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OMB No. 1545-0052

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

For calen	dar year 2009, c	or tax year beginning				and end			, 20
G Check	all that apply:	Initial return	Initia	7	of a former p	ublic cha	rity		Final return
		Amended return		Addres	s change		Na	ame change	
	Name of four						- [4	A Employer identific	ation number
Use the I	NO	ERMESH FAMILY CH		FOUND	ATION				
label.	<u> </u>	HARD G HAMERMESH						04-	3493147
Otherwis	Number and	street (or P O box number if	mail is not deliver	red to street	address)	Room/su	iite	B Telephone number (see	page 10 of the instructions)
print or type	i								
See Spec	ific 33 WOODI	LAND AVENUE				<u> </u>		` <u>`</u>	7) 965-2405
Instruction	ns. City or town,	, state, and ZIP code					- 1	C If exemption application pending, check here	tion is
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	WD 00166					- [D 1. Foreign organizati	ons, check here . 🕨 💹
		MA 02166						Foreign organizat85% test, check h	
	• •	tion: X Section 501		~ '			-{	semputation	
		nexempt charitable trust			ivate founda			E If private foundation	status was terminated
	arket value of all	1	unting metho		ash [] Acc	crual		under section 507(b)	(1)(A), check here . 🕨 🔽
-	from Part II, col		ther (specify)					-	in a 60-month termination
16) ▶			column (d) m	UST DE ON	casn basis.)	·		under section 507(b)	(1)(B), check here
		nue and Expenses (The columns (b), (c), and (d)	(a) Revenu		(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable
7	nav not necessarily	equal the amounts in	expenses		incon		, ,	income	purposes
	olumn (a) (see pag	e 11 of the instructions).)	- 500%	<u>' </u>	BLANCESCALES ALLE	A CONTRACTOR OF THE	1/204° A 55.00	KARSA MARIE PARENSE	(cash basis only)
l l	if the f	etc , received (attach schedule) . foundation is not required to	A CONTRACTOR OF THE PROPERTY O	Jugaran Merikan.	AND THE STATE OF THE STATE OF		NAME OF STREET		
	eck ▶ attach	Sch. B	WASHINGTON A	3	ACCEPTANCE OF THE	3.	\$4000	3	
		temporary cash investments	} -	2,034		22,034.		22,034.	
		est from securities	}	2,034		2,034.		22,034.	
1		• • • • • • • • • • • • • • • • • • •	THE PROPERTY OF THE	THE REAL PROPERTY.	ではないない	AT THE TRIVE SEE	Partie !		NAMES AND ASSOCIATION OF THE PARTY OF THE PA
		ess)	- 0	4 734		ACTION OF THE PERSON	4145 - 73	er garrengangerik Kanterak	TO THE PERSON AND THE PERSON
	et gain or (loss) from oss sales price for all	sale of assets not on line 10 802, 136.					4.1°		THE THE STATE OF T
as	sets on line 6a			27 31	Tate de sevenir de	162 Mar. 141. 152.	39250	the real real real real real real real rea	THE STATE SALES AND THE
2 7 C		ome (from Part IV, line 2) .	14 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -			aranteric	1.4 Toute (2)	-94,734.	THE RESERVE
	•	algain	10 April 2003 3 M			Miles Age Const			
10 a Gr	oss sales less returns						Part of		
1	d allowances • • • • ess Cost of goods sold	l l							
l l	-	(attach schedule)	1241		CONTRACT.	To the	GAL TO S	AND THE PROPERTY OF THE PARTY O	
1		h schedule)	1						
I		rough 11	1 7	2,697.	- 2	22,037.		-72,697.	
		ers, directors, trustees, etc.	1						
میا		aries and wages							
% 15 P	ension plans, empl								
741	egal fees (attach so								
а объ	ccounting fees (at								
		ees (attach schedule) *		8,922.		8,922.		8,922.	
te 17 _ ir	VEORIATION	- 1			<u></u>		<u> </u>		
15 LB T	axes (attach schedule	(see page 14 of the instructions)	1	683.		683.	<u> </u>	683.	
13646	epteclation (attack	Nscheduje) and depletion .							
0 04 B	ccupancy	≅			<u></u>		L		ļ
and Administrative of the property of the prop	Canal Contratehores	Jand meetings					ļ		
ਲ 22P	rinting and publica	ations			 				
- I	•	tach schedule)			 		}		
24 T	• -	d administrative expenses.		0 606		0 605		0 605	
ō A	dd lines 13 throug		1/	9,605. 9,743.	" maken seller	9,605	ने प्रदेशका .	9,605.	100 7
25 C	ontributions, gifts,	•	1	19,743	M. Market Sales	9,605	1 199		
		ursements. Add lines 24 and 25			in the Which		A. A. 18	9,605.	109,7
1 ~ 1	ubtract line 26 fro		tight spice is a second of the contract of the	12 015		2 14 m			
/	-	expenses and disbursements			The House The	12,432	17 June 17	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	LEE TO AND COMMENT OF THE
_ / p v	et investment inc	come (if negative, enter -0-)	10年の大学では		1. SATERL		1 4 5 N	Exercise and market	The same of the sa

