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Form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

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

2009

OMB No 1545-0052

2 Check X If the foundation is not required to attach Sch B Interest on savings and temporary 3 Interest on savings and temporary 4 Dividends and interest from securities 5 A Gross rents 5 A Gross rents 6 Net rental income or (loss) 6 Net rental income or (loss) 6 Net sent or (loss) from sale of assets not on line 10 6 Gross sales price for all 4,000. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a and allowances 6 Less' Cost of goods sold 6 Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 22,866. 22,866. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits
Use the IRS label. Otherwise, Pint of type. See Specific Instructions IT INGIAM, MA 02043 H. Check type of organization: Section 501(c)(3) exempt private foundation I Far market value of all assets at end of year of the foundation is not occurred to street address. I far market value of all assets at end of year of the foundation is not occurred. (Part I, col. (c), line 16) Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), ict, and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (b). Inc. and (g) may not necessity equal the amounts in columns (g). Inc. and (g) may not necessity equal the amounts in columns (g). Inc. and (g) may not necessity equal the amounts in columns (g). Inc. and (g) may not nece
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Otherwise, Pull DING 19 FOUNDATION See See Specific Instructions See Specific Instructions HINGHAM, MA 02043 City or town, state, and ZIP code HINGHAM, MA 02043 City or town, state, and ZIP code HINGHAM, MA 02043 City or town, state, and ZIP code City or
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of type: Sae Specific City or town, state, and ZIP code Instructions HINGHAM, MA 02043 H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at end of year Form Part II, col. (c), line 16) S 732,181. (Part I, column (d) must be on cash basis) Fart II Analysis of Revenue and Expenses The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (a) in the columns (a) in the columns (b) in the foundation is not temporary Check Service (cash basis only) 1 Centributions, gifts, grants, etc., received Check Service (cash basis only) Check Service (cash basis on
See Specific Instructions H.N.G.HAM, MA 02043 H. Check type of organization: X. Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end of year (from Part II, col. (c), line 16) S. 732,181. (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (the total of amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) may not necessary equal the amounts in columns (b), (c), and (d) necessary equal the control of (d)
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14 Other employee salaries and wages 15 Pension plans, employee benefits
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% 16a Legal fees
5 b Acquinting (€)
b Acquinting research 3 2,250. 2,250. 0 C Other professional fees
\$ 17 Interest AUG 1 7 2010 STMT 4 35. 35. 0
E 18 Taxes AUG 1 7 2010 STATE 4 35. 35. 0
19 Depreciation and depletion $\underline{\alpha}$
E 20 Occupancy OGDEN, UT
21 Travel, conferences; and meetings
22 Printing and publications
b Acquining rest VEDTM1 3 2,250. 2,250. 0 c Other professional fees 17 Interest 18 Taxes AUG 1 7 2010 STM7 4 35. 35. 35. 0 19 Depreciation and depletion 20 0 0 0 0 20 Occupancy OCDEN, UT 21 Travel, conferences, and meetings 22 Printing and publications 23 0 0 0 24 Total operating and administrative expenses. Add lines 13 through 23 19,330. 19,330. 0 0 0 0 0 25 Occupancy OCDEN, UT 21 17,045. 17,045. 0 0 0 0 0 0 0 0 0
表 24 Total operating and administrative
expenses. Add lines 13 through 23 19,330. 19,330. 0
25 Contributions, gifts, grants paid 16,579.
26 Total expenses and disbursements.
Add lines 24 and 25 35,909. 19,330. 16,579
27 Subtract line 26 from line 12:
a Excess of revenue over expenses and disbursements -13,043.
b Net investment income (if negative, enter -0-)
c Adjusted net income (if negative enter -0-) 923501 A LHA For Privacy Act and Panerwork Reduction Act Notice see the instructions Form 990-PF (200)

