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Form 990-PF

Department of the Treasury

Internal Revenue Service

Heturn 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.

OMB No 1545-0052 2009

For calendar year 2009, or tax year beginning and ending G Check all that apply: Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS label. CAFESJIAN MUSEUM FOUNDATION, INC. 04-3658129 Otherwise. print Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number or type. 2400 9TH STREET NORTH 401 612-359-8991 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions NAPLES, FL 34103 D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation H Check type of organization: Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year | J | Accounting method: Cash X Accrual under section 507(b)(1)(A), check here (from Part II, col. (c), line 16) Other (specify) If the foundation is in a 60-month termination 18,337,334. (Part I, column (d) must be on cash basis.) **≥**\$ under section 507(b)(1)(B), check here Part | Analysis of Revenue and Expenses (b) Net investment (c) Adjusted net (d) Disbursements (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 0. Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch B ... Interest on savings and temporary cash investments 34 34 34. STATEMENT Dividends and interest from securities 11 28 STATEMENT 5a Gross rents b Net rental income or (loss) 20.5 13 - 1 6a Net gain or (loss) from sale of assets not on line 10 Revenue b Gross sales price for all assets on line 6a 江州是大大大 大事工法 **美国特别和自由** Capital gain net income (from Part IV, line 2) 0. A STATE OF STATE OF STATE 出一样作門 地流 Net short-term capital gain 中一年第二年 其一直到他几个 J. 5. 4 Income modifications 10a Gross sales less returns and allowances And the second of the second o 統治いらいた 产品的 建合物 环境 建筑 思 对外 "建筑 7,0% ,板槽 湖. b Less. Cost of good C c Gross profit or (loss) Francisco Cara **8** <432,807. 11 Other income <430, 394 <432,807 STATEMENT Total. Add lines 1 through 11 <430,349 <432,745 <432,745 Compensation of officers, directors trustees etc 0. 0 0. 0. Other employee salaries and wages 22,800 0 0. 22,800. 15 Pension plans, employee benefits 16a Legal fees STMT 4 1,472 0 0. 1,472. 5 **b** Accounting fees STMT 10,539. 0. 0. 10,539. c Other professional fees STMT 6 251,449. 1,000 0 250,449. and Administrative 17 Interest STMT 7 18 Taxes 4,418 0 0 4,418. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 25,407 0. 0 25,407. 22 Printing and publications Operating 23 Other expenses STMT 8 14,981 208 0 14,773. 24 Total operating and administrative expenses. Add lines 13 through 23 331,066. 1,208 0 329,858. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 331,066. 1,208 0 329,858. Subtract line 26 from line 12: <761,415. 2 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 0 c Adjusted net income (if negative, enter -0-) 0. LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2009)

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	8	nd of year
L.	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	<1,993.	> 2,08	6. 2,086.
		Accounts receivable ▶			
		Less: allowance for doubtful accounts	9.		
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	ı	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons			
	٦,	Other notes and loans receivable		 	
	l ′	Less: allowance for doubtful accounts			
	١,				
Assets		Inventories for sale or use			
ASS		Prepaid expenses and deferred charges			
•	l	Investments - U.S. and state government obligations			
		Investments - corporate stock			
	C	Investments - corporate bonds		4a 1	
	11	investments - land, buildings, and equipment basis	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	, wife	
	•	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 10	20,889,000.	17,625,85	0. 17,625,850.
	14	Land, buildings, and equipment basis ► 21,398.	17.1		21 , 13 - 14
		Less accumulated depreciation	21,398.	21,39	
	15	Other assets (describe ► ARTWORK)	688,000.	688,00	0. 688,000.
	16	Total assets (to be completed by all filers)	21,596,414.	18,337,33	4. 18,337,334.
	17	Accounts payable and accrued expenses	11,502.	15,94	8.
	18	Grants payable			
ģ	19	Deferred revenue			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	8,636,000.	14,210,09	8. STATEMENT 11
abi	21	Mortgages and other notes payable			3.4
⊐	22	Other liabilities (describe)			
		· · · · · · · · · · · · · · · · · · ·			
	23	Total liabilities (add lines 17 through 22)	8.647.502.	14,226,04	6.
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			4
ės	24	Unrestricted			,
auc	25	Temporarily restricted		- .	
Bal	26	Permanently restricted			
ᅙ	20	Foundations that do not follow SFAS 117, check here			-
alances 7 2		and complete lines 27 through 31.			
þ.	27	Capital stock, trust principal, or current funds	0.		<u></u>
ets		Paid-in or capital surplus, or land, bldg., and equipment fund	0.		0.
ISS	28				
et A	29	Retained earnings, accumulated income, endowment, or other funds	12,948,912.	4,111,28	· · · · · · · · · · · · · · · · · · ·
ž	30	Total net assets or fund balances	12,948,912.	4,111,28	8.
			01 506 414	40 225 22	
	31	Total liabilities and net assets/fund balances	21,596,414.	18,337,33	4.
Р	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
		net assets or fund balances at beginning of year - Part II, column (a), line	30	ļ	
		at agree with end-of-year figure reported on prior year's return)			1 12,948,912.
		amount from Part I, line 27a	•		2 <761,415.>
		r increases not included in line 2 (itemize)			3 0.
		ines 1, 2, and 3	•	į	4 12,187,497.
5	Decr	eases not included in line 2 (itemize)	SEE STA	ATEMENT 9	5 8,076,209.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h) line 30		6 4 111 288

