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Form 990-PF

Department of the Treasury

Return of Private Foundation

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

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

2009

OMB No 1545-0052

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	_	venue Service Note. The Touridation may	be able to ase a copy of fills	return to satisfy state repo	rung requirements.	
For	cale	ndar year 2009, or tax year beginning		, and ending		
G (Checl	k all that apply: Initial return	Initial return of a fo	ormer public charity	Final return	1
		Amended return	Address chan	ge	Name change	
Цве	e the	IRS Name of foundation			A Employer identification	number
	label	. 1				
		se, ROBERT AND IRIS FANGE	R FAMILY FOU	NDATION	04-3425988	
	print	l .	elivered to street address)	Room/suite	B Telephone number	
	r typ	-W- TOTO HIMPORTALL DICTAL		APT 3G	<u>(617)734-2</u>	735
	: Spe :ructi	one City or town, State, and ZIP code			C If exemption application is p	ending, check here
11151	1000	CAMBRIDGE, MA 02138			D 1. Foreign organizations	
H (Check	c type of organization: X Section 501(c)(3) ex	empt private foundation		Foreign organizations me check here and attach co	eting the 85% fest, mputation
	_ S∈	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	E If private foundation sta	tus was terminated
l Fa	air ma	arket value of all assets at end of year J Accounti	ng method: X Cash	Accrual	under section 507(b)(1)	
(fi	rom .		ther (specify)		F If the foundation is in a	60-month termination
	\$	619,678. (Part I, colu	mn (d) must be on cash i	basis)	under section 507(b)(1)	(B), check here
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	,	necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received				
	2	Check It if the foundation is not required to attach Sch. B				
0	3	Interest on savings and temporary cash investments	16,598.	<u> 16,598.</u>		STATEMENT 1
2010	4	Dividends and interest from securities	7,584.	7,584.	7,584.	STATEMENT 2
-	5a	Gross rents				
0	b	Net rental income or (loss)				
Z ₀	6a	Net gain or (loss) from sale of assets not on line 10	<32,591.	>		
3	b	Gross sales price for all assets on line 6a 179,724.				
و ک	7	Capital gain net income (from Part IV, line 2)		0.		<u> </u>
回"	8	Net short-term capital gain			0.	
Ş	9	Income modifications				
₹	10a	Gross sales less returns and allowances				
SCANNED JUN Revenue	b	Less Cost of goods sold			·	
	C	Gross profit or (loss)				
	11	Other income				
	12	Total. Add lines 1 through 11	<8,409.	<u>> 24,182.</u>	24,182.	
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
ses	16a	Legal fees				
Je n	Ь	Accounting fees				
X	C	Other professional fees STMT 3	3,212.	0.	RECEIVEDO.	0.
ž.	17	Interest				U
frat	18	Taxes STMT 4	223.	30.	MAY 2 4 2010 0 -	0.
nis	19	Depreciation and depletion		30	IVIA! 2 T ZUIU	0
Ë	20	Occupancy				<u>x</u>
₹	21	Travel, conferences, and meetings			OGDEN, UT	
anc	22	Printing and publications				-
Operating and Administrative Expen	23	Other expenses				
rati	24	Total operating and administrative				
be		expenses. Add lines 13 through 23	3,435.	0.	0.	0.
O	25	Contributions, gifts, grants paid	43,025.			43,025.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	46,460.	0.	0.	43,025.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	< 54 ,869.	>		
	b	Net investment income (if negative, enter -0-)		24,182.		
9235		Adjusted net income (if negative, enter -0-)			24,182.	
						^^^



	m 990-PF (2009) ROBERT AND IRIS FANGEI	R FAMILY FOUNDAT Beginning of year	ION 04-	3425988 Page 2
Pa	art II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
\neg	1 Cash - non-interest-bearing	(a) Doon value	(b) 200x value	(0) (a.i. (i) a
	2 Savings and temporary cash investments			
	3 Accounts receivable ►		-	
	Less: allowance for doubtful accounts			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts			
- 1	5 Grants receivable			
İ	6 Receivables due from officers, directors, trustees, and other			
	disqualified persons			
	7 Other notes and loans receivable			
ĺ	Less: allowance for doubtful accounts			
\$	8 Inventories for sale or use			
Assets	9 Prepaid expenses and deferred charges			
۲	10a Investments - U.S. and state government obligations STMT 5	246,161.	246,162.	259,047.
	b Investments - corporate stock STMT 6	343,837.	250,048.	233,978.
	c Investments - corporate bonds STMT 7	37,950.	37,950.	<u>38,052.</u>
	11 Investments - land, buildings, and equipment basis	_		
	Less accumulated depreciation			
	12 Investments - mortgage loans	40.600	00 601	00 601
- 1	13 Investments - other STMT 8	49,682.	88,601.	88,601.
	14 Land, buildings, and equipment basis			
	Less accumulated depreciation			
	15 Other assets (describe ►	_)		···
	16 Total assets (to be completed by all filers)	677,630.	622,761.	619,678.
П	17 Accounts payable and accrued expenses			
	18 Grants payable			
ဖွ	19 Deferred revenue			
Liabilities	20 Loans from officers, directors, trustees, and other disqualified persons			
jabi	21 Mortgages and other notes payable			
-	22 Other liabilities (describe >	_)		
\dashv	23 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here]		
s	and complete lines 24 through 26 and lines 30 and 31.			
- 1	24 Unrestricted			
ajai	25 Temporarily restricted			
밁	26 Permanently restricted	,		
5	Foundations that do not follow SFAS 117, check here	J		
٩	and complete lines 27 through 31.		0	
ets	27 Capital stock, trust principal, or current funds	0.	0.	
ISS	28 Paid-in or capital surplus, or land, bldg., and equipment fund	677,630.	622,761.	
e /	 Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances 	677,630.	622,761.	
Ž	30 Total net assets or fund balances	077,030.	022,701.	
\Box	31 Total liabilities and net assets/fund balances	677,630.	622,761.	
Pa	art III Analysis of Changes in Net Assets or Fund	d Balances		
1 7	Total net assets or fund balances at beginning of year - Part II, column (a),	line 30		
	(must agree with end-of-year figure reported on prior year's return)		1	<u>677,630.</u>
	Enter amount from Part I, line 27a		2	<54,869.
	Other increases not included in line 2 (itemize)			0.
	Add lines 1, 2, and 3		4	622,761.
	Decreases not included in line 2 (itemize)		5	0.
<u>6 T</u>	Total net assets or fund balances at end of year (line 4 minus line 5) - Part I	i, column (b), line 30		622,761.
				Form 990-PF (2009)