D:	art II	Balance Sheets description column should be for end-of-year	Beginning of year		of year
		amounts only (See Instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
- {		Cash - non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	4	Pledges receivable			
ļ		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
-	•	disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)		原常定任公司的	CASAL MARIE CANADA PRANT
- ['	Less: allowance for doubtful accounts		किए अन्य र विकास में हैं अर अर्थित है थे देश का नाम क्षेत्र कर है है है	241/17040122541721551551409-11-46-45-459-49-55
1					
ste	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
۹		Investments - U.S. and state government obligations (attach schedule)		691,645.	691,645.
ĺ	b	Investments - corporate stock (attach schedule) $ATCH$ 3	000, 323.	0,71,043.	091,045.
	11 C	Investments - corporate stock (attach schedule) ATCH .3 Investments - corporate bonds (attach schedule)	WHITEHALL TRANSLITON IN STATE OF THE	SELECTED CONTROL OF SELECTION O	Hite name of Valuation and the Control of the Contr
-		and equipment basis	ALUNCA ALGARIAN		MENT WOLLD'S TO SERVICE THE
- 1		(attach schedule)		ļ	
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) Land, buildings, and equipment: basis Less: accumulated depreciation	B. and the status and below the boundary	- No. 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	
	14	Land, buildings, and equipment: basis			
		equipment: basis Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the	1		
		instructions. Also, see page 1, item I)	680,923.	691,645.	691,645.
_	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ş	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
豆	21	Mortgages and other notes payable (attach schedule)			
=======================================	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)			
-		Foundations that follow SFAS 117, check here			
	İ	and complete lines 24 through 26 and lines 30 and 31.			
Š	١	•	1		
ខ្ព	24	Unrestricted			
ala	25	Temporarily restricted	<u> </u>		
ä	26	Permanently restricted	ļ		
Fund Balances		Foundations that do not follow SFAS 117,			
Ē		check here and complete lines 27 through 31. ► X	•	}	
	27	Capital stock, trust principal, or current funds	<u> </u>	<u></u>	
ssets	28	Pald-in or capital surplus, or land, bldg , and equipment fund	<u></u>		
Ass	29	Retained earnings, accumulated income, endowment, or other funds			THE CHAIR TO THE TANK THE TRANSPORT
Net	30	Total net assets or fund balances (see page 17 of the	500 000	601 645	
Ž	1	instructions)	680,923.	691,645.	
	31	Total liabilities and net assets/fund balances (see page 17		}	
_		of the instructions)	680,923.	691,645	对我们的现在分词
_		IF Analysis of Changes in Net Assets or Fund			
1		al net assets or fund balances at beginning of year - Part			
	end	of-year figure reported on prior year's return)		1	680,923.
2	Ente	er amount from Part I, line 27a er increases not included in line 2 (itemize) ATTAC lines 1, 2, and 3		2	-192,045.
3	Oth	er increases not included in line 2 (itemize) ▶ATTAC	HMENT 4	3_	470.
4	Add	lines 1, 2, and 3		4_	489,348.
5	Dec	lines 1, 2, and 3 reases not included in line 2 (itemize) ► ATTAC	HMENT 5	5	-202,297.
6	Tota	al net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b), line 30 6	691,645.
					Form 990-PF (2009)

• •	d describe the kind(s) of property sold (rick warehouse; or common stock, 200	· ·	acquired P-Purchase	(c) Date	(d) Date sold (mo., day, yr.)
1a SEE PART IV SCHE		Siis. MLC Co.)	D-Donation	(mo., day, yr.)	
b		····			
c					
d					
6					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
a					
b					
c					_
d					
0					
Complete only for assets s	howing gain in column (h) and ow	ned by the foundation on 12/31/69	(1)	Gains (Col. (h) g	ain minus
(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	col.	(k), but not less Losses (from co	than -0-) or
а					
b					
С					
d					
е		<u> </u>		··	
2 Capital gain net income of	r (not cantal loce)	f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		125.
If gain, also enter in Part I	i, line 8, column (c) (see pages 13 line 8.	and 17 of the instructions).	3		-94,734.
		uced Tax on Net Investment Inc			3177011
	the section 4942 tax on the distri not qualify under section 4940(e)	butable amount of any year in the b	ase perio	d?	Yes X No
			oforo mod		
(a)	·	r; see page 18 of the instructions be	etore mak	(ing any entries. (d)	•
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution r	
2008	215,818.	0.	<u> </u>	(col. (b) divided by	0.000000
2007	136,037.	0.			0.000000
2006	157,220.	0.			0.000000
2005	132,269.				0.000000
2004	149,433.	0.			0.000000
2 Total of line 1, column (d	í)		2		0.000000
	for the 5-year base period - divid	e the total on line 2 by 5, or by the	[
number of years the four	ndation has been in existence if les	ss than 5 years	3	·	0.000000
4 Enter the net value of no	ncharitable-use assets for 2009 fro	om Part X, line 5	4		0.
5 Multiply line 4 by line 3			5		0.
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		124.
7 Add lines 5 and 6	• • • • • • • • • • • • • • • • • • • •		7		124.
8 Enter qualifying distributi	ons from Part XII, line 4	in Part VI, line 1b, and complete t	8		109,743.
If line 8 is equal to or g Part VI instructions on pa	reater than line 7, check the box ge 18.	in Part VI, line 1b, and complete t	hat part	using a 1% ta	x rate. See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	page	18 of	the ins	tructio	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	機能	的被			第一個
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)	的 经工作		STATES TO		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			1	24.
	here X and enter 1% of Part I, line 27b					NAME
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%		源器			
	of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				
3	Add lines 1 and 2	3			1	24.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0	5	iden li emitini	lacitation of	<u>. 17 52 37 - 3</u>	24.
6	Credits/Payments: 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 400.					3
	2009 estimated tax payments and 2000 overpayment credited to 2009,					
	Exemplification organizations tax within et al. source					300
С.	Tax paid with application for extension or time to the (Form 6000)					
d ~		建筑	統制的			100.
7	Total credits and payments. Add lines 6a through 6d	7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				276.
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2010 estimated tax 276. Refunded	10				. 70.
	t VII-A Statements Regarding Activities	11				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it		機能	Yes	No
	participate or intervene in any political campaign?			1a	103	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 1					
-	of the instructions for definition)?			1 b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material				1000	
	published or distributed by the foundation in connection with the activities.	-				
С	Did the foundation file Form 1120-POL for this year?			1 c	A446	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		• • •		WAS:	1
	(1) On the foundation ▶\$(2) On foundation managers. ▶\$			1000		
8	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp	osed		A STATE OF THE STA	THE WAY	
	on foundation managers. > \$			E A		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			. 2		Х
	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, article	es of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		. 	. 3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			. 4a		Х
b				. 4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			. 5	(HERMEDHAM	X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or			000		
	By state legislation that effectively amends the governing instrument so that no mandatory directions					X
_	conflict with the state law remain in the governing instrument?			. 6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and		<i>KV</i>	. 7	**********	1.54539
8 a	instructions) ► MA,					
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	-		-		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			. 8b	X 3 Openium	1.755.3
9	Is the foundation claiming status as a private operating foundation within the meaning of section 49	٠,,,,	,	E.E.	A STATE OF THE STA	
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV	on p	age			,,
	27)? If "Yes," complete Part XIV			. 9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule In names and addresses	sting t	heir	10		x