CAFESJIAN MUSEUM FOUNDATION, INC. 04-3658129

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		MUSEUM FO						0	4-365	8129	Page 3
(a) List and desc	ribe the kind(s) of property sold (e.g.	, real estate,	. mcome	(b) i	How a	cquired chase		(c) Date acquired		te sold
2-story brick w	arehouse; or co	mmon stock, 200 shs	. MLC Co.)		<u> [</u>	- Don	ation	(mo., c	day, yr.)	(mo., d	ay, yr.)
<u>1a</u>					ļ					 	
	NE				┢			_		<u>-</u>	
d d		·			+					 	
e	· — -			· · · · · · · · · · · · · · · · · · ·							
(e) Gross sales price		eciation allowed allowable)		st or other basis expense of sale					Sain or (loss s (f) minus		
a											
b											
C											
<u>d</u>											
e Constitution of the constitution	<u> </u>		h - f d - t	40.004.000							
Complete only for assets shown		· · · · · · · · · · · · · · · · · · ·	,				(I col) Gains (((k) hiit	Col. (h) gair not less tha	n minus	
(i) F.M.V. as of 12/31/69		djusted basis of 12/31/69		cess of col. (i) col. (j), if any				Losses	(from col.	(h))	
<u>8</u>											
b c											
е											
	•	∫ If gain, also enter	in Part I. line	7	7			-			
2 Capital gain net income or (net ca	apıtal loss)	If (loss), enter -0-			<i></i>	2					
3 Net short-term capital gain or (lo	ss) as defined i	n sections 1222(5) an	d (6):								
If gain, also enter in Part I, line 8,		. ,	. ,								
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Indor Soot	tion 4040(a) for	Doduces	l Tay on Not	100	3	nont Inc				
Terror Va I							Henr Inc	onie	<u> </u>		
(For optional use by domestic privat	e toundations s	subject to the section 4	1940(a) tax on	i net investment ir	icome	9.)					
If section 4940(d)(2) applies, leave t	hıs part blank.										
Was the foundation liable for the sec	tion 4942 tax (on the distributable am	ount of any v	ear in the hase nei	rınd?					☐ Yes	X No
If "Yes," the foundation does not qua				· ·							
1 Enter the appropriate amount in					es.						
(a) Base period years		(b)			(c)				Distri	(d) bution ratio	
Calendar year (or tax year beginni	ing in) A	djusted qualifying dis		Net value of no	nchai	rıtable	-use assets			vided by col.	
2008			5,874.				2,958		 -		30503
2007			0,169.		<u>13</u>		4,774				<u>82314</u>
2006			4,570.				0,155		 		06943
2005		•	8,162.				0,786				07426
2004		4,15	5,298.			10	6,688	•	1	38.9	<u>48129</u>
2 Total of line 1, column (d)										139.4	75215
3 Average distribution ratio for the	5-vear hase ne	riod - divide the total o	n line 2 hy 5	or by the number	of ve	are		2	 	137.4	/5515
the foundation has been in existe			m mic z by o,	or by the number	OI ye	ais		3		27.8	95063
and foundation had been an extent	1100 11 1000 111011	· · ·	• •					•		2,.0	
4 Enter the net value of noncharital	ole-use assets i	for 2009 from Part X, I	ine 5					4	2	0,234	.493.
		•					•				
5 Multiply line 4 by line 3								5	56	4,442	,457.
6 Enter 1% of net investment incor	ne (1% of Part	l, line 27b)						6			0.
									}		
7 Add lines 5 and 6								7	56	4,442	<u>,457.</u>
	5								ĺ	F 45-	000
8 Enter qualifying distributions from	· ·							8	<u> </u>	5,457	,023.
If line 8 is equal to or greater than See the Part VI instructions.	ine 7, check t	he box in Part VI, line	1b, and comp	lete that part usin	g a 19	% tax	rate.				
923521 02-02-10									F	orm 990-l	2 F (2000)
											- (2000)