Form 990-PF (2009) ROBI Part IV Capital Gains a	ERT AND IRIS F and Losses for Tax o	'ANGER FA	MILY FOU	<u>NDATI</u>	ON	04-34	125988 Page 3
(a) List and descr	ibe the kind(s) of property sold rehouse; or common stock, 20	(e.g., real estate,	<u> </u>	(b) How a	cquired chase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	Tellouse, or common stock, 20	0 3113. 1412.0 00.7		D - Don	ation		(**************************************
b SEE ATTACHED	STATEMENT					_	
c						_	
d						_	
e				L-,			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (lo (e) plus (f) min	
<u>a</u>					 -		
<u>b</u>				 -		-	
- C d				-			
e 179,724.			212,31	5.			<32,591.
Complete only for assets showing	g gain in column (h) and owner	d by the foundation			(1)	Gains (Col. (h) g	ain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1)		col	(k), but not less t Losses (from co	than -0-) or ol. (h))
a							
<u>b</u>							
<u>c</u>							
d							-22 501
<u>e</u>					<u> </u>		<32,591.
2 Capital gain net income or (net cap	oital loss) { If gain, also If (loss), ent	enter in Part I, line er -0- in Part I, line	7 7	} 2			<32,591.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, or (loss), enter 0, in Part I, line 8		5) and (6):		}			<24,770.
If (loss), enter -0- in Part I, line 8 Part V Qualification Ui	nder Section 4940(e)	for Reduced	Tax on Net	Investn	nent Inco	ome	<u> </u>
(For optional use by domestic private							
	ŕ			,			
If section 4940(d)(2) applies, leave th	is part diank.						
Was the foundation liable for the secti	ion 4942 tax on the distributable	le amount of any ye	ear in the base per	iod?			Yes X No
If "Yes," the foundation does not quali				-	•		
1 Enter the appropriate amount in e		instructions before	making any entrie				(d)
(a) Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying	g distributions	Net value of no	(c) ncharitable	use assets	(col. (b)	(d) tribution ratio divided by col. (c))
2008	9 11)	41,662.		73	2,751		.056857
2007		53,027.			9,289		.070770
2006		111,803.			9,643		.147178
2005		82,240.			8,476		.102996
2004		60,860.		73	3,801		.082938
							460530
2 Total of line 1, column (d)		-t-1 1 0 t 5		-4		2	.460739
3 Average distribution ratio for the 5 the foundation has been in existen		otal on line 2 by 5,	or by the number	of years		3	.092148
4 Enter the net value of noncharitable	e-use assets for 2009 from Par	rt X, line 5				4	619,331.
5 Multiply line 4 by line 3						5	57,070.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6	242.
7 Add lines 5 and 6						7	57,312.
8 Enter qualifying distributions from	Part XII, line 4					8	43,025.
If line 8 is equal to or greater than See the Part VI instructions.		, line 1b, and comp	olete that part using	g a 1% tax	rate.	· · · · · · · · · · · · · · · · · · ·	
See and that the mode deduction						,	Form 990-PE (2000)