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Par	t VIFA Statements Regarding Activities (continued)	· — —.		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	Į		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		<u> </u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u> </u>
13		13	Х	
	Website address N/A The books are in and RICHARD G. HAMERMESH Talanta S. Marketter S. Markette		⊼ε	
14	The books are in care of Parameter and the care of Parameter and Parameter			
	Located at S3 WOODLAND ROAD NEWTON, FIA ZIP+4 D2100			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	• • •	•	
Par	and enter the amount of tax-exempt interest received or accrued during the year			
للثير	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	No.	Yes	No
12	During the year did the foundation (either directly or indirectly):		AND THE	1200
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?		100000	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		逐劉	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	COLD IN		国
	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			Pin
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	製機		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	Large Street	X
	Organizations relying on a current notice regarding disaster assistance check here			阿斯克
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1883	ALL THE	
	were not corrected before the first day of the tax year beginning in 2009?	1 c	D. C. NO.	X SULTERED
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		136	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	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			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	32		X
	to all years listed, answer "No" and attach statement - see page 20 of the instructions.)	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.			
3.2	Did the foundation hold more than a 2% direct or indirect interest in any business			
Ja	enterprise at any time during the year?			
h	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.)	3 b	L	X
4a		4 a		X
b				
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?			Х

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Par	t VII-B Statements Regarding Activities fo	r Which Form 4	720 May Be Requi	ired (continued)	
5 a	During the year did the foundation pay or incur any amour	nt to:			[6] [6] [6] [6] [6] [6] [6] [6] [6] [6]
	(1) Carry on propaganda, or otherwise attempt to influen		4945(e))?	Yes X N	
	(2) Influence the outcome of any specific public election	(see section 4955); o	r to carry on,		逐制認計運動
	directly or indirectly, any voter registration drive?			Yes X N	•
	(3) Provide a grant to an individual for travel, study, or oth	er similar purposes?			APPEAR THE STEEL ATTECTED
	(4) Provide a grant to an organization other than a charit				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (Yes X N	
	(5) Provide for any purpose other than religious, charitat				
	purposes, or for the prevention of cruelty to children or			Yes X N	
h	If any answer is "Yes" to 5a(1)-(5), did any of the transa				
	Regulations section 53.4945 or in a current notice regard	•	•		5b X
	Organizations relying on a current notice regarding disast			· —	THE PROPERTY AND A STATE OF THE PARTY.
С	If the answer is "Yes" to question 5a(4), does the founda	•		Yes X N	
	because it maintained expenditure responsibility for the gr			res N	
	If "Yes," attach the statement required by Regulations sect				ERECTOR AND AND ASSESSED.
6 a	Did the foundation, during the year, receive any funds, d			□, □.	
	on a personal benefit contract?	· ·		Yes X N	
p	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a	personal benefit contrac	ot?	6b X
	If "Yes" to 6b, file Form 8870.				
	At any time during the tax year, was the foundation a par	-	•		
	If yes, did the foundation receive any proceeds or have a				7b X
Pa	t VIII Information About Officers, Directors and Contractors	, Trustees, Foun	dation Managers,	Highly Paid Emp	loyees,
1	List all officers, directors, trustees, foundation m	anagers and their		page 22 of the inst	ructions).
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
				Ì	
<u>AT</u>	TACHMENT 6		-0-	-0-	-0-
				i	
					<u> </u>
				Ì	
2	Compensation of five highest-paid employees (ot if none, enter "NONE."	her than those inc	luded on line 1 - se	e page 23 of the ins	structions).
,	a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expense account,
,,	if Hame and address of each employee paid more than 400,000	hours per week devoted to position	(c) compensation	plans and deferred compensation	other allowances
				Compensation	
					
					
)			
					
		 			
		}		<u> </u>	
T	al number of other employees and average 000	l	L	l	NONE
Ot	al number of other employees paid over \$50,000 .	• • • • • • • • • • • • • • • • • • •			NONE

Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	n Managers, Highly Paid Emplo	yees,
3 Five highest-paid independent contractors for professional services (see pa	ge 23 of the instructions). If none.	enter "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		į
	<u> </u>	
Total number of others receiving over \$50,000 for professional services	<u></u>	▶ NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statist of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ical information such as the number	Expenses
1 NONE		
2		
3		
4		:
		!
Part IX-B Summary of Program-Related Investments (see page 23 of t Describe the two largest program-related investments made by the foundation during the tax year on II.	he instructions)	
	nes i and 2	Amount
1 NONE		
		•
3		-
2		
All other program-related investments. See page 24 of the instructions	-	
3 NONE		

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the instructions.)	gn foundations,
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
b	Average of monthly cash balances	1b
С		1c 0.
d	Total (add lines 1a, b, and c)	1d 0.
0	Reduction claimed for blockage or other factors reported on lines 1a and	
	1c (attach detailed explanation)	
2	Acquisition indebtedness applicable to line 1 assets	2 0.
3	Subtract line 2 from line 1d	3 0.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25	
	of the instructions)	0.
5		5 0.
6	Minimum investment return. Enter 5% of line 5	
_	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ ☐ and do not complete this	ate operating
1	Minimum investment return from Part X, line 6	0.
2 a		
b	Income tax for 2009. (This does not include the tax from Part VI.) 2b	**************************************
С	Add lines 2a and 2b	2c 124.
3	Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1	3 -124.
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5 -124.
6	Deduction from distributable amount (see page 25 of the instructions)	6
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	
	line 1	7
Pε	art XII Qualifying Distributions (see page 25 of the instructions)	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 109,743.
b	Program-related investments - total from Part IX-B	1b 0.
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	
	purposes	0.
3	purposes Amounts set aside for specific charitable projects that satisfy the:	
а	Suitability test (prior IRS approval required)	3a 0.
b	Cash distribution test (attach the required schedule)	3b 0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 109,743.
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 (see page 26 of the instructions)	5 124.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v	whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years.	

Form 990-PF (2009)

_	rt-XIII- Undistributed Income (see pag	e 26 of the instructio	ns)		
	Distributable assessment for 2000 from Doct VI	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
7	Distributable amount for 2009 from Part XI, line 7	Corpus Water State of the Corpus	WAS THE TANK		0.
2	Undistributed income, if any, as of the end of 2009:				
а	Enter amount for 2008 only	2003 12000 2000 2000		O.	
b	Total for prior years: 20 07 ,20 06 ,20 05		U.	THE THE THE THE TANK TO THE TA	TO THE SECOND OF
3	Excess distributions carryover, if any, to 2009: From 2004				1000年1000年1000年100日 1000年100日 - 100日 1000年100日 - 100日 - 1
a h	From 2005 1 132 · 743 ·	The same and the same and the			
c	From 2006 100,020				
d	From 2007	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]			
8	From 2008				
f	Total of lines 3a through e	793,322.		E-STATE SPANIE SERVICE	
4	Qualifying distributions for 2009 from Part XII, line 4: \$ 109,743.				
	Applied to 2008, but not more than line 2a		TO STATE OF THE PERSON AND ADDRESS AND ADD		
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)		REPLETATION, TRANSPORT SCHOOL HANDEN		
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
đ	• • • • •	100 743		Charles and Charles and Charles	0.
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2009	109,743.	PORT SET THE STATE OF SET		0
5	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	903,065.	表现是否定任务等的	CONTRACTOR OF THE SAME OF THE	ENERGY WAS ACTED TO
þ	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				
d	Subtract line 6c from line 6b. Taxable		0.		
9	amount - see page 27 of the instructions Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see page 27 of the instructions			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) (see page 27 of the				
8	instructions)	t	A MANUSCRIPT OF THE PROPERTY O		
9	Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	753,632			
10	Analysis of line 9:				· · · · · · · · · · · · · · · · · · ·
а	Excess from 2005 132,743				
þ	126 070				
c ب	Excess from 2007	- 14 Part 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The second second		Managara Carona Caral
	Excess from 2008				
		Termanistranistration of the Physics	LEAST EXC. W. D. J. P. CAR SAND, C. C. S. S.	THE THE PROPERTY SOUTHERS	Form 990-PF (2009)

Pa	rt XIV Private Oper	<u>ating Foundations (</u>	see page 27 of the	instructions and Par	rt VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has a	eceived a ruling or de	etermination letter tha	t it is a private opera	ating	
	foundation, and the ruling	j is effective for 2009, er	nter the date of the ruling		. •	
b	Check box to indicate wh				4942(j)	(3) or 4942(j)(5)
2-	Enter the leaser of the or	Tax year		Prior 3 years	<u> </u>	
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	I or the minimum investment			-		
	return from Part X for each year listed					
h	85% of line 2a					
~	Qualifying distributions from Part					
·	All, line 4 for each year listed ,			į		
ď	Amounts Included in line 2c not					
	used directly for active conduct					
e	of exempt activities					i
_	directly for active conduct of				İ	
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
_	"Assets" alternative test - enter					
а	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed	1				
С	"Support" alternative test - enter	<u> </u>				· · · · · · · · · · · · · · · · · · ·
	(1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on secunties					
	loans (section 512(a)(5)),					
	or royalties) (2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942					
	()(3)(B)(iii)					
	port from an exempt					
	organization					<u> </u>
P:		ary Information (C	omplete this part	only if the found	ation had \$5,000	or more in assets
		during the year - se				
1	Information Regardin	g Foundation Manage	rs:			
а	List any managers of					ed by the foundation
	before the close of any	y tax year (but only if t	ney have contributed	more than \$5,000). (S	ee section 507(d)(2).)	
	RICHARD G.	HAMERMESH				
b	List any managers of	the foundation who	own 10% or more o	f the stock of a corp	oration (or an equally	large portion of the
				n has a 10% or greate		
_	NONE					
2	Information Regarding	g Contribution, Gran	t, Gift, Loan, Scholars	hip, etc., Programs:		
				to preselected chari		
				grants, etc. (see page	28 of the instruction	ns) to individuals or
_		ther conditions, compl				
a	The name, address, a		of the person to who	m applications should b	e addressed:	
	ATTACHM					
b	The form in which app	olications should be su	bmitted and informati	on and materials they	should include:	
	LETTER					
_	Any submission dead	lings:				
C	Tury Submission dead:	ni 163.				
_	NONE		<u> </u>			
d	Any restrictions or to factors:	imitations on awards	, such as by geogr	aphical areas, charita	able fields, kinds of	institutions, or other
	= '	501 (C)(3) ORG	ANIZATION OR C	HARITABLE ORGAN	NIZATION	
JS/						Form 990-PE (2000)