		-365			Page 4
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	<u>s - see</u>	ınstru	ictio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	İ			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%				0.
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				<u>0.</u>
3	Add lines 1 and 2				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	4			<u>0.</u>
6	Credits/Payments:			•	,
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 3,021.		,		. .
b	Exempt foreign organizations - tax withheld at source	•		•	٠.
C	Tax paid with application for extension of time to file (Form 8868)	1.			
d	Backup withholding erroneously withheld 6d	1 ,		, ·	
7	Total credits and payments. Add lines 6a through 6d			3,0	21.
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				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	,		3,0	21.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax				0.
_Pa	int VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		1	Yes	No
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			770	J. 2
	distributed by the foundation in connection with the activities.			1 . Carl	ر سد خوا
c	Did the foundation file Form 1120-POL for this year?		1c	S +	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•	ۇ: چ	y- '413	- N
	(1) On the foundation. \triangleright \$ 0 . (2) On foundation managers. \triangleright \$ 0 .		100		THE STATE OF
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		2. 热		1377
•	managers. > \$ 0.		136	3	The state of
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		9	"rete Em"	X
_	If "Yes," attach a detailed description of the activities.		447	No. 25	- 2 True
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		3.7	学	1.3 01.
·	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	***** ·	X
A s	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
		N/A		 -	<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	N/A	4b		-
•	If "Yes," attach the statement required by General Instruction T.		5	2.3	X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1 . 1	-	İ
U	By language in the governing instrument, or			٠.	
	, , ,				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			32	ŀ
,	·		6	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
٥.	If "Yes," complete Part II, col. (c), and Part XV.		'		- '
ва	Enter the states to which the foundation reports or with which it is registered (see instructions)			` '	
	FL				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			!	
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar				-
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	<u>X</u>	<u> </u>
10	Did any persons become substantial contributors during the tay year? If "Year" attach a separtial listing their persons and addresses		1 40	, ,	! Y

	1 990-PF (2009) CAFESJIAN MUSEUM FOUNDATION, INC. 04-3658 Output VII-A Statements Regarding Activities (continued)	129	·	Page 5
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12_		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_	_X	<u> </u>
	Website address ► <u>WWW.CMF.AM</u>			
14	The books are in care of ► GERARD CAFESJIAN Telephone no. ► 612-35		<u>991</u>	
	Located at ► 15 S. 5TH ST, SUITE 900, MINNEAPOLIS, MN ZIP+4 ► 55	402	_	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· []
_	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	<u>/A</u>	
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		<u>Yes</u>	No
18	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?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)], .
	a disqualified person? X Yes No			,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	-		3
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Γ. Ι	•	-
	(5) Transfer any income or assets to a disqualified person (or make any of either available		. 47	
	for the benefit or use of a disqualified person)?]	٠,٠	3
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1	تائيات	
	If the foundation agreed to make a grant to or to employ the official for a period after	T.+;	ر موريس	2.
	termination of government service, if terminating within 90 days.)	·	, v '4" ,	
ł	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	, ,	des de la	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1 _b	7. JE	X
	Organizations relying on a current notice regarding disaster assistance check here	45 . Tak	Sale I	, j. 1
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	e vie		至一连
•	before the first day of the tax year beginning in 2009?	1c	4 - 1.2	X
9	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	. L. E. E.		
_	defined in section 4942(j)(3) or 4942(j)(5)):	S . 1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	多新
	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	100	25° 25'	語
•	before 2009? Yes X No	15	11.25°	
	If "Yes," list the years			1.4
		1		*
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			1. J.
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	<u> </u>	T.	
	statement - see instructions.) N/A	2b		
(: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	i ·	•	֥ '
	Delth found to be the section of the			
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		;	. '
_	during the year?	ľ l	1	1"
t	o 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		<u> </u>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		\mathbf{x}

4b X Form **990-PF** (2009)

Form 990-PF (2009) CAFESJIAN MUSEUM FOUNDAT			04-36581	29 Page 6
Part VII-B Statements Regarding Activities for Which F	-orm 4720 iviay be i	required (contin	uea)	
5a During the year did the foundation pay or incur any amount to:			I	l i
(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); o	r to carry on, directly or indire		- F	
any voter registration drive?	•	•—	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es [X] No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		X Y	es L No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t		1	
the prevention of cruelty to children or animals?		Ye	es 🗶 No 📗	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	der the exceptions described	n Regulations	1	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		[5b X
Organizations relying on a current notice regarding disaster assistance check h	ere			1.54
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined		- 34 (36 f) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 494	 5-5(d).	. —		, B.
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •		}	na .
a personal benefit contract?	pay promisino on		es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?		- [6b X
If "Yes" to 6b, file Form 8870.	orsonar continuet:			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?		es X No	
		· · · · · · · · · · · · · · · · · · ·	N/A	7b
b If yes, did the foundation receive any proceeds or have any net income attribute		nogoro Highli		70
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation wa	magers, migni	y	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
4. Moreo and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	to position	enter -0-)	employee benefit plans and deferred compensation	allowances
			•	
	•			
SEE STATEMENT 12		0.	0.	0.
· '				
	1	ļ		
· · · · · · · · · · · · · · · · · · ·				
		 		
