734,441	5,540	150,345	

Part IX Statement of Functional Expenses**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.****All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	200,000	200,000		
2 Grants and other assistance to individuals in the U S See Part IV, line 22	336,980	336,980		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	191,978		95,989	95,989
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	415,033	82,387	135,425	197,221
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	13,732	2,834	3,721	7,177
9 Other employee benefits	23,410	4,614	10,980	7,816
10 Payroll taxes	44,176	6,701	16,400	21,075
11 Fees for services (non-employees)				
a Management				
b Legal	12,049		12,049	
c Accounting	30,250		30,250	
d Lobbying				
e Professional fundraising See Part IV, line 17 . . .	83,302			83,302
f Investment management fees	24,664		24,664	
g Other	84,943	26,298	33,135	25,510
12 Advertising and promotion	57,567	15,024	15,023	27,520
13 Office expenses	31,624	5,195	11,832	14,597
14 Information technology				
15 Royalties				
16 Occupancy	34,048	17,351	7,191	9,506
17 Travel	68,632	3,407	13,105	52,120
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	53,709	23,902	9,936	19,871
23 Insurance	13,360	4,822	6,609	1,929
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a BOATS DONATED TO THE CO	832,350	832,350		
b MORALE, WELFARE AND EVE	565,089	565,089		
c WATERFRONT DEVELOPMENT	236,198	236,198		
d PRINTING AND POSTAGE	149,219	3,852	6,672	138,695
e ACADEMIC ENRICHMENT	107,929	107,929		
f All other expenses	519,442	209,886	65,587	243,969
25 Total functional expenses. Add lines 1 through 24f	4,129,684	2,684,819	498,568	946,297
26 Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year	(B) End of year
Assets	1 Cash—non-interest-bearing	175,289	1 209,255
	2 Savings and temporary cash investments	547,878	2 895,437
	3 Pledges and grants receivable, net	374,646	3 463,735
	4 Accounts receivable, net	36,291	4 3,411
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L	6	
	7 Notes and loans receivable, net	7	
	8 Inventories for sale or use	8	24,498
	9 Prepaid expenses and deferred charges	84,250	9 100,327
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,645,174
	b Less accumulated depreciation	10b	590,193
		1,088,355	10c 1,054,981
	11 Investments—publicly traded securities	3,479,787	11 3,494,097
	12 Investments—other securities See Part IV, line 11	12	
	13 Investments—program-related See Part IV, line 11	13	
	14 Intangible assets	14	
	15 Other assets See Part IV, line 11	15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	5,786,496	16 6,245,741
Liabilities	17 Accounts payable and accrued expenses	134,453	17 82,781
	18 Grants payable	18	
	19 Deferred revenue	42,250	19 74,300
	20 Tax-exempt bond liabilities	20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D	21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	22	
	23 Secured mortgages and notes payable to unrelated third parties	23	
	24 Unsecured notes and loans payable to unrelated third parties	24	
	25 Other liabilities Complete Part X of Schedule D	0	25 11,179
	26 Total liabilities. Add lines 17 through 25	176,703	26 168,260
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
	27 Unrestricted net assets	1,935,843	27 2,230,606
	28 Temporarily restricted net assets	1,325,169	28 1,343,199
	29 Permanently restricted net assets	2,348,781	29 2,503,676
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.		
	30 Capital stock or trust principal, or current funds	30	
	31 Paid-in or capital surplus, or land, building or equipment fund	31	
	32 Retained earnings, endowment, accumulated income, or other funds	32	
	33 Total net assets or fund balances	5,609,793	33 6,077,481
	34 Total liabilities and net assets/fund balances	5,786,496	34 6,245,741

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	No
b Were the organization's financial statements audited by an independent accountant?	2b	Yes
c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

2009

Open to Public
Inspection**SCHEDULE A**
(Form 990 or 990EZ)**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Name of the organization
COAST GUARD FOUNDATION INC

Employer identification number

04-2899862

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i)**.

2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)

3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.

4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state

5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)

6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.

7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)

10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.