Fo	rm 99	00-PF (2009) BUILDING 19 FOUNDATION		04-3064072		
[E	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of		
<u></u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	2,548.	7,963.	7,963.	
	2	Savings and temporary cash investments	182,430.	128,487.	128,487.	
	3	Accounts receivable				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ►	, , , , , , , , , , , , , , , , , , , 			
		Less; allowance for doubtful accounts ▶				
	5	Grants receivable				
		Receivables due from officers, directors, trustees, and other				
	-	diamental fined paragraph				
	7	Other notes and loans receivable				
	'	Less; allowance for doubtful accounts				
(A	۰	Inventories for sale or use		····		
Assets		Prepaid expenses and deferred charges				
Ass		Investments - U.S. and state government obligations				
			416 420	FOE 721	FOE 534	
		Investments - corporate stock STMT 6	416,429.	595,731.	<u>595,731.</u>	
		Investments - corporate bonds				
	111	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
		Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment: basis ► 1,078. Less accumulated depreciation				
		Less accumulated depreciation				
	15	Other assets (describe ►)				
	16	Total assets (to be completed by all filers)	601,407.	732,181.	732,181.	
	17	Accounts payable and accrued expenses				
	18	Grants payable [
S	19	Deferred revenue				
ij	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable				
	22	Other liabilities (describe >			·	
		` <u> </u>				
	23	Total liabilities (add lines 17 through 22)	0.	0.	1	
_	1	Foundations that follow SFAS 117, check here			1	
		and complete lines 24 through 26 and lines 30 and 31.			1	
es	24	Unrestricted			1	
Š	25	Temporarily restricted			ı	
ala		· · · · ·				
E	26	Permanently restricted				
Net Assets or Fund Balances	-	Foundations that do not follow SFAS 117, check here				
2		and complete lines 27 through 31.		•		
ţ	27	Capital stock, trust principal, or current funds	0.	0.		
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
ţ	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.		
ž	30	Total net assets or fund balances	601,407.	732,181.		
	31	Total liabilities and net assets/fund balances	601,407.	732,181.		
P	art	Analysis of Changes in Net Assets or Fund B	alances			
\equiv						
1		net assets or fund balances at beginning of year - Part II, column (a), line	30		_	
	•	t agree with end-of-year figure reported on prior year's return)		1	601,407.	
		amount from Part I, line 27a		2	-13,043.	
3	Othe	r increases not included in line 2 (itemize) <u>UNREALIZED</u> (GAIN ON SECURI	TIES 3	143,817.	
		lines 1, 2, and 3		. 4	732,181.	
5	Decr	eases not included in line 2 (itemize)		5	0.	
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	732,181.	
					Form 990-PF (2009)	

(a) List and desc 2-story brick wa	and Losses for Tax on I ribe the kind(s) of property sold (e. arehouse; or common stock, 200 s	.g., real estate,	. mcome	(b) How acquired P - Purchase D - Donation	(c) Date acquire (mo., day, yr.)	d (d) Date sold (mo., day, yr.)
1a A T & T CORP B	ONDS			P	06/23/0	0 03/16/09
b						
<u>c</u>						
<u>d</u>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis xpense of sale		(h) Gain or ((e) plus (f) mii	
a 4,000.			4,00	0.		0.
b						
С						
<u>d</u>						
<u>e</u>		the feet debes	40/04/00			
Complete only for assets showing	ng gain in column (h) and owned b	·			(I) Gains (Col. (h) ol. (k), but not less	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any		Losses (from o	col. (h))
a						0.
b						
<u>c</u>		_				
<u>d</u>						
						•=
2 Capital gain net income or (net ca	apital loss) $ \begin{cases} \text{ If gain, also ent} \\ \text{ If (loss), enter} \end{cases} $	ter in Part I, line -0- in Part I, line	7 7	} 2		0.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,	column (c).	and (6):		3		
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Section 4940(e) fo	r Beduced	Tay on Not	Investment Ir		/A
(For optional use by domestic private					1001110	<u> </u>
If section 4940(d)(2) applies, leave t Was the foundation liable for the sec If "Yes," the foundation does not qua Tenter the appropriate amount in	tion 4942 tax on the distributable a	complete this pa	rt.			Yes X No
(a) Base period years	(b)	listributions	Not value of me	(c)	. D	(d) stribution ratio
Calendar year (or tax year beginne			Net value of no	ncharitable-use asse	ts (col. (b) divided by col. (c))
2008		25,204.		772,00		.032648
2007 2006		<u>58,699.</u> 67,583.		903,16 920,69		.064993
2005		66,651.		925,55		.072012
2004		81,321.	•	923,98		.088011
2 Total of line 1, column (d)				 	2	.331068
3 Average distribution ratio for the the foundation has been in existe		al on line 2 by 5,	or by the number	of years	3	.066214
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5						1,377,990.
5 Multiply line 4 by line 3					5	91,242.
6 Enter 1% of net investment income (1% of Part I, line 27b)					6	35.
7 Add lines 5 and 6					7	91,277.
8 Enter qualifying distributions from	m Part XII, line 4				8	16,579.
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check the box in Part VI, lii	ne 1b, and comp	lete that part usin	g a 1% tax rate.		
923521 02-02-10						Form 990-PF (2009)