		1		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none	enter "NONE "		<u> </u>
2 Componential of the figurest paid employees (earler than those me	(b) Title, and average	Tenter Hone.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	account, other
NONE	devoted to position		compensation	allowances
NONE				
				_
		ļ		
				_
Total number of other employees paid over \$50,000			▶	0

CAFESJIAN MUSEUM FOUNDATION, INC.		<u> </u>	129 Pa	age 7
Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)	n Managers, Highly	'		
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	ce	(c) Compens	ation
GENESIS ARCHITECTURE, LLC - 4350 BAKER ROAD,	<u> </u>			—
	ARCHITECTURAL V	WORK	87,28	87.
TOM MATKOVITS				
	CONSTRUCTION N	исмт	74,43	31.
	,01101110011011			
		,		
Total number of others receiving over \$50,000 for professional services .		>		0
Part X Summary of Direct Charitable Activities				
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical	information such as the		Expenses	
number of organizations and other beneficiaries served, conferences convened, research papers produce	a, etc.			
1 SEE STATEMENT 13 ATTACHED				
			220 01	E 0
			329,85	20.
2				
		_		
3				
S				
· · · · · · · · · · · · · · · · · · ·				
4		_		
· · · · · · · · · · · · · · · · · · ·				
		\neg		
Rand X-B Summary of Program-Related Investments				
Describe the two largest program-related investments made by the foundation during the tax year on lines			Amount	
1 TO LOAN AND INVEST IN CAFESJIAN MUSEUM FOUNDAT				
ARMENIA. AN ENTITY DEDICATED TO DEVELOPING A M	MUSEUM OF			
CONTEMPORARY ART IN YEREVAN ARMENIA.		5	<u>,127,16</u>	<u>65.</u>
2				
				
All other program-related investments. See instructions.				
3				

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	8,999.
C	Fair market value of all other assets	1c	20,533,633.
d	Total (add lines 1a, b, and c)	1d	20,542,632.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	20,542,632.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	308,139.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	20,234,493.
6	Minimum investment return. Enter 5% of line 5	6	1,011,725.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	ıd certaın	
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	·
£	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	150 m	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	329,858.
b	Program-related investments - total from Part IX-B	1b	5,127,165.
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:	47.	-
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	5,457,023.
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	5,457,023.
	Note. The amount on line 6 will be used in Part V, column (h), in subsequent years when calculating whether the foundation of	unalified fo	the cection

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	Corpus	rears prior to 2000	2000	2003
line 7				0.
2 Undistributed income, if any, as of the end of 2009				<u>.</u>
a Enter amount for 2008 only			0.	
b Total for prior years:				
g vom for prior yours.		0.	•	
3 Excess distributions carryover, if any, to 2009:			``	
a From 2004				
b From 2005	1			
c From 2006	1			*
d From 2007	1			
e From 2008				
f Total of lines 3a through e	0.			黄疸
4 Qualifying distributions for 2009 from		1		4415 - 19 ⁴
Part XII, line 4: ►\$ N/A	, ·	. "/	•	
a Applied to 2008, but not more than line 2a	1 '		0.	ign.
b Applied to undistributed income of prior	* .	,	,	¿ /-4, 1.1
years (Election required - see instructions)		0.		- 14F13244
c Treated as distributions out of corpus				200
(Election required - see instructions)	0.	The state of the state of		
d Applied to 2009 distributable amount		+		0.
e Remaining amount distributed out of corpus	0.		1 1	· ALCOHOLD
5 Excess distributions carryover applied to 2009	0.	1		0.
(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	The state of the s		12 ° 7 1	
indicated below:		100	and the Trans	
& Corpus Add lines 31, 4c, and 4e Subtract line 5	i ö.		9	
b Prior years' undistributed income. Subtract	1. 河道 - 1/2 1/4 5		ر در ۱۰۰۰ موقد م	
line 4b from line 2b	A. " (1) (1) (1)	0.	الما الما الما الما الما الما الما الما	A STATE OF THE STA
c Enter the amount of prior years'	1 李 建 1000000000000000000000000000000000		The second of the	· · · · · · · · · · · · · · · · · · ·
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				1 178
assessed		0.	-	. 4
d Subtract line 6c from line 6b. Taxable				- 1 1 1 1 T
amount - see instructions		0.	~	* · · · · · -
e Undistributed income for 2008. Subtract line				•
4a from line 2a. Taxable amount - see instr.	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must		-		
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005]			
b Excess from 2006				
c Excess from 2007	_			
d Excess from 2008				
e Excess from 2009	<u> </u>			