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	990-PF		RIS FANGER	FAMILY_	<u>FOU</u>	NDATION			3425			Page 4
	t VI	Excise Tax Based on Inves					e), or 4	<u>948 -</u>	- see i	<u>ıstrı</u>	ıctioı	<u>1S)</u>
		operating foundations described in section)					
	Date of	ruling or determination letter:	(attach copy	of letter if nece	ssary-	see instructions)						
b	Domest	ic foundations that meet the section 4940(e) requirements in Part V, (check here 🕨		and enter 1%	•	1			4	<u>84.</u>
	of Part I	, line 27b										
		domestic foundations enter 2% of line 27					J					
2	Tax und	er section 511 (domestic section 4947(a)(1) trusts and taxable found	lations only. Oth	iers en	ter -0-)		2				0.
		s 1 and 2						3		_	4	84.
4	Subtitle	A (income) tax (domestic section 4947(a)((1) trusts and taxable found	dations only. Oth	hers en	iter -0-)		4				0.
5	Tax bas	ed on investment income. Subtract line 4	from line 3. If zero or less,	enter -0-				5			4	<u>84.</u>
6	Credits/	Payments.		1		Ī			İ			
a	2009 es	timated tax payments and 2008 overpayme	ent credited to 2009		6a		560.	ļ				
b	Exempt	foreign organizations - tax withheld at soul	rce		6b							
C	Tax paid	l with application for extension of time to fi	le (Form 8868)		6c							
d	Backup	withholding erroneously withheld		Į	6d			ļ				
7	Total cr	edits and payments. Add lines 6a through 6	6d					7_			5	<u>60.</u>
8	Enter ar	y penalty for underpayment of estimated t	tax. Check here 🔲 ıf For	m 2220 is attacl	hed			8				
9	Tax due	. If the total of lines 5 and 8 is more than li	ine 7, enter amount owed					9				
10	Overpay	ment. If line 7 is more than the total of line	es 5 and 8, enter the amou	nt overpaid		1		10				76.
		e amount of line 10 to be: Credited to 2010				76. Refu	nded 🚩	11				<u>0.</u>
	_	A Statements Regarding A										
1a	During 1	he tax year, did the foundation attempt to i	influence any national, state	e, or local legisla	ation or	did it participate or	ıntervene	ın			Yes	
	any poli	tical campaign?								<u>1a</u>		<u>X</u>
b	Did it sp	end more than \$100 during the year (eithe	er directly or indirectly) for i	political purpose	es (see	instructions for def	inition)?			<u>1b</u>		<u>X</u>
	If the a	nswer is "Yes" to 1a or 1b, attach a dei	tailed description of the	activities and	copie	s of any materials	publishe	d or				
	dıstrıbu	ited by the foundation in connection v	vith the activities									
C	Did the	foundation file Form 1120-POL for this yea	ır?							1c		<u>X</u>
		e amount (ıf any) of tax on political expend										
	(1) On	the foundation. 🕨 💲	(2) On founda	tion managers.	▶ \$		0.					
е	Enter th	e reimbursement (if any) paid by the found	lation during the year for p	olitical expenditi	ure tax	imposed on founda	ition					
	manage	rs. ► \$0 .										
2	Has the	foundation engaged in any activities that h	ave not previously been rep	ported to the IRS	S?					2		<u>X</u>
	lf "Yes,	" attach a detailed description of the a	activities									
3	Has the	foundation made any changes, not previou	usly reported to the IRS, in	its governing in:	strume	ent, articles of incorp	ooration, c	r				
	bylaws,	or other similar instruments? If "Yes," att	tach a conformed copy	of the changes	s					3		<u>X</u>
		foundation have unrelated business gross		during the year?	7					4a		<u>X</u>
b	lf "Yes,"	has it filed a tax return on Form 990-T for t	this year?					N	/A	4b		
5	Was the	re a liquidation, termination, dissolution, o	r substantial contraction di	ring the year?						5		<u>X</u>
	lf "Yes,	" attach the statement required by Ge	eneral Instruction T									
6	Are the	requirements of section 508(e) (relating to	sections 4941 through 49	45) satisfied eith	ner:							
	By lar	guage in the governing instrument, or										
	By sta	te legislation that effectively amends the go	overning instrument so tha	t no mandatory	directi	ons that conflict wit	h the state	law				
	rema	n in the governing instrument?								6		<u>X</u>
7	Did the	foundation have at least \$5,000 in assets a	t any time during the year?	1						7	X_	
	lf "Yes,	" complete Part II, col (c), and Part XV	/									
8a	Enter th	e states to which the foundation reports or	with which it is registered	(see instruction:	s) 🕨							
	MA	· · · · · · · · · · · · · · · · · · ·										
b	If the an	swer is "Yes" to line 7, has the foundation f	furnished a copy of Form 9	90-PF to the Att	orney (General (or designa	te)					
	of each	state as required by General Instruction	G? If "No," attach expla	nation						8b	X	
		undation claiming status as a private opera					5) for cale	ndar				
		09 or the taxable year beginning in 2009 (s								9		<u>X</u>
10	Did any	persons become substantial contributors of	during the tax year? if "Yes,"	attach a schedule	listing 1	their names and addres	ses			10		_X_