Part XV Supplementary Information (C 3 Grants and Contributions Paid Du	continued)	oved for F	uture Payment	
Recipient	If recipient is an individual,	Foundation		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year			\	
AMMACIMENT O				
ATTACHMENT 8	ļ			
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		<u> </u>		
Total			<u> ▶</u> 3a	109,743
b Approved for future payment				
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	amounts unless otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt function income
Program	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions.)
a						
b	- 					
c						
d						
θ				ļ <u>-</u>		
f		ļ		ļ <u>.</u>		
g Fees	and contracts from government agencies					
Members	hip dues and assessments			ļ		
	n savings and temporary cash investments		L		00.007	
	s and interest from securities	ESTABLE OF OUR PROS	A CONTRACTOR OF THE PROPERTY O	14	22,037.	হিলাব ক্রেটির ক্রিটের নির্মান ক্রিটের করে। বিশ্ববিদ্যালয় ক্রিটের ক্রেটের ক্রেটির ক্রেটির ক্রেটির ক্রেটির ক্রেটির ক্রেটির ক্রেটির ক্রেটির ক্রেটির ক্রেটির
	al income or (loss) from real estate:	2.13.20.00	是各位企业等。 電影視點 物學	"你们我们的		
	-financed property	<u> </u>		 		
	debt-financed property			 		
	income or (loss) from personal property					
	vestment income			1.0	04 734	
	oss) from sales of assets other than inventory	 		18	-94,734.	
Net incor	me or (loss) from special events					
-	ofit or (loss) from sales of inventory	<u> </u>		 		
Other rev	/enue: a			ļ		
b		<u> </u>		 		
c				· 		
d				- 		
θ		ACTOR SACRED AND SOLES		an "e no ara tragan	70 607	
	. Add columns (b), (d), and (e)		i		-72,697.	İ
					·	70 607
					13	-72,697
ee worksh art XVI-	neet in line 13 instructions on page 28 Relationship of Activities Explain below how each activities	to verify calc s to the Ac rity for whi	ulations) ccomplishment of Exich income is reported	cempt Purp	ooses n (e) of Part XVI-A cor	ntributed importantly
e worksh art XVI-	Relationship of Activities	to verify calc s to the Ac rity for whi	ulations) ccomplishment of Exich income is reported	cempt Purp	ooses n (e) of Part XVI-A cor	ntributed importantly
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e worksh art XVI- ne No.	Relationship of Activities Explain below how each activities the accomplishment of the form	to verify calc s to the Ac rity for whi	ulations) ccomplishment of Exich income is reported exempt purposes (o	tempt Purp d in column other than	ooses n (e) of Part XVI-A cor	ntributed importantly
e worksh art XVI- ne No.	Relationship of Activities Explain below how each activities the accomplishment of the form	to verify calc s to the Ac rity for whi	ulations) ccomplishment of Exich income is reported exempt purposes (o	tempt Purp d in column other than	ooses n (e) of Part XVI-A cor	ntributed importantly
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ee worksh art XVI- Ine No.	Relationship of Activities Explain below how each activities the accomplishment of the form	to verify calc s to the Ac rity for whi	ulations) ccomplishment of Exich income is reported exempt purposes (o	tempt Purp d in column other than	ooses n (e) of Part XVI-A cor	ntributed importantly
ee worksh art XVI- Ine No.	Relationship of Activities Explain below how each activities the accomplishment of the form	to verify calc s to the Ac rity for whi	ulations) ccomplishment of Exich income is reported exempt purposes (o	tempt Purp d in column other than	ooses n (e) of Part XVI-A cor	ntributed importantly
ee worksh art XVI- Ine No.	Relationship of Activities Explain below how each activities the accomplishment of the form	to verify calc s to the Ac rity for whi	ulations) ccomplishment of Exich income is reported exempt purposes (o	tempt Purp d in column other than	ooses n (e) of Part XVI-A cor	ntributed importantly