11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii) a family member of a person described in (i) above?

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the supported organization(s)

Yes	No
11g(i)	No
11g(ii)	No
11g(iii)	No

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?	(vii) Amount of support?
			Yes	No	Yes	No		
UNITED STATES COAST GUARD	546010204	8	Yes		Yes		Yes	845,514
UNITED STATES COAST GUARD ACADEMY	546010204	6	Yes		Yes		Yes	1,479,822
Total								2,325,336

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						►

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		►
b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		►
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		►
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		►
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		►

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15
16 Public support percentage from 2008 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18
19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization	
b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	

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

Additional Data

Software ID:
Software Version:
EIN: 04-2899862
Name: COAST GUARD FOUNDATION INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Official	Key employee	Highest compensated employee			
AL J BERNARD DIRECTOR	5 00	X					0	0	0
DONALD T BOLLINGER DIRECTOR	5 00	X					0	0	0
OTTO CANDIES JR DIRECTOR	5 00	X					0	0	0
RANGELO CLEFFI DIRECTOR	5 00	X					0	0	0
JAMES J COLEMAN JR DIRECTOR	5 00	X					0	0	0
WILLIAM H COLLIER JR DIRECTOR	5 00	X					0	0	0
PAUL M ERICKSON DIRECTOR	5 00	X					0	0	0
ROBERT J FLYNN ASSISTANT TREASURER	10 00	X		X			0	0	0
MONTE FRIEDKIN DIRECTOR	5 00	X					0	0	0
VERNA KAYE GIBSON DIRECTOR	5 00	X					0	0	0
LAWRENCE R GLENN VICE CHAIRMAN	10 00	X		X			0	0	0
RICHARD J GRAHN SECRETARY	10 00	X		X			0	0	0
RICHARD D HERR TREASURER	10 00	X		X			0	0	0
WALTER J HICKEL JR DIRECTOR	5 00	X					0	0	0
R CHRISTIAN JOHNSEN DIRECTOR	5 00	X					0	0	0
JOHN S JOHNSON DIRECTOR	5 00	X					0	0	0
CORRINE X KOSAR DIRECTOR	5 00	X					0	0	0
LEO PAUL KOULOS DIRECTOR	5 00	X					0	0	0
CLAY MAITLAND DIRECTOR	5 00	X					0	0	0
JEAN-JACQUES MARIE DIRECTOR	5 00	X					0	0	0
JAMES P MULDOON DIRECTOR	5 00	X					0	0	0
JAMES A O'HARE DIRECTOR	5 00	X					0	0	0
ROSS E ROEDER CHAIRMAN	20 00	X		X			0	0	0
STEVEN T SCALZO DIRECTOR	5 00	X					0	0	0
JOHN F STATTS DIRECTOR	5 00	X					0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
LEROY VANDER PUTTEN DIRECTOR	5 00	X					0	0	0
HUGH A WESTBROOK DIRECTOR	5 00	X					0	0	0
THOMAS A ALLEGRETTI TRUSTEE	2 00	X					0	0	0
JAMES S SANDRASICK TRUSTEE	2 00	X					0	0	0
WILLIAM A BISSO III TRUSTEE	2 00	X					0	0	0
MORTON S BOUCHARD III TRUSTEE	2 00	X					0	0	0
ERIC W CAPLAN TRUSTEE	2 00	X					0	0	0