	990-PF (2009) ROBERT AND IRIS FANGER FAMILY FOUNDATION 04-3425 rt VII-A Statements Regarding Activities (continued)	988		Page 5
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	I I	_	
• •	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
40	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
12		12		X
	August 17, 2008?	13	х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			
	Website address ► N/A The books are in care of ► ROBERT D FANGER Telephone no. ►617-73	1-2	735	
14			133	
	Located at ► 1010 MEMORIAL DRIVE, CAMBRIDGE, MA ZIP+4 ► 02	130		$\overline{}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	NT.	, . ►	
<u>D</u> .	and enter the amount of tax-exempt interest received or accrued during the year The Many Roll Statements Regarding Activities for Which Form 4720 May Roll Regarded	IN	/ <u>A</u>	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 1	Vaal	N _a
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	<u>No</u>
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		}	
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?		-	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	l i	İ	
	termination of government service, if terminating within 90 days.)		l	
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
U	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
		 '' 		
_	organizations ruying on a out-on-rotton rotton abolicance shock rich			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	_		v
_	before the first day of the tax year beginning in 2009?	1c	\dashv	<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		ľ	
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009?			
	If "Yes," list the years \blacktriangleright	i		
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		l	
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2009.) N/A	3b		
40	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	 "" 		
U	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		Х
	nau not been temoved from jeopardy before the first day of the tax year beginning in 2003.	40		-41

Form **990-PF** (2009)

Form 990-PF (2009) ROBERT AND IRIS FANGER F	AMILY FOUNDAT	ION	<u>04-34259</u>	88 . Page 6
Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be I	Required (contin	nued)	
5a During the year did the foundation pay or incur any amount to:			[]	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir		es X No	
any voter registration drive?	-0		es X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes		10	es LAL NO	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section		es X No	
509(a)(1), (2), or (3), or section 4940(d)(2)?	ar advectional aurages or		es La NU	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or		es X No	
the prevention of cruelty to children or animals?	dor the eventure described		es LAL NO	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53.4945 or in a current notice regarding disaster assistance (see instri		iii negulalions	N/A	5b
Organizations relying on a current notice regarding disaster assistance check I				-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to		ınad		
		I/A Ye	es 🗀 No	
expenditure responsibility for the grant? If "Yes." attach the statement required by Regulations section 53 494		1/A	55 NO	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	, ,			, 1
a personal benefit contract?	pay premiums on	□ v ₄	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	nerconal henefit contract?			6b X
If "Yes" to 6b, file Form 8870.	oci sonai beneni contract.			11
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	□ v ₄	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	.000, 1 04114411011 1110		•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
ROBERT D FANGER	TRUSTEE	,		
1010 MEMORIAL DRIVE				
CAMBRIDGE, MA 02138	0.00	0.	0.	0.
IRIS FANGER	TRUSTEE			
1010 MEMORIAL DRIVE]			
CAMBRIDGE, MA 02138	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	1.	enter "NONE."	(d) 0-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(0)	compensation	allowances
NONE				
	<u> </u>			
	-			
	1			
	[1	<u> </u>	
Total number of other employees paid over \$50,000			Form	0 190-PF (2009)

101111 000 11 (2000

Form 990-PF (2009) ROBERT AND IRIS FANGER FAMILY FOUNDA	TION 04-	3425988	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation No. Paid Employees, and Contractors (continued)	lanagers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NON!	<u>.</u> "		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) (ompensation
NONE		ļ	
			
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u> </u>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infor	mation such as the	F	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.). 	Ехрег	ises
1 N/A			
2			
3			
<u> </u>			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 are	nd 2.	Amoı	ınt
1 N/A			
2			
All other program-related investments. See instructions.			
3			
Total Add lines 1 through 3			0.

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Pa	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foun	idations, see inst	ructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	599,435.
b	Average of monthly cash balances	1b	599,435. 29,327.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	628,762.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	628,762.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,431.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	619,331.
6	Minimum investment return. Enter 5% of line 5	6	30,967.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here X and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	
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	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Pá	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	43,025.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	43,025.
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	43,025.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qu	ualifies for the secti	on

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4940(e) reduction of tax in those years.

, Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2008	2008	2009
1 Distributable amount for 2009 from Part XI,				
line 7				0.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ N/A				
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		····		0.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract	-	***************************************		
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				
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				
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	0.			
O Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				F 000 PE (0000)

	<u>AND IRIS FAN</u>			04-342	5988 Page II
Part XIV Private Operating F	 `_		, question 9)		
1 a If the foundation has received a ruling o			00.41	0.700	
foundation, and the ruling is effective fo		=		0/98	
b Check box to indicate whether the found		toundation described in		942(j)(3) or 4942	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(a) 2009	(0) 2000	(6) 2007	(4) 2000	(0) 10141
investment return from Part X for	24 102	21 450	16 055	21 522	84,119.
each year listed	24,182.	21,459.	16,955.	21,523. 18,295.	71,501.
b 85% of line 2a	20,555.	18,240.	14,412.	10,293.	71,301.
c Qualifying distributions from Part XII,	43,025.	41,662.	53,027.	112,442.	250,156.
line 4 for each year listed d Amounts included in line 2c not	43,023.	41,002.	33,027.	112,442.	230,130.
used directly for active conduct of					
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					<u> </u>
for active conduct of exempt activities.					
Subtract line 2d from line 2c	43,025.	41,662.	53,027.	112,442.	250,156.
3 Complete 3a, b, or c for the				,	
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					0.
(2) Value of assets qualifying					_
under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed	20,645.	24,425.	24,976.	25,321.	<u>95,367.</u>
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					0
512(a)(5)), or royalties)	-				
(2) Support from general public and 5 or more exempt					
organizations as provided in					0
section 4942(j)(3)(B)(III)			-		0.
(3) Largest amount of support from					0.
an exempt organization (4) Gross investment income					0.
Part XV Supplementary Info	rmation (Complete	this part only if	the foundation h	ad \$5,000 or mor	e in assets
at any time during t					
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wh			outions received by the fo	undation before the close	of any tax
year (but only if they have contributed in	nore than \$5,000). (See sec	tion 507(d)(2).)			
NONE					
 b List any managers of the foundation who other entity) of which the foundation has 		stock of a corporation (or	r an equally large portion	of the ownership of a part	nership or
	s a 10 % of greater interest.				
NONE					
2 Information Regarding Contribution				accept upoplicated reques	to for funds. If
Check here \(\sum_{\text{\colored}} \) if the foundation of the foundation makes gifts, grants, etc.	nly makes contributions to (see instructions) to individ				
a The name, address, and telephone num				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
a The hame, address, and telephone hum	ber of the person to whom	applications should be at	10103300.		
SEE STATEMENT 9					
b The form in which applications should b	e submitted and informatio	n and materials they sho	uld include;		
c Any submission deadlines:			· · · · · · · · · · · · · · · · · · ·	<u>-</u> .	
					