Form 990-PF (2009) BUILDING 19 FOUNDATION

04-3064072

orn		<u> 306407</u>		Page 4
_	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see inst	tructi	ons)
1a	a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1% 📗 📘	<u> </u>		71.
	of Part I, line 27b			
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	1		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2			<u>71.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>		0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			71.
6	Credits/Payments:	}		
а	a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 481.			
b	b Exempt foreign organizations - tax withheld at source 6b			
C	c Tax paid with application for extension of time to file (Form 8868)			
d	d Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			<u>481.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached8	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			410.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 410 . Refunded ▶ 11	<u> </u>		0.
_	art VII-A Statements Regarding Activities		10.0	
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	Ye	-
	any political campaign?	1_1	a	<u> </u>
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1	b	<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	c Did the foundation file Form 1120-POL for this year?	1	C	<u> </u>
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .			
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ▶ \$ 0 .			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<u> </u>	2	<u> </u>
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			.,
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	7/3	a	X
		N/A 4	D	+-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	 	5	<u> </u>
•	If "Yes," attach the statement required by General Instruction T.			
D	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or			
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 			
			5	\mathbf{x}_{-}
,	remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year?		, X	
7	If "Yes," complete Part II, col (c), and Part XV.	<u> </u>	<u> </u>	
٥.	a Enter the states to which the foundation reports or with which it is registered (see instructions)			
08	MA			
l.	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	—		
	of each state as required by General Instruction G? If "No," attach explanation	8	ь х	
a	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	<u> </u>		
9	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	x_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	1		X
<u> </u>	A Section is a section in the interest and a section in the intere		_	F (2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form **990-PF** (2009)

orm 990-PF (2009) BUILDING 19 FOUNDATION	4700 Mary Da 6		04-30640	72 Page 6		
Part VII-B Statements Regarding Activities for Which I	orm 4/20 May Be F	Required (contin	ued)			
-5a During the year did the foundation pay or incur any amount to:						
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No			
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire					
any voter registration drive?			es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or				
the prevention of cruelty to children or animals?		Ye	s X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations				
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b		
Organizations relying on a current notice regarding disaster assistance check here						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	om the tax because it maintai	ned				
expenditure responsibility for the grant?		/A 🔲 Ye	s No			
If "Yes," attach the statement required by Regulations section 53 494		•				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •					
a personal benefit contract?		Ye	es X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			Sb X		
If "Yes" to 6b, file Form 8870.			-			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	belter transaction?		es X No			
b If yes, did the foundation receive any proceeds or have any net income attribute		,		7b		
Information About Officers Directors Trust		nagers, Highly		, , , ,		
Part VIII Paid Employees, and Contractors			•			
1 List all officers, directors, trustees, foundation managers and their	compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account, other		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances		
ELAINE ELOVITZ	OFFICER/DIREC		compensation	4		
79 FLORENCE STREET						
CHESTNUT HILL, MA 02467	0.00	0.	0.	0.		
GERALD ELOVITZ	OFFICER/DIREC			<u></u>		
79 FLORENCE STREET	OFFICER, DIREC					
CHESTNUT HILL, MA 02467	0.00	0.	0.	0.		
DEBRA ELOVITZ	OFFICER/DIREC					
465 BEACON STREET	OFFICER/DIREC	TOR				
BOSTON, MA 02115	0.00	0.	0.	0.		
DOSTON, MA UZIIS	0.00	0.	<u> </u>	<u></u>		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "	<u> </u>			
2 Componential of the manage para employees follow that those me	(b) Title, and average		(d) Contributions to	(e) Expense		
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances		
MONTE	devoted to position		compensation	allowalices		
NONE						
		-				
	 					
	1					
	1					
	L	L	<u> </u>			
Total number of other employees paid over \$50,000			<u> </u>	0 000 DE (0000)		
			Form \$	990-PF (2009)		

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0.

Total, Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	732,181.
b	Average of monthly cash balances	1b	732,181. 666,794.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,398,975.
е	Reduction claimed for blockage or other factors reported on lines 1a and		-
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,398,975.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	20,985.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,377,990.
6	Minimum investment return. Enter 5% of line 5	6	68,900.
P	pistributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	68,900.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	71.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	68,829.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	68,829.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	68,829.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	16,579.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	16,579.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,579 <u>.</u>
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies fo	or the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		, oal o prior to good		2000
line 7			<u> </u>	68,829.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
5		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 46, 053.				
b From 2005 21, 143.				
c From 2006 23,118. d From 2007 15,100.				
01101112000	105,414.			
f Total of lines 3a through e 4 Qualifying distributions for 2009 from	105,414.			
Part XII, line 4: ► \$ 16,579.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		-		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	V.			16,579.
e Remaining amount distributed out of corpus	0.			10,5,5.
5 Excess distributions carryover applied to 2009	52,250.			52,250.
(If an amount appears in column (d), the same amount must be shown in column (a))	327233			32/2300
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	53,164.			
b Prior years' undistributed income. Subtract	33,101.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	İ			
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line		-		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	53,164.		<u> </u>	
10 Analysis of line 9:				
a Excess from 2005 14,946.				
b Excess from 2006 23,118.				
c Excess from 2007 15,100.				
d Excess from 2008				
e Excess from 2009				Form 000 PE (2000)