MICHAEL L CARTHEW TRUSTEE	2 00	X					0	0	0
LISA KAZOR CHRISTOVICH TRUSTEE	2 00	X					0	0	0
LINDA COLL TRUSTEE	2 00	X					0	0	0
BLAINE E COLLINS TRUSTEE	2 00	X					0	0	0
THOMAS H COLLINS TRUSTEE	2 00	X					0	0	0
LAMARR COOLER TRUSTEE	2 00	X					0	0	0
ANGUS R COOPER II TRUSTEE	2 00	X					0	0	0
VIVIEN S CREA TRUSTEE	2 00	X					0	0	0
TERRY M CROSS TRUSTEE	2 00	X					0	0	0
BROSIUS D'ARCY TRUSTEE	2 00	X					0	0	0
ERIC R DAWICKI TRUSTEE	2 00	X					0	0	0
JOHN A DOUGLAS TRUSTEE	2 00	X					0	0	0
DAVID F DYER TRUSTEE	2 00	X					0	0	0
DOUGLAS B EATON TRUSTEE	2 00	X					0	0	0
CHERYL D FELDER TRUSTEE	2 00	X					0	0	0
JAMES G FERGUSON TRUSTEE	2 00	X					0	0	0
JOHN B FOLEY TRUSTEE	2 00	X					0	0	0
DIANE FRASER TRUSTEE	2 00	X					0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee			
MARSHALL E GILBERT TRUSTEE	2 00	X					0	0	0
AL A GONSOULIN TRUSTEE	2 00	X					0	0	0
JAMES S GRACEY TRUSTEE	2 00	X					0	0	0
F DAVID HOFFMAN TRUSTEE	2 00	X					0	0	0
DOUGLAS E HOLM TRUSTEE	2 00	X					0	0	0
WILLIAM JENKINS TRUSTEE	2 00	X					0	0	0
GARY JOBSON TRUSTEE	2 00	X					0	0	0
HENRY C KEENE JR TRUSTEE	2 00	X					0	0	0
NICHOLAS KERIGAN TRUSTEE	2 00	X					0	0	0
MARK K KNOY TRUSTEE	2 00	X					0	0	0
ROBERT E KRAMEK TRUSTEE	2 00	X					0	0	0
STEIN KRUSE TRUSTEE	2 00	X					0	0	0
GERHARD KURZ TRUSTEE	2 00	X					0	0	0
ROCH LAMBERT TRUSTEE	2 00	X					0	0	0
H MERRITT LANE III TRUSTEE	2 00	X					0	0	0
CHARLES E LARKIN TRUSTEE	2 00	X					0	0	0
RICHARD M LARRABEE TRUSTEE	2 00	X					0	0	0
JAMES M LOY TRUSTEE	2 00	X					0	0	0
AMELIA REA MAGUIRE ESQ TRUSTEE	2 00	X					0	0	0
JAMES M MATHIEU TRUSTEE	2 00	X					0	0	0
BRIAN B MCALLISTER TRUSTEE	2 00	X					0	0	0
KEVIN J MCSWEENEY TRUSTEE	2 00	X					0	0	0
JOHN P MIHLBAUER TRUSTEE	2 00	X					0	0	0
MICHAEL T MOORE TRUSTEE	2 00	X					0	0	0
FRED P MOOSALLY TRUSTEE	2 00	X					0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
JOSE M MORALES TRUSTEE	2 00	X					0	0	0
BO A F PETERSON TRUSTEE	2 00	X					0	0	0
CRAIG E PHILIP TRUSTEE	2 00	X					0	0	0
JEFFREY M PLATT TRUSTEE	2 00	X					0	0	0
JOHN F REINHART TRUSTEE	2 00	X					0	0	0
THOMAS K RICHEY TRUSTEE	2 00	X					0	0	0
LORETTA RIETSEMA TRUSTEE	2 00	X					0	0	0
GREGORY B ROBERTS TRUSTEE	2 00	X					0	0	0
JUDITH A ROSS TRUSTEE	2 00	X					0	0	0
CARLTON E RUSSELL TRUSTEE	2 00	X					0	0	0
STEVEN SEIGEL TRUSTEE	2 00	X					0	0	0
RICHARD T SHANNON TRUSTEE	2 00	X					0	0	0
HOWARD SLOTNICK TRUSTEE	2 00	X					0	0	0
JOHN F STATTS TRUSTEE	2 00	X					0	0	0
CARY K SWASAND TRUSTEE	2 00	X					0	0	0
EUGENE F SWEENEY TRUSTEE	2 00	X					0	0	0
JOHN H THOMMEN TRUSTEE	2 00	X					0	0	0
DONALD E WILT TRUSTEE	2 00	X					0	0	0
PAUL A YOST JR TRUSTEE	2 00	X					0	0	0
WALLY YOUNGER TRUSTEE	2 00	X					0	0	0
ANNE B BRENGLE PRESIDENT	45 00		X	X	X		179,995	0	11,982
JERRY OSTERMILLER PRES-NATIONAL COAST GUAR	40 00			X			104,327	0	5,367