d Any restrictions or limitations on awards	s, such as by geographical a	areas, charitable fields, ki	nas of institutions, or oth	er tactors;	

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3 Grants and Contributions Paid During th		Pavment		
Recipient	If recipient is an individual,			
	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	recipient	John Bandi	
a Paid during the year			-	
SEE ATTACHED LIST	N/A	PUBLIC CHARITY	GENERAL UNRESTRICTED USE	43,025.
Total			<u>▶ 3a</u>	43,025.
b Approved for future payment				
NONE				
Total			> 3b	0 . orm 990-PF (2009)

Part XVI-A Analysis of Income-Producing Activit

Enter arass	amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
· ·		(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program	n service revenue:	code		COUG		
ь						
c		-		<u> </u>		**
d						
e						
f						
g Fees	and contracts from government agencies					
2 Membe	rship dues and assessments					
3 Interest	on savings and temporary cash					
investm						_16,598.
	ds and interest from securities					7,584.
	al income or (loss) from real estate:					<u>., 1 </u>
	t-financed property					
	debt-financed property					
	al income or (loss) from personal					
propert	y	-		ļ		
7 Other in	vestment income					
8 Gain or	(loss) from sales of assets other					
than inv	rentory			ļ		<32,591.
9 Net inco	ome or (loss) from special events					
10 Gross p	rofit or (loss) from sales of inventory					
11 Other re	venue:					
		·· <u> </u>				

·						
10 Cubtoto	I. Add columns (b), (d), and (e)		0.		0.	<8,409.
		1	<u> </u>			<8,409.
	dd line 12, columns (b), (d), and (e)				10_	<u> </u>
(See works	heet in line 13 instructions to verify calculations.)					
Part X	VI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No.	Explain below how each activity for which incon	-	• •	contril	outed importantly to the accord	nplishment of
	the foundation's exempt purposes (other than b					
3	INTEREST ON SAVINGS AND			VES	TMENTS	
4	DIVIDENDS AND INTEREST					
8	GAIN (LOSS) ON SALE OF	ASSETS	·			
						<u></u> -
					_	
			· •		-	
			<u> </u>			
					-	
			<u> </u>			
·						
						. <u> </u>

	Exempt Organizations					
1	Did the organization directly or indirectly engage in any of the following	ng with any other organization	on described in section 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 5				_	
а	Transfers from the reporting foundation to a noncharitable exempt of					
	(1) Cash			1a(1)		_X_
	(2) Other assets			1a(2)		X
b	Other transactions:					
	(1) Sales of assets to a noncharitable exempt organization			1b(1)		_X_
	(2) Purchases of assets from a noncharitable exempt organization			1b(2)		X
	(3) Rental of facilities, equipment, or other assets			1b(3)		X
	(4) Reimbursement arrangements			1b(4)		_X_
	(5) Loans or loan guarantees			1b(5)		_X_
	(6) Performance of services or membership or fundraising solicitation	ons		1b(6)		_X_
C	Sharing of facilities, equipment, mailing lists, other assets, or paid en	nployees		1c		_X_
d	If the answer to any of the above is "Yes," complete the following sch	edule. Column (b) should alv	ways show the fair market value of the goods,	other ass	ets,	
	or services given by the reporting foundation. If the foundation receive	ed less than fair market valu	ie in any transaction or sharing arrangement,	show in		
	column (d) the value of the goods, other assets, or services received					
a)	une no (b) Amount involved (c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, and	sharing ar	rangeme	nts
	N/A					
						