Par	t XVII	Information F Exempt Orga		ransfers To an	d Transa	ctions ar	nd Relation	onships W	ith No	nch	arit	able
1 a	in sec	ne organization directly stion 501(c) of the Co zations? ers from the reporting fo	ode (other than	section 501(c)(3) (organizations				litical 📳		žŽ.	No
		sh								a(1)		X
		her assets	. .						1	a(2)	<u>ጎ ፕ</u> ኛ ፖ	X
þ		transactions:									能出	
		les of assets to a nonch								b(1)		<u> </u>
		rchases of assets from								b(2)		X
		ental of facilities, equipm								b(3)		X
		eimbursement arrangeme								b(4)		X
		ans or loan guarantees										X
		erformance of services o										$\frac{\lambda}{X}$
		g of facilities, equipmen									-!	
a		answer to any of t of the goods, other						•				
		in any transaction or										
	vaiue	in any transaction of	Silating arran	genient, snow in co	Julian (u) u	ie value u	i iiie goods	, other asset	s, UI 5	SI VICES	160	æiveu.
(a) L	ine no	(b) Amount involved	(c) Name of	nonchantable exempt org	anization	(d) Descri	ption of transfe	rs, transactions, a	and shann	g arran	geme	nts
		N/A				N/A	·				<u> </u>	
							·					
					,							
,												
				·····								
								-				
								<u>-</u>				
	sectio	l foundation directly or n 501(c) of the Code (other, complete the following	ner than section	· ·	•	nore tax-exe	empt organiz	ations describ	ed in	Yes	; []	No
		(a) Name of organizatio	n	(b) Type of	organization		(0	c) Description of	relationsh	ip		
				1-2-								
												
				ļ								
							 					
	belief,	penalties of perjury, I declir is true, correct, and com	plete. Seclaration	of preparer (other than t	axpayer or fidu	nying schedu iciary) is base	ed on all inform	nation of which	preparer	my kn	y kno	ge and wledge
976	S	gnature of officer or trustee			ı	Date		Titlé				
Sign Here	Pald Preparer's Use Only	Preparer's signature	CAS A.	l ener	Date	010	Check if self-employe	ed Dun pag	parer's id aber (See a 30 of th 00951	Signat e instru	ure o	
	Paid repare Ise On	Firm's name (or yours if				<u>. </u>			35669			
	ح ت	self-employed), address		HESTNUT STREE	T							

Form 990-PF (2009)

Phone no. 781-646-4000

02476

self-employed), address, and ZIP code

ARLINGTON, MA

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME Date Date sold Kind of Property Description acquired Depreciation allowed/ allowable Gross sale Cost or FMV Adj. basis Excess of Gain FMV over adj basis price less other as of as of Of expenses of sale basis 12/31/69 12/31/69 (loss) TOTAL CAPITAL GAIN DISTRIBUTIONS 125. 125. TOTAL GAIN(LOSS)

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

ADJUSTED NET INCOME	8,922.	8,922.
NET INVESTMENT INCOME	8,922.	8,922.
REVENUE AND EXPENSES PER BOOKS	8,922.	8,922.
		TOTALS
DESCRIPTION	INVESTMENT FEES	

- TAXES PART I FORM 990PF,

ADJUSTED NET INCOME	125. 558.	683.
NET INVESTMENT INCOME	125. 558.	683.
REVENUE AND EXPENSES PER BOOKS	125. 558.	683.
		TOTALS
DESCRIPTION	STATE ANNUAL FILING FOREIGN TAXES	

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

OTHER STOCK & BOND INVESTMENTS

ENDING BOOK VALUE

691,645. ENDING

691,645.

691,645.

691,645.

TOTALS

PAGE 19

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

NONTAXABLE DISTRIBUTIONS

470.

TOTAL

470.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

FEDERAL TAXES

325.

UNREALIZED (GAINS) / LOSSES, NET

-202,622.

TOTAL

-202,297.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 6

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

RICHARD G. HAMERMESH 33 WOODLAND ROAD NEWTON, MA 02166

TRUSTEE

LORIE A. HAMERMESH

33 WOODLAND ROAD NEWTON, MA 02166

TRUSTEE

GRAND TOTALS

9

ATTACHMENT

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

RICHARD HAMERMESH 33 WOODLAND AVENUE NEWTON, MA 02166

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	DURING THE YEAR		ATTACHMENT 8
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NEWTON SCHOOLS FOUNDATION	NONE CHARITABLE	CHARITABLE	10,000.
MUSEUM SCHOOL OF THE MUSEUM OF FINE ARTS	NONE CHARITABLE	CHARITABLE	30,000.
TEMPLE SHALOM OF NEWTON	NONE CHARITABLE	CHARITABLE	5,368.
AIDS ACTION	NONE CHARITABLE	CHARITABLE	.000
ENDEAVOR GLOBAL	NONE CHARITABLE	CHARITABLE	5,000.
JOEY FUND/CYSTIC FIBROSIS	NONE CHARITABLE	CHARITABLE	1,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	DURING THE YEAR	ATTA	ATTACHMENT 8 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PLANNED PARENTHOOD	NONE CHARITABLE	CHARITABLE	500.
AMERICAN HEART ASSOCIATION	NONE CHARITABLE	CHARITABLE	. 800.
ARNESTY INTERNATIONAL	NONE CHARITABLE	CHARITABLE	250.
AMERICAN INSTITUTE FOR CANCER RESEARCH	NONE CHARITABLE	CHARITABLE	250.
ISLAND AFFORDABLE HOUSING FUND	NONE	CHARITABLE	9,000.

5,000.

CHARITABLE

NONE CHARITABLE

MARTHA'S VINEYARD HEBREW CENTER

CHARITABLE NONE

ATTACHMENT 8 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JEWISH COMMUNIY HOUSING FOR THE ELDERLY	NONE CHARITABLE	CHARITABLE	26,500.
COMBINED JEWISH PHILANTHROPIES	NONE CHARITABLE	CHARITABLE	. 200
марр	NONE CHARITABLE	CHARITABLE	250.
ALZHEIMER'S ASSOCIATION	NONE CHARITABLE	CHARITABLE	.000
Interfaithfamily.com	NONE CHARITABLE	CHARITABLE	2,000.
AMERICAN CANCER SOCIETY	NONE CHARITABLE	CHARITABLE	500.