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
BOATS DONATED TO THE CO	832,350	832,350		
MORALE, WELFARE AND EVE	565,089	565,089		
WATERFRONT DEVELOPMENT	236,198	236,198		
PRINTING AND POSTAGE	149,219	3,852	6,672	138,695
ACADEMIC ENRICHMENT	107,929	107,929		

2009

Open to Public
Inspection**SCHEDULE D**
(Form 990)**Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions.

Department of the Treasury
Internal Revenue Service**Name of the organization**
COAST GUARD FOUNDATION INC**Employer identification number**

04-2899862

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a Public exhibition
b Scholarly research
c Preservation for future generations

d Loan or exchange programs
e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	3,775,113	4,856,711			
b Contributions	225,290	285,489			
c Investment earnings or losses	-7,025	-1,184,850			
d Grants or scholarships					
e Other expenditures for facilities and programs	276,221	182,237			
f Administrative expenses					
g End of year balance	3,717,157	3,775,113			

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► 0 % %

b Permanent endowment ► 65 700 % %

c Term endowment ► 15 800 % %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		396,331			396,331
b Buildings		807,589	327,287		480,302
c Leasehold improvements					
d Equipment					
e Other		441,254	262,906		178,348
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)					1,054,981

Part VII Investments—Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12.)	►	

Total. (Column (b) should equal Form 990, Part X, col (B), line 1)

Part VIII Investments—Program Related. See Form 990, Part X, line 13

Total. (Column (b) should equal Form 990, Part X, col (B) line 13)

Part IX Other Assets. See Form 990, Part X, line 15

Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)

Part X Other Liabilities. See Form 990, Part X, line 25.

Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ► **11,179**

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,260,546
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,129,684
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	130,862
4	Net unrealized gains (losses) on investments	4	336,826
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	336,826
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	467,688

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	5,704,220
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	336,826
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	336,826
3	Subtract line 2e from line 1	3	5,367,394
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	24,664
b	Other (Describe in Part XIV)	4b	-1,131,512
c	Add lines 4a and 4b	4c	-1,106,848
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	4,260,546

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	5,236,532
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	1,131,512
e	Add lines 2a through 2d	2e	1,131,512
3	Subtract line 2e from line 1	3	4,105,020
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	24,664
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	24,664
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	4,129,684

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	ENDOWMENT FUNDS WERE CREATED TO SUPPORT THE COAST GUARD ACADEMY AND THE VARIOUS COAST GUARD DISTRICTS SUCH SUPPORT COMES IN MANY FORMS INCLUDING PROJECTS TO BENEFIT DISTRICT MORALE, ACADEMIC AND ATHLETIC PROGRAMS AT THE ACADEMY, AS WELL AS PROGRAMS TO SUPPORT COAST GUARD FAMILIES, INCLUDING SCHOLARSHIPS
Part XII, Line 4b - Other Adjustments		DIRECT EXPENSES OTHER THAN FUNDRAISING - SPECIAL EVENTS -1131512
Part XIII, Line 2d - Other Adjustments		DIRECT EXPENSES OTHER THAN FUNDRAISING - SPECIAL EVENTS 1131512

SCHEDULE G
(Form 990 or 990-EZ)Supplemental Information Regarding
Fundraising or Gaming Activities

OMB No. 1545-0047

2009

Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceComplete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.Name of the organization
COAST GUARD FOUNDATION INC