		<u> </u>				
_		<u> </u>	the state of the s			
2a	Is the foundation directly or indirectly affiliated with, or related to, one		zations described	– 1,,	TV] No
	in section 501(c) of the Code (other than section 501(c)(3)) or in sec	TION 52//	L	Yes	LA	סוו L
D	If "Yes," complete the following schedule. (a) Name of organization	(b) Type of organization	(c) Description of relations	hin		
	N/A	(b) type of organization	(o) Bossilption of foldations	p		
	N/A					
Т	Under penalties of perjury, I declare that I have examined this return, including according	ompanying schedules and statem	nents, and to the best of my knowledge and belief, it is	true, corre	ct,	
	and complete Declaration of preparer (other than Expayer or fiduciary) is based or	all information of which preparer	has any knowledge			
	1 trace the tampor	V5116401	O ► TRUSTEE			
일	Signature of officer or trustee	Date	Title			
n Here	Preparer's			er's identify	ying nuπ	ber
	Signature DONALD A. ROBINSON, Firm's name (or yours fanger & ROBINSON, 1 self-employed), 1 self-employed), 20 WALNUT STREET -		5/12/10 self- employed ► □			
	Firm's name (or yours FANGER & ROBINSON,		EIN ►			
	1 STREET -	STE 301				
	address, and ZIP code WELLESLEY HILLS, MA		Phone no. 781-			
			Fo	orm 990	-PF(2009)

Calendar Year 2009	Robert & Iris Fanger Family Foundation		
NOTE ALL RECIPIENTS ARE PUBLIC CHARITIES			
		PURPOSE OF GRANT	
Name	<u>ADDRESS</u>	OR CONTRIBUTION	Amount
American Jewish Committee	New York, New York	UNRESTRICTED USE	100 00
Americans for Peace and Tolerance	15 Main Street< MA02472	UNRESTRICTED USE	1,000 00
Anti-Defamation League	BOSTON, MA 02108	UNRESTRICTED USE	5,000 00
Appalachian Mountain Club	5 Joy St , Boston, MA 02108	UNRESTRICTED USE	250 00
Austin Chapter of Amigos	900 Broken Feather Tr, Pflugerville, TX 78660	UNRESTRICTED USE	100 00
Beth Israel Deaconess Hospital	Brookline Ave , Boston, MA	UNRESTRICTED USE	100 00
Boston Dance Alliance	19 Clarendon St , Boston, MA 02116	UNRESTRICTED USE	450 00
Boston Foundation for Sight	464 Hillside Ave , Njeedham, MA 02494	UNRESTRICTED USE	500 00
Boston Mediacl Center	Boston, MA 02118	UNRESTRICTED USE	500 00
Boston Public Library foundation	700 Boylston Street, Boston, MA 02116	UNRESTRICTED USE	100 00
Brandels university Women's Studies Research Center	415 South Street, Waltham, MA 02453	UNRESTRICTED USE	500 00
Colby College	Waterville, ME 04901	UNRESTRICTED USE	200 00
Combined Jewish Philanthropies	126 High St , Boston, MA 02110	UNRESTRICTED USE	15,000 00
Crohns & Colitis Foundation of America	2200 E Devon Ave , Des Plains, IL 60018	UNRESTRICTED USE	200 00
Dartmouth College	Hanover, NH 03755	UNRESTRICTED USE	105 00
Falmouth Road Race	Falmouth, MA 02541	UNRESTRICTED USE	400 00
Francis Quimet Scholarship Fund	300 Arnold Palmer Blvd, Norton, MA 02766	UNRESTRICTED USE	100 00
Friends of Spohr Gardens	45 Fells Road Falmouth, MA 02540	UNRESTRICTED USE	100 00
Friends of the Public Gardens	87 Mount Vernon Street, Boston, MA 02108	UNRESTRICTED USE	50 00
Green Street Studio	185 Greet Street, Cambridge, MA02139	UNRESTRICTED USE	100 00
Hebrew Senior Life	1200 Centre St , Rosindale, MA 02131	UNRESTRICTED USE	200 00
Historic Highfield Hall	56 Highfield Dr. Falmouth, MA 02541	UNRESTRICTED USE	100 00
Home for our Troops	37 Main St , Taunton, MA 02780	UNRESTRICTED USE	500 00
Jose Mateo Ballet Theatre	400 Harvard Ave , Cambridge, MA 02138	UNRESTRICTED USE	100 00
Kehillath Israel	16019 Sunset Blvd, CA 90272	UNRESTRICTED USE	100 00
Laboure center	275 West Broadway, So Boston, MA 02127	UNRESTRICTED USE	150 00
Leonard P Zakım Center for integrated Theatre	100 Summer St , Boston, MA 02110	UNRESTRICTED USE	500 00
Miles for Max	Kennebunkport, ME 04046	UNRESTRICTED USE	100 00
Museum of Fine Arts	465 Huntington Ave , Boston, MA 02115	UNRESTRICTED USE	2,700 00
New York City Ballet	New York, New York	UNRESTRICTED USE	350 00
Office of the Arts at Harvard	Cambridge, MA 02138	UNRESTRICTED USE	100 00
Penikese Island School	Woodhole, MA 02543	UNRESTRICTED USE	200 00
Perkins School Braille Library	175 North Beacon Stree, Watertown , MA 02472	UNRESTRICTED USE	250 00
Rodman Ride for Kids	271 Huntington Ave , Boston, MA 02115	UNRESTRICTED USE	100 00
Society of Dance History Scholars	3416 Primm Lane, Birmingham, AL 35216	UNRESTRICTED USE	100 00
Spaulding Rehab Hospital	125 Nashua St , Boston, MA 02114	UNRESTRICTED USE	500 00
Temple Israel	477 Lonwood Ave , Boston, MA 02115	UNRESTRICTED USE	4,250 00
The Home for Little Wanderers	271 Huntington Ave , Boston, MA 02115	UNRESTRICTED USE	6,000 00
The Hundred Club of Massachuseets	Boston, MA		
United Hospice of Rockland	11 Stokum Lane, New City, NY 10956	UNRESTRICTED USE	250 00 100 00
WGBH	125 Western Ave , Boston, MA 02134	UNRESTRICTED USE	120 00
West End House		UNRESTRICTED USE	
West Falmouth Library	East Parsonfield, ME 04028	UNRESTRICTED USE	200 00
Woods Hole Research Center	575 W Falmouth Hgway, W Falmouth, MA 02574	UNRESTRICTED USE	1 000 00
World Jewish Congress Foundation	PO Box 296, Woods Hole, MA 02543 PO Box 90400, Qwashington, DC 20090	UNRESTRICTED USE	1,000 00
TTOTAL SEMISIT CONGRESS FOUNDATION	1 O Dox 90400, Gwasiington, DO 20090	UNRESTRICTED USE	100 00
·	<u> </u>		43,025 00