Fart XV Private Operating Foundations (see maturctions and Part VIA., outside of a little feature or servered value) or determation letter that if is a private greating foundation, and the ruling is dictable to 2009, enter the date of the ruling foundation, and the ruling is dictable to 2009, enter the date of the ruling foundation, and the ruling is dictable to 2009, enter the date of the ruling foundation as greated part of the minimum measurement return from Part X for each year itself. 2 a Enter the Resear of the adjusted minimum measurement return from Part X for each year itself. 3 85% of line 2 a 5 Outleyforg discributions from Part XII, tend for each year itself. 4 Private Part VIA. (a) 2009 (b) 2009 (c) 2009 (d) 2009 (e) 200		G 19 FOUNDA		A ====================================		064072 Page 10
foundation, and the ruling a steative for 2009, earlier the date of the ruling Direct box to incease whether the foundation is a private operating foundation described in section 1				A, question 9)	N/A	
2						
2 a Enter the lesser of the adjusted net moment from part x for each year listed on the moment from part x for each year listed 3 6% of the 2 c Qualifying destributions from Part XI, line 4 for each year listed 4 Amounts included in line 2 c not used directly for active conduct of exempt activities 0 floating distributions made directly for active conduct of exempt activities 0 floating distributions made directly for active conduct of exempt activities 0 floating distributions made directly for active conduct of exempt activities 0 floating active conduct of exempt	·			▶ └		0.404.453
mozeme from Part I or the maintum meastment tearn from Part X for each year leated by the fine 2a of the 2	 b Check box to indicate whether the found 		g foundation described in		4942(j)(3) or 4	942(j)(5)
mestiment return from Part X for each year listed 8 5% of line 2 Countying distributions from Part XII, line 4 for each year listed 4 Amounts included in line 2c not used directly for active conduct of exempt activities Countying of active conduct of exempt activities Countying of active conduct of exempt activities Countying of active conduct of exempt activities. Subtract line 2 of form line 2c Complete 3a, b, or c for the alternative list-relied upon: 1 *Assets' alternative test-relied upon: 2 *Assets' alternative test-relied; (1) *Value of assets qualifying under season 497(()(5)(5)) 3 *Continuous investment estation and active test-relied; (2) *Value of assets qualifying under season 497(()(5)(6)(6)) 3 *Continuous investment estation and active test-relied; (3) *Lord standard estation 497(()(5)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)	2 a Enter the lesser of the adjusted net					ļ ,, .
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b "Endowment" alternative test - enter 23 of minimum investment return shown in Part X, line 6 for each year listed c "Support alternative test - enter: (1) Total support other than gross investment income (interest, dividends, sents, payments on 512(a)(5)), or royaltes) (2) Support from general public augmantation as provided in section 4942(i)(3)(8)(iii) (3) Largest amount of support from an exempt organization an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) 1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than 55,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation have own 10% or greater interest. NONE Information Regarding Contribution, Grant, Girt, Loan, Scholarship, etc., Programs: Check here ▶ ☐ If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes girts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: JUDITTH BLOVITZ, 781 - 749 - 6900 319 LINCOLIN STREET, HINCHAM, MA 02043 b The form which applications should be submitted and information and materials they should include; LETTERS DETAILING THE ORGANIZATION AND CHARITABLE PURPOSE. c Any submission deadlines: ROLLING SUBMISSIONS WITH NO DEADLINES d Any restrictions or limitations on awards, such as by geographical areas, chantable fields, kinds of ins						
23 of minimum investment return shown in Part X, line 6 for each year islated c "Support alternative tast- enter: (1) Total support other than gross investment income (interest, dividends, rents, payments) on securities loans (section 512(a)(5), or organies) (2) Support from general public and 5 or more exempt organizations as provided in section 442(f)(5)(6)(6) in (4)(6)(6)(6) in (4)(6)(6)(6)(7)(6)(7)(6)(7)(7)(7)(7)(7)(7)(7)(7)(7)(7)(7)(7)(7)	· · · · · · · · · · · · · · · · · · ·		<u> </u>	<u> </u>		
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d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: NONE	•	WITH NO DEA	DLINES			
NONE				kinds of institutions or	other factors:	
		is, such as by yeographic	ui ui 603, ciiai ilavie ilelu3,	ninus of institutions, Of	outer lactors.	
923601 02-02-10 Form 990-PF (2009)	HOME					
	923601 02-02-10					Form 990-PF (2009)