Employer identification number

04-2899862

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply

a <input checked="" type="checkbox"/> Mail solicitations	e <input checked="" type="checkbox"/> Solicitation of non-government grants
b <input checked="" type="checkbox"/> Internet and e-mail solicitations	f <input type="checkbox"/> Solicitation of government grants
c <input checked="" type="checkbox"/> Phone solicitations	g <input checked="" type="checkbox"/> Special fundraising events
d <input checked="" type="checkbox"/> In-person solicitations	

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? Yes No**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SUSAN O'NEILL AND ASSOCIATES	DINNER EVENT COORDINATOR		No	1,660,205	43,720	1,616,485
DENISE HAYASHI CONSULTING LLC	DINNER EVENT COORDINATOR		No	244,486	22,453	222,033
DIANA CONAN	DINNER EVENT COORDINATOR		No	189,600	17,129	172,471
Total			►	2,094,291	83,302	2,010,989

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AL,AK,AZ,AR,CA,CO,CT,DE,FL,GA,HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO,MT,NE,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY,DC

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 NEW YORK DINNER (event type)	(b) Event #2 DC DINNER (event type)	(c) Other Events 8 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts . . .	661,585	991,620	1,402,550	3,055,755
	2 Less Charitable contributions . . .	534,985	830,220	1,104,220	2,469,425
	3 Gross income (line 1 minus line 2) . . .	126,600	161,400	298,330	586,330
Direct Expenses	4 Cash prizes . . .				
	5 Non-cash prizes . . .				
	6 Rent/facility costs . . .	3,010	74,749	74,625	152,384
	7 Food and beverages . . .	103,116	98,048	315,333	516,497
	8 Entertainment . . .	6,754	8,255	6,653	21,662
	9 Other direct expenses . .	20,188	113,582	311,702	445,472
	10 Direct expense summary Add lines 4 through 9 in column (d)				1,136,015
	11 Net income summary Combine lines 3, column d, and line 10.				-549,685

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1 Gross revenue				
	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses . .				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				
	8 Net gaming income summary Combine lines 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
a Is the organization licensed to operate gaming activities in each of these states?	<input type="checkbox"/> 9a	
b If "No," Explain _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	<input type="checkbox"/> 10a	
b If "Yes," Explain _____		
11 Does the organization operate gaming activities with nonmembers?	<input type="checkbox"/> 11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> 12	

	Yes	No
13 Indicate the percentage of gaming activity operated in	13a	13b
a The organization's facility
b An outside facility
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ►		
Address ►		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a
b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c If "Yes," enter name and address		
Name ►		
Address ►		
16 Gaming manager information		
Name ►		
Gaming manager compensation ► \$ _____		
Description of services provided ►		
<input type="checkbox"/> Director/officer	<input type="checkbox"/> Employee	<input type="checkbox"/> Independent contractor
17 Mandatory distributions		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

**Schedule I
(Form 990)**

OMB No 1545-0047

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

► Attach to Form 990

2009**Open to Public
Inspection**Department of the Treasury
Internal Revenue ServiceName of the organization
COAST GUARD FOUNDATION INCEmployer identification number
04-2899862**Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ►

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ►

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STATES COAST GUARD	546010204		240,000				TO PROVIDE EDUCATIONAL GRANTS TO ENLISTED PERSONNEL