CAFESJIAN MUSEUM FOUNDATION,

04-3658129

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Form 990-PF (2009)

Part XV Supplementary Information			04-365	3129 Page
Grants and Contributions Paid During the Y	ear or Approved for Future P	ayment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
<u> </u>	or substantial contributor	recipient		
a Paid during the year				
				·
NONE				
Total			▶ 3a	
b Approved for future payment				
		1		
NONE				
•				
		Ì		

▶ 3b

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	Exctu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		COGE		
a b	–				
	-		1	· · · · · · · · · · · · · · · · · · ·	
c	_		+-		
d	_				
e	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	34.	
4 Dividends and interest from securities			14	11.	
5 Net rental income or (loss) from real estate:	-	,		1= -	
a Debt-financed property					
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal					
property			ļ.,		
7 Other investment income			16	<435,224.	<u>0.</u>
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			-		
11 Other revenue:			01	4 020	
a MISC. INCOME			101	4,830.	
b	1				
d			 		
e	_		†		
12 Subtotal. Add columns (b), (d), and (e)		0.		<430,349.	> 0.
13 Total. Add line 12, columns (b), (d), and (e)	'				<430,349.
(See worksheet in line 13 instructions to verify calculations.)					
Relationship of Activities	to the Acc	omplishment of E	kemp	t Purposes	
Line No. Explain below how each activity for which in			Contrib	outed importantly to the accor	nplishment of
the foundation's exempt purposes (other that	in by providing tu	inds for such purposes).			
N/A					
					
		•			
					
					
					
					
					
					
		 -			
					
	-				
					
					

_						
	_					
		enalties of persury, I declare that I have examined this return, including a aplete. Degratation of preparar (other than taxpayer or fiduciary) is based				belief, it is true, correct,
	and com	Mulli k		•	HESISTANT HEBISTANT	TREASURER
;	Sı	gnature of officer or trustee	Date /	Title		
	id arer's Only	Preparer's signature	40 Cle	Date 11 //	Check if self- employed ▶	Preparer's identifying number
	Paid Preparer' Use Only	Firm's name (or yours DELOITTE TAX LLP			EIN ▶	
	r e S	d setf-employed). 50 SOUTH SIXTH STF	REET, SUITE	2800		_
		address, and ZIP code MINNEAPOLIS, MN 55	5402		Phone no.	612-397-4000
_						F 000 DE (000

FORM 990-PF INTEREST ON SAV	INGS AND T	EMPORARY C	ASH IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
NORTHERN TRUST TRADITION BANK				-		15. 19.
TOTAL TO FORM 990-PF, PART I	, LINE 3,	COLUMN A		=		34.
FORM 990-PF DIVIDEN	DS AND INT	EREST FROM	SECUR	ITIES	STATEMENT	2
SOURCE	GRO	SS AMOUNT		TAL GAINS VIDENDS	COLUMN (A)
NORTHERN TRUST		17. 11.		0.		0. 11.
TOTAL TO FM 990-PF, PART I,	LN 4	28.		0.		11.
FORM 990-PF	OTHER	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS		(B) ET INVEST- ENT INCOME	(C) ADJUSTEI NET INCON	
MISC. INCOME	•		224.> 830.	432,807.7	(432,807.7	
TOTAL TO FORM 990-PF, PART I	, LINE 11	<430,	394.>	432807.7	<u> </u>	7
FORM 990-PF	LEG	AL FEES	·		STATEMENT	4
	(A) EXPENSES PER BOOK	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
DESCRIPTION	I LIK DOOM	, 11DI(1 11()	-			
DESCRIPTION LEGAL FEES	1,47		0.	0	1,47	72.

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	10,539.	0.	0.	10,539.	
FO FORM 990-PF, PG 1, LN 16B	10,539.	0.	0.	10,539.	
FORM 990-PF (OTHER PROFES	SIONAL FEES	Si	PATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
CONSULTING FEES ARCHITECTS INVESTMENT MANAGEMENT FEES CONTRACT LABOR ENGINEERING CONSTRUCTION	80,298. 87,287. 1,000. 21,753. 86. 61,025.	0. 0. 1,000. 0. 0.	0. 0. 0. 0.	80,298. 87,287. 0. 21,753. 86. 61,025.	
FO FORM 990-PF, PG 1, LN 16C	251,449.	1,000.	0.	250,449.	
FORM 990-PF	TAX	ES	SI	ATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
STATUTORY FILING FEE PAYROLL TAXES	2,673. 1,745.	0.	0.	2,673. 1,745.	
TO FORM 990-PF, PG 1, LN 18	4,418.	0.	0.	4,418.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES' MENT INCO			
BANK SERVICE CHARGES POSTAGE AND DELIVERY SUPPLIES SHIPPING MISCELLANEOUS STORAGE EQUIPMENT RENTAL	208. 89. 57. 6,865. 4,112. 3,000. 650.		08. 0. 0. 0. 0. 0.	0. 5. 6,86 0. 4,11 0. 3,00	2.
TO FORM 990-PF, PG 1, LN 23	14,981.	2	08.	0. 14,77	73.
UNREALIZED LOSS ON VANDERBILT PRIOR PERIOD ADJUSTMENT FOR V LP	ANDERBILT F		=	7,905,00	9.
TOTAL TO FORM 990-PF, PART II FORM 990-PF	OTHER INV	VESTMENTS		8,076,20	10
DESCRIPTION	V	ALUATION METHOD	BOOK VALUE	FAIR MARKET	
VANDERBILT REAL ESTATE HOLDIN NOTE RECEIVABLE - CAFESJIAN M FOUNDATION ARMENIA - PRI		COST COST	12,498,685.	12,498,68	35.
FOUNDATION ARMENTA - FRI			5,127,165.	5,127,16	55.