7:10:29 AM

FORM 990PF. PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PURPOSE OF GRANT OR CONTRIBUTION

CHARITABLE

250.

2,000.

500.

1,975.

500.

CHARITABLE

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

HABITAT FOR HUMANITY

CHARITABLE

NONE

CHARITABLE

NONE

MARTHA'S VINEYARD HOSPITAL

NEWTON WELLESLEY HOSPITAL

CHARITABLE

CHARITABLE

CHARITABLE

NONE

CHARITABLE

NONE

CHARITABLE

NONE

CHARITABLE NONE

ANTI-DEFAMATION LEAGUE

AMERICAN RED CROSS

TUFTS UNIVERSITY

CHARITABLE

CHARITABLE

AMOUNT

ATTACHMENT 8 (CONT'D)

200.

PAGE 27 ATTACHMENT 8

V 09-6.1

ATTACHMENT 8 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		1
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DOCTORS WITHOUT BORDERS	NONE CHARITABLE	CHARITABLE	250
JEWISH FAMILY AND CHILDREN'S SERVICES	NONE CHARITABLE	CHARITABLE	1,000.
NATIONAL CHILDREN'S CANCER SOCIETY	NONE CHARITABLE	CHARITABLE	200.
NEW ENGLAND CONSERVATORY	NONE CHARITABLE	CHARITABLE	250.
CHILMARK TOWN AFFAIRS COUNCIL	NONE CHARITABLE	CHARITABLE	2,000.
UC BERKELEY FOUNDATION	NONE CHARITABLE	CHARITABLE	2,500.

ATTACHMENT 8 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ТНЕ ХАКО	NONE CHARITABLE	CHARITABLE	500.
INSTITUTE OF CONTEMPORARY ART	NONE CHARITABLE	CHARITABLE	500.
UNCG EXCELLENCE FUND	NONE CHARITABLE	CHARITABLE	500.
BIG BROTHERS FOUNDATION	NONE CHARITABLE	CHARITABLE	1,000.
CIRCLES OF HOPE	NONE CHARITABLE	CHARITABLE	500.
TAD CHASED	NONE CHARITABLE	CHARITABLE	500.

ATTACHMENT 8 PAGE 29

109,743.

TOTAL CONTRIBUTIONS PAID

SCHEDULE D (Form 1041)

Capital Gains and Losses

➤ Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Department of the Treasury Internal Revenue Service Name of estate or trust

THE HAMERMESH FAMILY CHARITABLE FOUNDATION

Employer Identification number 04-3493147

te: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (a) Description of property (Example: 100 shares 7% preferred of *Z* Co) (b) Date acquired (mo., day, yr.) (c) Date sold (mo., day, yr.) (d) Sales price (see page 4 of instructions)		
(a) Description of property (Example: 100 shares 7% preferred of *Z* Co) (b) Date acquired (c) Date sold (mo., day, yr.) (d) Sales price (e) Cost or other to (see page 4 of the instructions)		
(a) Description of property (Example: 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (d) Sales price (see page 4 of tinstructions)		
	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
		
Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b	1b	8,039
Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	2	
Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts	3	
Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2008 Capital Loss Carryover Worksheet	4	<u>(</u>
Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13,	5	8,039
column (3) on the back	<u> </u>	
(a) Description of property (Example: 100 shares 7% preferred of "Z" Co.) (b) Date acquired (mo , day, yr.) (c) Date sold (mo , day, yr.) (d) Sales price (e) Cost or other (see page 4 of Instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
a a		
		
		-,
		1
	6 b	-102,898
Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b		
		•
Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824	8	125
Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Capital gain distributions Gain from Form 4797, Part I	9	125
Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts	8 9 10	125.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

	ule D (Form 1041) 2009				Page 2
Par	Summary of Parts I and II Caution: Read the instructions before completing this p	oart.	(1) Beneficiaries' (see page 5)	(2) Estate's or trust's	(3) Total
13	Net short-term gain or (loss)	13			8,039.
14	Net long-term gain or (loss):				
а	Total for year	14a			-102,773.
	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	14b			· · · · · · · · · · · · · · · · · · ·
	28% rate gain	14c			
15	Total net gain or (loss). Combine lines 13 and 14a	15	T. D. 444 . 443 . 45	- 44: - 146 1	-94,734.
to Pa	o: If line 15, column (3), is a net gaın, enter the gain on Form 1041, line 4 (or Fon rt V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part 	m 990 art IV a	- I , Part I, line 4a). If line and the Capital Loss Car	s 14a and 15, column ryover Worksheet, aşı	(2), are net gains, go necessary
	t IV Capital Loss Limitation				
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P		• • • • • • • • • • • • • • • • • • • •	1 1.	3 000 \
a Note	The loss on line 15, column (3) or b \$3,000 If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page	i i	ne 22 for Form 990-T li	ne 34) is a loss com	3,000.)
Carry	over Worksheet on page 7 of the instructions to figure your capital loss carryover	r.	ne 22 (0/ / 0//// 990-1, ///		
Pa					-
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu			nount is entered in I	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor				
	tion: Skip this part and complete the worksheet on page 8 of the instruc ither line 14b, col. (2) or line 14c, col. (2) is more than zero, or	uons	IT:		
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
	n 990-T trusts. Complete this part only if both lines 14a and 15 are	e gair	ns, or qualified divide	ends are included i	n income in Part I
of F	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this par				
eith	er line 14b, col. (2) or line 14c, col. (2) is more than zero.				
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4) .	17		
18	Enter the smaller of line 14a or 15 in column (2)				
	but not less than zero				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19				
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g; otherwise, enter -0 ▶ 21				
22	Subtract line 21 from line 20. If zero or less, enter -0-		22		
23	Subtract line 22 from line 17. If zero or less, enter -0-		23		
	Enter the annulus of the amount on line 47 or \$0.200				
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24				
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24	• • •	25 26		
27	Are the amounts on lines 22 and 26 the same?	• • •			
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	na 22	27		
	Too. Oxp into 27 till 00, go to lile 01	10 22			
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
				100	
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% (.15)			30	
31	Figure the tax on the amount on line 23. Use the 2009 Tax Rate			nd Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041).			31	
32	Add lines 30 and 31			32	
33	Figure the tax on the amount on line 17. Use the 2009 Tax Rate	e Sch	nedule for Estates ar		
_	(see the Schedule Ginstructions in the instructions for Form 1041)				
34	Tay on all tayable income. Enter the smaller of line 32 or line 33 i	here ·	and on Form 1041	Schodulo I	