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount		
Name and address (home or business) a Paid duning the year SEE ATTACHED SCHEDULE OF PAYMENTS DURING 2009	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	16,579.		
Total		Τ	<u>▶ 3a</u>	16,579.		
NONE						
Total			<u>▶ 3b</u>	0.		
923811 02-02-10			Fo	orm 990-PF (2009)		

Part XVI-A Analysis of Income-Producing Activit

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
•				· · · · · · · · · · · · · · · · · · ·	
					- <u> </u>
·					
		 			
d	<u> </u>	_	-		
e					·
g Fees and contracts from government agencies			-		
2 Membership dues and assessments	<u> </u>		_	· · · · · · · · · · · · · · · · · · ·	
3 Interest on savings and temporary cash	·				
investments					5 431
4 Dividends and interest from securities		<u> </u>			5,431. 17,435.
5 Net rental income or (loss) from real estate:					17, 4334
a Debt-financed property					
b Not debt-financed property	-			<u> </u>	
6 Net rental income or (loss) from personal					
property	502000				
7 Other investment income	523000				
8 Gain or (loss) from sales of assets other					
than inventory			1		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c			ļ <u>.</u>		
đ					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.	L	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	22,866.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incor			contril	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than t	by providing to	inus for such purposes).			_
					
					
	 				
					
					
		 			
					
					<u> </u>
					
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923621 02-02-10

Form **990-PF** (2009)

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of Plury, I declays that the Sexamined this return, including executionary in space of an and complete Deviation of pipearly stiffer than tax indicary is based on all information of which prepare has any knowledge and belief, it is true, correct, and complete Deviation of pipearly stiffer than tax indicary is based on all information of which prepare has any knowledge. Bignature of Officer of Trustee Preparer's Signature PETER J. MIELE, CPA O7/12/10 employed. ANIELE & ASSOC IN Preparer's identifying number self- self- self- self- self- self- and complete Deviation of pipearly stiff and tax in the best of my knowledge and belief, it is true, correct, and complete of pipearly stiff in the same (cryouts) in the self- and complete Deviation of pipearly stiff in the same (cryouts) in the self- self									
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Signature or officer of trustee Signature or officer of trustee Signature Preparer's Identifying number Self- Signature PETER (J. MIELE, CPA 07/12/10 employed X Firm's name (or yours MIELE & ASSOC 1 tself-employed). 747 MAIN STREET # 224		Under p	enalties of perjury, I declare that I h	examined this return, including a	seompanying schedules and state	ments, and to the best of my know	wledge and belief, it is true, correct,		
Rignature of officer of trustee Preparer's Preparer'		and con	plete Declaration of preparer (other	r than taxpayer of fiduciary) is based	on all information of which prepare	er has any knowledge			
Rignature of officer of trustee Preparer's Preparer'			X/AVW/X	Track	18/13/	// TRUSTEE			
Hrm's name (or yours MIELE & ASSOC tself-employed). 747 MAIN STREET # 224	e	_81	gnature of officer or trustee	2					
Hrm's name (or yours MIELE & ASSOC tself-employed). 747 MAIN STREET # 224	¥			Att M		Date Check if	Preparer's identifying number		
Hrm's name (or yours MIELE & ASSOC tself-employed). 747 MAIN STREET # 224	ig	ır's ıly		J. MIEHE. CPA	7	07/12/10 self-	▶ [文]		
If self-employed). address, and ZIP code CONCORD . MA 01742 Phone no. 978-369-7373	()	aid are Or			,L`				
address, and ZIP code CONCORD. MA 01742 Phone no. 978-369-7373		P rep Jse			224	2 7			
		٦			M # 3	Phone	eno 978-369-7373		
Form 990-PF (2009)			CONC	OND, HA UITE		Filolic			

923622 02-02-10

FORM 990-PF INTEREST ON SAVI	INGS A	ND TEM	PORARY C	ASH II	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
INTEREST						5,4:	31.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A			5,4:	31.
FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A))
DIVIDENDS	•		17,435.		0.	17,43	<u> </u>
TOTAL TO FM 990-PF, PART I, I	LN 4		17,435.		0.	17,43	35. ——
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS		EST-			
ACCOUNTING FEES		2,250.	2	,250.			0.
TO FORM 990-PF, PG 1, LN 16B		2,250.	2	,250.			0.
FORM 990-PF		TAX	ES			STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS		EST-			
TAXES & FILING FEES		35.		35.			0.
TO FORM 990-PF, PG 1, LN 18	<u>-</u> .	35.		35.			0.