NONE

FORM 990-	PF LOAN	S PAYABLE	TO OFF	ICER'S,	DIREC	CTOR'S, ETC.	STATEMENT	11
LENDER'S	NAME AND TI	TLE						
CAFESJIAN	FAMILY FOU	NDATION						
DATE OF NOTE	MATURITY DATE	INTEREST RATE	TERMS	OF REP	AYMEN'	r		
10/18/07		.00%	ON DE	MAND		-		
SECURITY	PROVIDED BY	BORROWER		PURPOS	E OF I	LOAN		
NONE				TO FUN	D OPE	RATIONS		
DESCRIPTION OF CONSIDERATION			CO	FMV OF	rion	ORIGINAL LOAN AMOUNT	BALANCE DU	ΙE
NONE				0. 2,000,000.			2,000,000.	
LENDER'S	NAME AND TI	TLE			-			
CAFESJIAN	FAMILY FOU	NDATION						
DATE OF NOTE	MATURITY DATE	INTEREST RATE	TERMS	OF REP	AYMEN'	г		
01/23/08		.00%	ON DE	MAND		_		
SECURITY	PROVIDED BY	BORROWER		PURPOS	E OF 1	LOAN		
NONE				TO FUN	D OPE	RATIONS		
DESCRIPTI	ON OF CONSI	DERATION	CO	FMV OF	TION	ORIGINAL LOAN AMOUNT	BALANCE DU	JΕ

0.

6,636,000.

6,636,000.

LENDER'S NAME AND TITLE		
CAFESJIAN FAMILY FOUNDATION		
DATE OF MATURITY INTEREST NOTE DATE RATE	TERMS OF REPAYMENT	
01/08/09 .00%	ON DEMAND	
SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN	
NONE	TO FUND OPERATIONS	
DESCRIPTION OF CONSIDERATION	FMV OF ORIGINAL CONSIDERATION LOAN AMOUNT	BALANCE DUE
NONE	0. 5,574,098	5,574,098.
TOTAL TO FORM 990-PF, PART II	, LINE 20, COLUMN B	14,210,098.
	LIST OF OFFICERS, DIRECTORS AND FOUNDATION MANAGERS	STATEMENT 12
NAME AND ADDRESS		EMPLOYEE BEN PLAN EXPENSE CONTRIB ACCOUNT
GERARD L. CAFESJIAN 2400 9TH STREET NORTH, STE 40 NAPLES, FL 34103	PRESIDENT/SECRETARY/TREASU 1 3.00 0.	RER 0. 0.
CLEO T. CAFESJIAN 2400 9TH STREET NORTH, STE 40 NAPLES, FL 34103	VICE PRESIDENT 1.00 THROUGH 12/10/2009	0. 0.
JOHN J. WATERS 2400 9TH STREET NORTH, STE 40 NAPLES, FL 34103	TREASURER/SECRETARY 3.00 THROUGH 51211209	0. 0.
DENNIS DOYLE 2400 9TH STREET NORTH, STE 40 NAPLES, FL 34103	VICE PRESIDENT	0. 0.
FR. DENNIS DEASE 2400 9TH STREET NORTH, STE 40 NAPLES, FL 34103	BOARD MEMBER 1.00 From 5 21 2009 10 12 10 2009	0. 0.

CAFESJIAN MUSEUM FOUNDATION, INC.		04-36	558129
MEGAN DOYLE 2400 9TH STREET NORTH, STE 401 NAPLES, FL 34103 BOARD MEMBER 1.00 Joines S(21)2009	0.	0.	0.
OTTO THEUER 2400 9TH STREET NORTH, STE 401 NAPLES, FL 34103 BOARD MEMBER 1.00 1.00	0.	0.	0.
GARY M. JONES 2400 9TH STREET NORTH, STE 401 NAPLES, FL 34103 ASSISTANT TREASURER 5.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII	0.	0.	0.