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D
(Form 1041)

▶ See Instructions for Schedule D (Form 1041).

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

Employer Identification number 04-3493147

ame or estate or trust THE HAMERMESH FAMILY CHA			1	04-3493147	
art I Short-Term Capital Gains		ets Held One Yea	r or Less		
(a) Description of property (Example 100 sh. 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
smith barney 72710	VARIOUS	VARIOUS	43,267.	35,297.	7,970
SMITH BARNEY 40936	VARIOUS	VARIOUS	38.	27.	11
STRADDLE INCOME -					
POWERSHARES DB	VARIOUS	VARIOUS	58.		58
					1
					

1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

8,039.

Employer Identification number

	(b) Date	(-)	(d) Sales nrice	(e) Cost or other basis	
(a) Description of property (Example. 100 sh. 7% preferred of "Z" Co.)	acquired (mo , day, yr)	(c) Date sold (mo., day, yr.)	(d) Sales price (see page 4 of the instructions)	(see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (
MITH BARNEY 72710			592,872.	672,587.	-79,71
MITH BARNEY 40936	VARIOUS	VARIOUS	165,959.	189,230.	-23,27
TRADDLE INCOME -	I I I I I I I I I I I I I I I I I I I	I WAD TOWN			
POWERSHARES DB	VARIOUS	VARIOUS	88.		8
			ļ		
			<u></u>		
			 		
<u> </u>					
			-		
			-		
Total. Combine the amounts in co		<u> </u>		L	

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Form 8868

(Rev. April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury

Internal i • If y

Revenue Service	Prie a separate application for each return.	
ou are filing for a	n Automatic 3-Month Extension, complete only Part I and check this box	X
ou ore filled for a	n Additional (Not Automatic) 3-Manth Extension, complete only Part II (on page 2 of this form)	

D

				h Extension, complete only an automatic 3-month ext				8.
Part	Auto	natic 3-Month Extens	sion of Time. Only s	ubmit original (no copies	needed).		_	
A corp		equired to file Form 990-		automatic 6-month extensi		ox and compl	ete	▶ □
	•					2044-		
time to	o file inco	me tax retums.		s, REMICs, and trusts mu		·		
one o electro return	of the ref onically in is, or a co	urns noted below (6 m (1) you want the addit omposite or consolidated o details on the electroni	nonths for a corpora itional (not automatic d From 990-T. instead ic filing of this form, vi	e Form 8868 if you want tion required to file Form 3-month extension or (2) 1, you must submit the full sit www.lrs.gov/efile and cl	990-T). Howev you file Forms y completed and ick on e-file for 0	er, you canr 990-BL, 606 I signed page	not file 39, or 8 e 2 (Pai	Form 8868 8870, group t II) of Form
Type	ype or Name of Exempt Organization THE HAMERMESH FAMILY CHARITABLE FOUND Employer				Employer id			
print		CHO HAMERNESE HAMERMESHARITABLE FOUNDATION 04-3493147						
File by		Number, street, and room		, see instructions. 33 WO	OODLAND AVE	NUE		
due da		33 WOODLAND						
return.	See	•		a foreign address, see instruction	ns.			
		NEWTON, MA 0						
Che	• •	f return to be filed (file a		•		4700		
Н	Form 99		Form 990-T (corp			rm 4720		
H	Form 990			401(a) or 408(a) trust)		rm 5227		
X	Form 990		Form 990-T (trus	corner man above)	— <u>—</u> · ·	rm 6069 rm 8870		
	Form 990	-PF	Form 1041-A		F°			
• If • If for the	elephone the orga this is fo ne whole es and E	r a Group Return, enter th group, check this box. ⁾ Ns of all members the e	n office or place of buthe organization's four in the organization's four parextension will cover.	FAX No. siness in the United States, digit Group Exemption Num t of the group, check this bo	nber (GEN)	nd attach a l	If	
1 .	until			or a corporation require mpt organization return for				
	X	calendar year 2009	ог					
	▶ □	tax year beginning		, and ending				•
2	If this ta	x year is for less than 12	2 months, check reason	n: Initial return	Final return	Change in	n accou	nting period
3a		pplication is for Form 9 ndable credits. See Instru		T, 4720, or 6069, enter t	he tentative tax	less any	3a \$	NONE
b				any refundable credits and	d estimated tax	payments		
	made. Include any prior year overpayment allowed as a credit.						3ь \$	NONE
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit						0.0		
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.						em). See	3c \$	NONE
Cau			electronic fund withdr	awal with this Form 8868, s	see Form 8453-	O and Form		0
		nstructions.						

Form 8868 (Rev. 4-2009)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.