BUILDING 19 FOUNDATION				04-3064072
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSES LEASED EMPLOYEE INSURANCE	38. 16,691. 316.	16,691.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	17,045.	17,045.		0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION		ВОС	OK VALUE	FAIR MARKET VALUE

426,719.

169,012.

595,731.

0.

0.

0.

SECURITIES

MUTUAL FUNDS

TOTAL TO FORM 990-PF, PART II, LINE 10B

15

Vela	Account Non	Description	MALLIO	Carañorà	UII	Amount
7/20/2009	Building #19 . 2114	The Salvatio	Bridging th.	Charity-Have .	R	-100 00
Charity-Hingham						-800.00
3/17/2009	Building #19 . 2047	Hull Lifesavi	Donation fo	Charity-Hing .	R	-100 00
6/19/2009	Building #19 . 2096	Muscular Dy	Prisoner Ji	Charity-Hing	R	-100 00
7/3/2009	Building #19 2112	Town Of Hin	donation to	Charity-Hing	R	-500 00
10/23/2009	Building #19 2129	Congregatio	ad book	Charity-Hing	R	-100 00
Charlty-Natick						-125.00
3/26/2009	Building #19 . 2051	MetroWest	donation H	Charity-Natick	R	-100 00
6/19/2009	Building #19 . 2097	Albanian Ort.	90th Annive	Charity-Natick	R	-25 00
Charity-New Bedford						-300.00
1/26/2009	Building #19 . 2038	New Bedford .	donation A .	Charity-New	R	-300 00
Charity-NH						-350.00
3/26/2009	Building #19 2052	NNHDS Fast	donation	Chanty-NH	R	-50 00
5/2/2009	Building #19 2076	Animal Allies	donation	Charity-NH	R	-50 00
7/20/2009	Building #192113	Kenneth Sta	Ad Book sp	Charity-NH	R	-250 00
Charity-Non Cash			•	·		-2,187.60
11/19/2009	Building #19 2143	Atlas Paper	#2635815	Charity-Non	R	-2,187 60
Charity-North Shore						-75.00
3/26/2009	Building #19 2049	Sisterhood O	ad book	Chanty-Nort .	R	-25 00
4/15/2009	Building #19 . 2072	St Joseph's .		Charity-Nort .	R	-50 00
Charity-Norwood						-250.00
3/3/2009	Building #192043	HMEA Indep		Charity-Norw	R	-150 00
3/3/2009	Building #19 2045	Friends Of S .		Charity-Norw	R	-100 00
Charity-Rhode Island	•	*	J.,,	Charley Horn	• • •	-600.00
Pawtucket	•					-300.00
3/26/2009	Building #192054	City Of Pawt		Charity-Rho	R	-100 00
5/8/2009	Building #19 .2089	The Arc Of B	Tee at Golf	Chanty-Rho	R	-100 00
7/3/2009	Building #192111	PARI Indepe		Charity-Rho	Ŕ	-100 00
Other Charity-Rho	•	r Alvi liloepe	GOTTAGOTT	Chanty-Mio		-300.00
3/26/2009	Building #19 2053	Friends Of T	donation lib	Chanty-Rho .	R	-100 00
4/14/2009	Building #19 2071	Boys And Gi .		•	R	-100 00
8/13/2009	Building #192115	Community		Chanty-Rho	R	-100 00
Charity-South Shore	•	Continuinty	donation	Chanty-Kilo	- 1	-1,071.00
2/24/2009	Building #19 .2042	Congregatio	ad-program.	Chanty-Sout.	R	-85 00
3/3/2009	Building #19 2044			•	R	
3/3/2009	Building #19 . 2044	Striar JCC The Coalitio	Women's s Corporate	Charity-Sout Charity-Sout	R	-100 00 -100 00
5/8/2009	Building #19 .2088		<u>-</u>	<u>'</u>		
6/29/2009	-	The America	Boys and G	Charity-Sout		-150 00
6/29/2009	•	Scituate Co	summer ca	Charity-Sout	R	-100 00
	Building #19 . 2099	South Shore	SSAC Festi		R	-100 00
7/3/2009	Building #19 2109	Old Colony	-	Charity-Sout.		-300 00
7/3/2009	Building #19 , 2110	Melanoma E		Charity-Sout.		-100 00
10/23/2009	Building #192130	Temple Beth.	calendar do	Charity-Sout	R	-36 00
Charity-Worcester				-	_	-1,050.00
5/2/2009	Building #19 2075	•		. Chanty-Wor	R	-1,000 00
6/29/2009	Building #19 2100	Worcester in	The Beggar	. Charity-Wor	R	-50 00
Ambassador Progra						-865.00
1/4/2009	Building #19 . 2036	Void		Ambassador .	R	0 00
1/4/2009	Building #19 2040	Weymouth U	November-	Ambassador	R	-573 00
1/26/2009	Building #19 2039	Weymouth U.	December-	Ambassador .		-252 00
4/6/2009	Building #19 . 2065	Void		Ambassador .		0 00
10/23/2009	Building #19 , 2132	Alzheimer's	donation A	Ambassador		-20 00
10/23/2009	Building #19 2133	A				
10/23/2009	Building #19 2133	American DI .	donation: A	. Ambassador.	R	-20 00