THE FOUNDATION HAS BEEN DEVELOPING A CENTER FOR THE ARTS IN YEREVAN, ARMENIA. IN ORDER TO FACILITATE THE CONSTRUCTION OF THE CENTER IN A FOREIGN COUNTRY. THE FOUNDATION HAS SET UP A NON-PROFIT ENTITY IN ARMENIA UNDER LOCAL LAW. THE ARMENIAN ENTITY IS FUNDED AND CONTROLLED ENTIRELY BY THE FOUNDATION. THE DIRECTORS OF THE FOUNDATION CONSTITUTE THE MAJORITY OF THE BOARD OF TRUSTEES OF THE ARMENIAN ENTITY AND HAVE THE POWER TO APPOINT AND REMOVE TRUSTEES. THE REPUBLIC OF ARMENIA HAS CONTRIBUTED TO THE ARMENIAN ENTITY LAND AND A PARTIALLY CONSTRUCTED STRUCTURE, CALLED "THE CASCADE" THAT IS COMPOSED OF A SERIES OF STEPS, TERRACES, FOUNTAINS, AND EXHIBITION SPACES ASCENDING THE HILLSIDE IS INCORPORATED IN THE ACHITECTURAL SITE. THE FOUNDATION MAKES TRANSFERS OF FUNDS TO THE ARMENIAN ENTITY TO COVER THE COSTS OF PURCHASING ADDITIONAL LAND FOR THE CENTER'S SITE; LANDSCAPING THE CENTER'S GROUNDS; REPAIRING EXISTING OUTDOOR STRUCTURES, FOUNTAINS, AND IRRIGATION SYSTEMS; DESIGNING AND CONSTRUCTING THE BUILDINGS: AND CREATING THE INTERIOR OF THE EXHIBITION SPACE TO ENSURE THAT IT IS A SUITABLE LOCATION FOR THE DISPLAY OF SCULPTURE AND OTHER ARTWORKS. ALL EXPENDITURES RELATING TO THE FOREGOING ARE SUBJECT TO THE APPROVAL OF THE BOARD OF DIRECTORS OF THE FOUNDATION. THE DIRECTORS OF THE FOUNDATION MAKE ALL DECISIONS REGARDING THE PREPARATION OF THE CENTER'S SITE; THE HIRING OF A PROJECT ARCHITECT AND CONTRACTORS; THE NEGOTIATION OF ALL CONTRACTS RELATING TO THE CREATION OF THE CENTER; AND THE CONSTRUCTION AND INTERIOR DESIGN OF THE FACILITY. THE FOUNDATION COVERS ALL COSTS OF EXHIBITING THE ARTWORKS IN THE CENTER AND PAYS FOR THE SHIPMENT, INSURANCE, INSTALLATION, MAINTENANCE, AND GENERAL CONSERVATION OF THE ARTWORKS OWNED BY THE FOUNDATION. THE FOUNDATION PROVIDES STAFF FOR THE CENTER AS REQUIRED. THE FOUNDATION ALSO ENGAGES IN OTHER CHARITABLE ACTIVITIES TO PROMOTE CONTEMPORARY ART AND ARTISTS IN THE UNITED STATES AND ABROAD. THE FOUNDATION GATHERS AND MAKES AVAILABLE INFORMATION ABOUT CONTEMPORARY ARTISTS AND ASSISTS ARTISTS IN EXHIBITING THEIR WORKS. IT ESTABLISHES AND SUSTAINS A COMMITMENT TO THE EDUCATIONAL RESOURCES NECESSARY TO FOSTER THE UNDERSTANDING OF CONTEMPORARY ART BY THE VIEWING PUBLIC AND ENHANCES THE QUALITY OF THE CULTURAL EXPERIENCE OF VISITORS TO THE MUSEUM FOUNDATION'S CENTER FOR THE ARTS THROUGH MEANINGFUL ENCOUNTERS BETWEEN THE PUBLIC, THE ARTISTS, AND THEIR WORKS.

THE CAFESJIAN MUSEUM FOUNDATION 04-3658129 **EXPENDITURE RESPONSIBILITY** FORM 990-PF, PART IX-A YEAR ENDED 12/31/2009

Name and Address of Grantee:

Primary grantee:

Address:

Cafesjian Museum Foundation of Armenia

Tamanian Street 2, Suite 48 0009 Yerevan, Republic of Armenia

Date and amount of grant:

2009 2008 2007 \$ 5,127,165 5,025,000 \$ 10,650,000 \$ 3,100,000

2005 2004 2003 2002 \$ 3,929,488 3,252,792 \$ 2,034,000 838,772

Grant purpose:

Development and continuing operational support of contemporary art museum

in Yerevan, Armenia.