.

Part IV Capital Gains and Los	sses for Tax on Investment Income				
	describe the kind(s) of property solick warehouse; or common stock, 2		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 1600 BANK OF A	MERICA		P	12/08/08	
b 2300 CENTRAL F			P	07/17/08	
c 209 TRANSOCEAN			P	04/27/07	
d 41 TRANSOCEAN				06/18/08	
e 800 BARRICK GO				03/24/09	
f 100 NATIONAL O				03/09/07	
g 600 CANON INC	ADR		P	11/22/05	
h 150 POTASH				06/25/09	
120 FIRST SOLA			P	07/27/09	<u> </u>
900 BARRICK GO			P	08/11/09 03/09/07	10/01/09
k 300 NATIONAL O	IL WELL VARCO		P	03/09/07	10/20/09
<u> </u>					
<u>m</u>					
0					
	(f) Depreciation allowed	(g) Cost or other basis	/h¹	Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		lus (f) minus (g)	
a 8,864.	· · · · · · · · · · · · · · · · · · ·	27,369.			<18,505.>
b 27,418.		31,375.	<u></u>		<3,957.>
c 12,855.		20,503.			<7,648.>
d 2,522.		4,022.			<1,500.>
e 28,541.		26,263.			2,278.
f 3,717.		3,662.			55.
g 20,298.		22,777.			<2,479.>
h 12,491.		14,007.			<1,516.>
17,148.		20,781.			<u><3,633.</u> >
32,634.		30,571.			2,063.
k 13,236.		10,985.			2,251.
1					
m					
n					
0		10/04/00			
Complete only for assets showin	g gain in column (h) and owned by t			ses (from col. (h))	aal (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (I) over col. (j), if any		of col. (h) gain over ot less than "-0-")	
a			**		<18,505.>
b			**		<u><3,957.</u> >
C					<7,648.>
<u>d</u>			**		<1,500.>
<u>e</u>			**		2,278.
f					55.
9			4.4.		<2,479.>
h			**		<1,516.>
<u> </u>			**		<3,633.>
1	· 				2,063.
<u>k</u>					2,251.
<u> </u>					
m			<u> </u>		
<u>n</u> 0				•	
<u> </u>		. 0. 11 1 - 7			
2 Capital gain net income or (net cap	11 (1000), 011101	` \	2		<32,5 <u>91.</u> >
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, o	column (c).	d (6):			
If (loss), enter "-0-" in Part I, line 8	 	J	3		<24,770.>

TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A 16,5	DELITY INVESTMENTS- NOMINE				λ M∩LINIT!
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A 16,5					AHOUNI
FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT SOURCE GROSS AMOUNT DIVIDENDS AMOUNT FIDELITY INVESTMENTS-NOMINEE 7,584. 0. 7,5 TOTAL TO FM 990-PF, PART I, LN 4 7,584. 0. 7,5 FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITY PER BOOKS MENT INCOME NET INCOME PURPOS MANAGEMENT FEES-INVESTMENTS 3,193. 0. 0. BANK CHARGES 19. 0. 0. TO FORM 990-PF, PG 1, LN 16C 3,212. 0. 0.	TAL TO FORM 990-PF, PART I	E			16,598
SOURCE GROSS AMOUNT CAPITAL GAINS COLUMN (2 AMOUNT		, LINE 3, CO	OLUMN A		16,598
SOURCE GROSS AMOUNT DIVIDENDS AMOUNT FIDELITY INVESTMENTS-NOMINEE 7,584. 0. 7,5 TOTAL TO FM 990-PF, PART I, LN 4 7,584. 0. 7,5 FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT CA) (B) (C) (D) EXPENSES NET INVEST-ADJUSTED CHARITY CHARITY PER BOOKS MENT INCOME NET INCOME PURPOS MANAGEMENT FEES-INVESTMENTS 3,193. 0. 0. BANK CHARGES 19. 0. 0. 0. TO FORM 990-PF, PG 1, LN 16C 3,212. 0. 0. 0.	RM 990-PF DIVIDEN	DS AND INTER	REST FROM SECU	RITIES	STATEMENT
TOTAL TO FM 990-PF, PART I, LN 4 7,584. 0. 7,584. TOTAL TO FM 990-PF OTHER PROFESSIONAL FEES STATEMENT	URCE	GROSS			COLUMN (A) AMOUNT
FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITY PER BOOKS MENT INCOME NET INCOME PURPOS MANAGEMENT FEES-INVESTMENTS 3,193. 0. 0. BANK CHARGES 19. 0. 0. TO FORM 990-PF, PG 1, LN 16C 3,212. 0. 0.	DELITY INVESTMENTS-NOMINEE		7,584.	0.	7,584
(A) (B) (C) (D)	TAL TO FM 990-PF, PART I,	LN 4	7,584.	0.	7,584
DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARITY PER BOOKS MENT INCOME NET INCOME PURPOS MANAGEMENT FEES-INVESTMENTS BANK CHARGES 3,193. 0. 0. 0. TO FORM 990-PF, PG 1, LN 16C 3,212. 0. 0.	RM 990-PF	OTHER PROFES	SSIONAL FEES		STATEMENT
FEES-INVESTMENTS 3,193. 0. 0. BANK CHARGES 19. 0. 0. TO FORM 990-PF, PG 1, LN 16C 3,212. 0. 0.	SCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITABL
	ES-INVESTMENTS				
	FORM 990-PF, PG 1, LN 160	3,212.	0.		0. 0
FORM 990-PF TAXES STATEMENT	ORM 990-PF TAXES				STATEMENT
	SCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITABL
COMM OF MA -FILING FEES 35. 0. 0.		35.	0.		0. 0
TAXES 140. 0. 0. FOREIGN TAX 48. 0. 0.		140	٥		
TO FORM 990-PF, PG 1, LN 18 223. 0. 0.	S- INVESTMENT INCOME XES				0. 0

FORM 990-PF U.S. AND STATE/CITY	GOVERNMENT	OBLIGATIONS	STATEMENT	5
	S. OTHER	BOOK VALUE	FAIR MARKET VALUE	?
FIDELITY INVESTMENTS- US TREASURY	<u> </u>	246,162.	259,04	7.
TOTAL U.S. GOVERNMENT OBLIGATIONS	-	246,162.	259,04	7.
TOTAL STATE AND MUNICIPAL GOVERNMENT OF	BLIGATIONS		-	
TOTAL TO FORM 990-PF, PART II, LINE 101	·	246,162.	259,04	7.
FORM 990-PF CORPORA	ATE STOCK		STATEMENT	6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
FIDELITY INVESTMENTS- EQUITY INVESTMENT	S	250,048.	233,97	8.
TOTAL TO FORM 990-PF, PART II, LINE 10F	3	250,048.	233,97	8.
FORM 990-PF CORPORA	ATE BONDS		STATEMENT	7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	,
FIDELITY INVESTMENTS	•	37,950.	38,05	2.
TOTAL TO FORM 990-PF, PART II, LINE 100	; :	37,950.	38,052.	
FORM 990-PF OTHER IN	IVESTMENTS		STATEMENT	8
DESCRIPTION	ALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	,
FIDELITY INVESTMENTS- MONEY MKT FUNDS	COST	88,601.	88,60)1.
TOTAL TO FORM 990-PF, PART II, LINE 13	•	88,601.	88,60	11.

04 - 3425988.

ROBERT .AND IRIS FANGER FAMILY FOUNDATION .

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ROBERT & IRIS FANGER 1010 MEMORIAL DRIVE CAMBRIDGE, MA 02138

1-617-734-2735

TELEPHONE NUMBER

617-734-2735

FORM AND CONTENT OF APPLICATIONS

NO SPECFIC FORM

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

Form **8868** (Rev. April 2009)

Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

Department of the Treasury

File a separate application for each return. Internal Revenue Service ightharpoons If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Name of Exempt Organization **Employer identification number** Type or print 04-3425988 ROBERT AND IRIS FANGER FAMILY FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions due date for filing your 1010 MEMORIAL DRIVE, NO. APT 3G return See City, town or post office, state, and ZIP code For a foreign address, see instructions instructions CAMBRIDGE, MA 02138 Check type of return to be filed (file a separate application for each return): Form 990 Form 990-T (corporation) Form 4720 Form 5227 Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 6069 Form 990-EZ Form 990-T (trust other than above) Form 8870 X Form 990-PF Form 1041-A ROBERT D FANGER • The books are in the care of ▶ 1010 MEMORIAL DRIVE - CAMBRIDGE, MA 02138 Telephone No. ► 617-734-2735 FAX No > If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until 1 AUGUST 15, 2010 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X calendar year 2009 or ___ tax year beginning , and ending Final return Change in accounting period If this tax year is for less than 12 months, check reason If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 484. nonrefundable credits. See instructions За

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

tax payments made. Include any prior year overpayment allowed as a credit

If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated

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)

Form 8868 (Rev. 4-2009)

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See instructions