Charity				-9,6
Ambassador				-4,060.00
4/4/2009	Building #192056	Emmanuel C Nov'08 (36 Charity: Amb	R	-520.00
4/4/2009	Building #19 2057	Project Bread Nov 2008 (Charity:Amb		-120.00
4/4/2009	Building #192058	Perkins Sch Nov 2008 (Charity.Amb		-20.00
4/4/2009	Building #192059	Simon Firem Nov 2008 (Charity:Amb		-60.00
4/4/2009	Building #192060	Macular Deg Nov 2008 (Charity:Amb		-20.00
4/4/2009	Building #192061	Friends Of N Nov 2008 (Charity:Amb		-20.00
4/4/2009	Building #192062	Hebrew Seni Nov 2008 (Charity:Amb		-40.00
4/4/2009	Building #19 2063	American Lu Jan 2009 (6Charity:Amb		-60.00
4/4/2009	Building #19 2064	St. Mary's G Jan 2009 (1Charity:Amb		-160.00



		1/1/	2009 through 12/31/2009	•		
harity	Date	Account Num	Description Memo	o Category	Clr	Amount
	4/4/2009	Building #19 2066	Norwell Visiti . Jan 2009			-20.00
	4/4/2009	Building #19 2067	Congregatio Jan 2009	-		-50.00
	4/6/2009	Building #19 . 2068	Braille BooksFebruary	•	R	-20 0
	4/6/2009	Building #192069	Braintree Fo Feb 2009			-160 0
	4/6/2009	Building #192070	Church PerioFeb 2009	•		-40.0
	5/3/2009	Building #192077	Diabetes We. Ambassa	•		-20 0
	5/3/2009	Building #192078	Emmanuel CMarch '09			-120.0
	5/3/2009	Building #192079	2009 Catholi Mar '09 (•		-60.0
	5/3/2009	Building #192080	American Fri Mar '09 (•		-20.0
	5/3/2009	Building #192081	Church PerioMAR 200			-80.0
	5/3/2009	Building #19 . 2082	Macular Deg., Mar '09 (-20.0 -20.0
	5/3/2009	Building #19 2083	Project Bread Mar2009	· · · · · · · · · · · · · · · · · · ·		-20.0
	5/3/2009	Building #192084	National Fed Mar '09 (<u> </u>		-20.0
	6/8/2009	Building #19 2091	2009 Catholi Apr '09 (2			-20 0
	6/8/2009	Building #19 2092	Friends Of T April '09			-160 C
	6/8/2009	Building #192093	Southwest In April '09			-20.0
		-		•		
	6/8/2009	Building #192094	Emmanuel C., April '09	•		-160.0
	6/8/2009	Building #19 2095	Paralyzed V April '09			-20 (
	7/1/2009	Building #192101	2009 Catholi May '09 (-80.0
	7/1/2009	Building #192102	Congregatio. May 200			-20.0
	7/1/2009	Building #19 2103	Disabled Am May 200	<u> </u>		-20.0
	7/1/2009	Building #19 2104	Emmanuel C. May '09 (•		-360.0
	7/1/2009	Building #192105	Hebrew Seni May 200	•		-20.0
	7/1/2009	Building #192106	Salvation Ar May 200			-20 (
	7/1/2009	Building #192107	Simon Firem May 200	•		-20 (
	8/27/2009	Building #192117	2009 Catholi June (10	-		-120.0
	8/27/2009	Building #19 .2118	Emmanuel C June (44			-710 (
	8/27/2009	Building #192119	National Vet July '09 (-		-20 (
	8/27/2009	Building #192120	Braille Books June 200			-20
	8/27/2009	Building #192121	Diabetes We . June '09			-20
	8/27/2009	Building #19 . 2122	Simon Firem June 200	•		-20 (
	8/27/2009	Building #192123	2009 Catholi 4/27/09:	-		-20 (
	8/27/2009	Building #192124	Diabetes WeApril '09	<u> </u>		-20.0
	8/27/2009	Building #192125	Emmanuel C additiona	•		-120 (
	10/23/2009	Building #192134	American Lu . error-t/b	•		0 (
	10/23/2009	Building #19 . 2135	Combined J Aug 200			-30 (
	10/23/2009	Building #192136	Diabetes We Aug '09	•		-20.0
	10/23/2009	Building #192137	Disabled Am error-vol	-		0 (
	10/23/2009	Building #192138	Emmanuel C .Aug (32			-320 (
	10/23/2009	Building #192139	Macular Deg Aug '09	•		-20.0
_	10/23/2009	Building #192140	Simon Firem . Aug 200	9 (Charity.Amb.	. R	-10.0
	her Charity	.		•	_	-5,475.0
	6/2/2009	Building #192090	National Brai	Charity	R	-5,000.
	9/25/2009	Building #19 2127	-	Ball Charity	R	-375.
	11/23/2009	Building #192141	Dr. W. Curry in memo	ry Charity	Ŕ	-100.
	ity-Burlington					-50.0
	2/2/2009	Building #19 . 2041	The Chester for Learn	in . Charity-Burli	R	-50 (
Char	ity-Hanover					-55.0
	414 - 10000	D. Jakana 440 0024	T 00 11- 0 1	B 61 11 11	_	