2 Enter total number of section 501(c)(3) and government organizations ► _____ 1

3 Enter total number of other organizations ► _____ 0

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
COLLEGE SCHOLARSHIPS TO CHILDREN OF ENLISTED PERSONNEL	68	234,616			
FAMILY DISASTER RELIEF ASSISTANCE - EMERGENCY TRAVEL AND ACCOMMODATIONS FOR FAMILY OF COAST GUARDSMEN WHO SUFFERED WORK RELATED TRAGEDIES IN THE LINE OF DUTY	83		62,364		
See Additional Data Table					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U.S.	Part I, Line 2	Schedule I, Part I, Line 2 SCHOLARSHIPS ARE AWARDED BY AN INDEPENDENT SCHOLARSHIP BOARD CONSISTING OF COAST GUARD PERSONNEL AND ONE FOUNDATION MEMBER. ONCE AWARDED, THE FOUNDATION MANAGES ALL SCHOLARSHIP PAYMENTS. PAYMENTS ARE MADE ONLY UPON VERIFICATION OF ENROLLMENT AND RECEIPT OF A BILL INDICATING THE AMOUNT DUE. PAYMENTS ARE MADE DIRECTLY TO THE INSTITUTION OF HIGHER EDUCATION WITH INSTRUCTIONS THAT NO PART OF THE PAYMENT IS TO BE REIMBURSED TO THE STUDENT IF FULL PAYMENT IS NOT NEEDED FOR THAT STUDENT. IT IS REFUNDED TO THE FOUNDATION. EDUCATION GRANTS ARE ADMINISTERED BY THE COAST GUARD INSTITUTE WHO ANNOUNCES THE FUNDS AVAILABILITY AND CHECKS FOR ELIGIBILITY. MONITORING OF THE GRANTS IS DONE BY WAY OF REPORTS BACK TO THE FOUNDATION INDICATING PAYEE, CHECK NUMBER AND AMOUNT. RECIPIENTS ALSO HAVE THE ABILITY TO SEND ACKNOWLEDGEMENT EMAILS AS WELL.

Schedule J
(Form 990)**Compensation Information**

OMB No 1545-0047

2009**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
► Attach to Form 990. ► See separate instructions.

Name of the organization
COAST GUARD FOUNDATION INC**Employer identification number**

04-2899862

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input checked="" type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	Yes	
2	Yes	
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information

Identifier	Return Reference	Explanation
	Part I, Line 1a	FIRST CLASS TRAVEL FOR EVENT STAFF TRAVELING TO THE HAWAII FUNDRAISING EVENT HOUSING ALLOWANCE FOR THE PRESIDENT OF THE NATIONAL COAST GUARD MUSEUM ASSOCIATION WHOSE PRINCIPAL RESIDENCE WAS IN OREGON

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service►Complete if the organization answered "Yes" on Form
990, Part IV, lines 29 or 30.
► Attach to Form 990.Name of the organization
COAST GUARD FOUNDATION INC

Employer identification number

04-2899862

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes	X	1	825,000	
8 Intellectual property				
9 Securities—Publicly traded	X	6	66,747	
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
SAILING				
25 Other ► (EQUIPMENT)	X	8	28,900	
AUCTION				
26 Other ► (ITEMS)	X	1	300	
27 Other ► (ADVERTISING)	X	1	7,211	
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement		29		

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a	No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	Yes
b If "Yes," describe in Part II		

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,
describe in Part II

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Third Party Use	Part I, Line 32b	THE FOUNDATION USES AN UNRELATED THIRD PARTY TO SOLICIT AND RECEIVE DONATIONS OF BOATS AND OTHER WATERCRAFT FOR USE BY THE ACADEMY OR COAST GUARD DISTRICTS

SCHEDULE O
(Form 990)**Supplemental Information to Form 990****2009****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
► Attach to Form 990.**

Name of the organization
COAST GUARD FOUNDATION INC**Employer identification number**

04-2899862

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		PRIOR TO FILING A COPY OF THE 990 IS SENT TO THE FINANCE COMMITTEE FOR REVIEW AND THEN PRESENTED TO THE GOVERNING BOARD FOR APPROVAL
Form 990, Part VI, Section B, line 12c		ALL POTENTIAL CONFLICTS OF INTEREST ARE REVIEWED BY THE FOUNDATION'S PRESIDENT AS WELL AS A MEMBER OF THE BOARD WHO SERVES AS LEGAL COUNSEL
Form 990, Part VI, Section B, line 15		THE COMPENSATION OF TOP MANAGEMENT OFFICIALS IS DETERMINED IN CONJUNCTION WITH THE RELATED EMPLOYEE SEARCH FIRM HIRED TO FILL THE POSITION. SALARY RECOMMENDATIONS ARE COMPARED TO ON-LINE SALARY SURVEY RANGES AND REVIEWED BY A HUMAN RESOURCES CONSULTANT
Form 990, Part VI, Section C, line 19		Financial statements are included in the annual report. Governing documents and conflict of interest policy are available upon request
Schedule G, Part I, Line 2b, Column (v)	Explanation of Fundraising Payments	PAYMENTS TO DINNER EVENT COORDINATORS INCLUDED FIXED FEES FOR EVENT SERVICES AS WELL AS REIMBURSEMENT OF EVENT RELATED EXPENSES