EMMAUS

Troop 38 Ha .. Pancake Br... Charity-Han... R

The Arc Of ... Ad bk: Can... Charity-Have... R

Cycle For S .. Charity-Have... R

-55.00

-275.00

-100 00

-75 00

4/15/2009

3/26/2009

3/26/2009

Charity-Haverhill

Building #19 . .2074

Building #19 ..2048

Building #19 . .2050

Building # 19 Foundation Division of Public Charities Form PC year 2009

Officers/Directors

- Gerald Elovitz 79 Florence St, Chestnut Hill, MA (5)
- Elaine Elovitz 79 Florence St, Chestnut Hill, MA (2)
- Debra Elovitz 465 Beacon St, Boston, MA 02115 (2

Recordkeeper :

Judith Elovitz, 20 Donna Rd, Newton, MA (1), (4)

- (1) Custody of funds
- (2) Distribution of funds
- (3) No fund raising this year
- (4) Custody of financial records
- (5) Authorized to sign checks

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box			. > 🗓
	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this I t complete Part II unless you have already been granted an automatic 3-month extension on a previously fil		m 0060	
<u>P</u> ar				
•	poration required to file Form 990-T and requesting an automatic 6-month extension \cdot check this box and com-	plete		. \square
	only			▶ ∟
to file	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an income tax returns.			
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic utomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or conjust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Chanties & Nonprofits.	cally if	(1) you want to	the additional -T. Instead.
Туре	or Name of Exempt Organization	Empl	oyer identific	ation number
print	DUTT D THE 10 DOING TON		4 00640	= 0
File by t	BUILDING 19 FOUNDATION	U	<u>4-30640</u>	72
due dat				
return S instructi	966			
Chec	k type of return to be filed (file a separate application for each return):			
_	Form 990 Form 990-T (corporation) Form 47	20		
Ħ	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52	-		
	Form 990-EZ Form 990-T (trust other than above) Form 60			
X	Form 990-PF			
	TIDIOU DI OVITAG			
• The	JUDITH ELOVITZ books are in the care of 20 DONNA ROAD - NEWTON, MA 02459			
	ephone No. ► 617-749-6900 FAX No. ► 617-749-3691			
• If ti	ne organization does not have an office or place of business in the United States, check this box		·	▶ 🔲
• If t	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If th	s is fo	the whole gr	oup, check this
box 🕽	If it is for part of the group, check this box I and attach a list with the names and EINs of all	memb	ers the exten	sion will cover.
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt		-	
	AUGUST 15, 2010 , to file the exempt organization return for the organization named a		The extension	1
	is for the organization's return for:			
	▶ <u>X</u> calendar year <u>2009</u> or			
	tax year beginning, and ending		<u> </u>	
2	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in ac	counting period
За	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions.	3a	_\$	0.
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated			404
	tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	481.
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c		0.
			FO for a reserve	
	on, If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-		
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form 8	868 (Rev. 4-2009)