**SCHEDULE R
(Form 990)****Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990. ► See separate instructions.

2009**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service**Name of the organization**
COAST GUARD FOUNDATION INC**Employer identification number**
04-2899862**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
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Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
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UNITED STATES COAST GUARD ACADEMY

EDUCATION OF COAST GUARD PERSONNEL CT US GOVT

54-6010204

UNITED STATES COAST GUARD

PROTECTION OF THE US COAST AND WATERWAYS DC US GOVT

54-6010204

NATIONAL COAST GUARD MUSEUM ASSOCIATION

DEVELOPMENT OF A MUSEUM TO HONOR THE HISTORY OF THE COAST GUARD CT 501(C)(3) 170(B)(1)(A)(VI)

75 CRYSTAL AVENUE

NEW LONDON, CT 06320
06-1621858

COAST GUARD AUXILIARY ASSOCIATION INC

PROMOTING BOATING SAFETY, SECURITY AND STEWARDSHIP MO 501(C)(3) 509(A)(2)

9449 WATSON INDUSTRIAL PARK

ST LOUIS, MO 63126
52-6056326

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?
							Yes No		Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III or IV**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)
- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)
- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees
- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses
- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

	Yes	No
1a		No
1b		No
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k	Yes	
1l		No
1m	Yes	
1n		No
1o		No
1p	Yes	
1q		No
1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	COAST GUARD AUXILIARY ASSOCIATION INC	K	60,653
(2)	COAST GUARD AUXILIARY ASSOCIATION INC	P	25,763
(3)	NATIONAL COAST GUARD MUSEUM ASSOCIATION	K	191,365
(4)	NATIONAL COAST GUARD MUSEUM ASSOCIATION	P	207,605
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?	(e) Share of end-of-year assets	(f) Disproportionate allocations?	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?
Yes	No	Yes	No	Yes	No	Yes	No

Form 4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2009

Department of the Treasury
Internal Revenue Service

► See separate instructions. ► Attach to your tax return.

Attachment
Sequence No 67

Name(s) shown on return

COAST GUARD FOUNDATION INC

Business or activity to which this form relates

Form 990 Page 10

Identifying number

04-2899862

Part I Election To Expense Certain Property Under Section 179*Note: If you have any listed property, complete Part V before you complete Part I.*

1 Maximum amount See the instructions for a higher limit for certain businesses	1	250,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
6				
7 Listed property Enter the amount from line 29	7			
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8			
9 Tentative deduction Enter the smaller of line 5 or line 8	9			
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10			
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11			
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12			
13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 11 ►	13			

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)		
14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	52,698

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ►		

Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs		S/L
c 40-year			40 yrs	MM	S/L

Non-Res Prop Type 1 count 0 Non-Res Prop Type 2 count 0 Non-Res Prop Totals count 0

Part IV Summary (see instructions)

21 Listed proper

22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	52,698
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation/deduction	(i) Elected section 179 cost
25	Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)				25			

26 Property used more than 50% in a qualified business use

	%							
	%							
	%							

27 Property used 50% or less in a qualified business use

	%			S/L -				
	%			S/L -				
	%			S/L -				

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1

28

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1

29

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
31						
32						
33						
34	Yes	No	Yes	No	Yes	No
35						
36						

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	<input type="checkbox"/> Yes <input type="checkbox"/> No
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners	
39	Do you treat all use of vehicles by employees as personal use?	
40	Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?	
41	Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)	

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) A amortization for this year
42	A amortization of costs that begins during your 2009 tax year (see instructions)				

43	A amortization of costs that began before your 2009 tax year	43
44	Total. Add amounts in column (f) See the instructions for where to report	44