Amounts expended by grantee (based upon the reports received from the grantee):

\$ 33,957,217

Has grantee diverted any portion of the funds from the purpose of the grant (to the knowledge of the Foundation):

Yes _

No X

2006

Reports received from grantee on:

12/31/2009

Visit Dates

January 2009 February 2009 March 2009 November 2009

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To . ile an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

● If yo	ou are ot comp	iling for an Automatic 3-Month Extension, complete only Part I and check this box iling for an Additional (Not Automatic) 3-Month Extension, complete only Part II (lete Part II unless you have already been granted an automatic 3-month extension on a p	on page 2 coreviously file	of this fo	orm).
Part	1	Automatic 3-Month Extension of Time. Only submit original (no copies nee	ded).		
	poratio only .	required to file Form 990-T and requesting an automatic 6-month extension—check	this box ar	nd com	plete ► □
		porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form income tax returns.	7004 to req	uest an	extension of
one of electronic return	of the reconstruction of the reconstruction	ling (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au eturns noted below (6 months for a corporation required to file Form 990-T). Hower if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms composite or consolidated Form 990-T. Instead, you must submit the fully completed and red details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file form.	ver, you ca s 990-BL, 6 d signed pa	nnot file 069, or ge 2 (Pa	8870, group art II) of Form
Туре	or	Name of Exempt Organization	Employer i	dentifica	ition number
print		CAFESJIAN MUSEUM FOUNDATION, INC.	04-3658	3129	
File by due da filing ye	the te for	Number, street, and room or suite no. If a P.O. box, see instructions. 4001 TAMIAMI TRAIL N.			
retum. instruc	See	City, town or post office, state, and ZIP code For a foreign address, see instructions. NAPLES, FL 34103-3591			
Chec	k type	of return to be filed (file a separate application for each return):			
	orm 990	_		Form 4	720
□ Fc	orm 990	D-BL		Form 5	227
□ F	orm 99)-EZ		Form 6	069
X F	orm 99)-PF		Form 8	870
If the for the formula of th	he orga his is fo ie whole	No. ► 612-359-8991 FAX No. ► nization does not have an office or place of business in the United States, check this r a Group Return, enter the organization's four digit Group Exemption Number (GEN). group, check this box ► □ . If it is for part of the group, check this box .	box	 1	f this is
a list	with th	e names and EINs of all members the extension will cover.			
	until for the ► ⊠	est an automatic 3-month (6 months for a corporation required to file For AUGUST 16 , 2010 , to file the exempt organization return for the organization organization's return for: calendar year 2009 or	named abo	ve. The	extension is
	▶ ∐	tax year beginning, 20, and ending			, 20
2	If this t	ax year is for less than 12 months, check reason: Initial return Final return [☐ Change	in acco	unting period
		application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax y nonrefundable credits. See instructions.	с, За	\$	3,021
b	If this a	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tants made. Include any prior year overpayment allowed as a credit.	x 3b	\$	3,021
С	Balanc deposi	e Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymer). See instructions.	d, nt	\$	0
Caut	ion, If v	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 84	53-EO and	Form 8	879-EO
		instructions.			

Page	2

• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and	check this	box . ► 🗵
	nly complete Part II if you have already been granted an automatic 3-month extension on a previous	usly filed For	m 8868
Part I	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Additional (Not Automatic) 3-Month Extension of Time. Only file the original (not Automatic) 3-Month Extension of Time.	O CODIAS D	eeded)
	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		tification number
Type or	The state of the s	1–36581	
print	No. 1 and 1	or IRS use on	
File by the extended		ir ins use on	ay
due date	for 4001 TAMIAMI TRAIL N.		
filing the return. Se	City, town or post office, state, and ZIP code For a foreign address, see instructions.		* * * * * * * * * * * * * * * * * * * *
instruction	The course of th		
_	type of return to be filed (File a separate application for each return):		2222
Forr			rm 6069
	n 990-BL	∐ Fo	rm 8870
	n 990-EZ		
	Do not complete Part II if you were not already granted an automatic 3-month extension on a	previously	filed Form 8868.
• The b	ooks are in the care of ▶ GERARD CAFESJIAN		
Telep	none No. ► 612-359-8991 FAX No. ►		
	organization does not have an office or place of business in the United States, check this box	x	▶ □
	is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		
	whole group, check this box ▶ □ . If it is for part of the group, check this box		
	the names and EINs of all members the extension is for.		
		10.	_
5 Fc	or calendar year 2009, or other tax year beginning ,20 , and ending		20
6 If	this tax year is for less than 12 months, check reason: Initial return Final return	Change in a	accounting period
7 St	ate in detail why you need the extension ADDITIONAL TIME IS NEEDED TO	GATHER	THE
T	NFORMATION NEEDED TO FILE A COMPLETE AND ACCURATE RET	JRN.	
	•••••••••••••••••••••••••••••••••••••••		
8a If	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		
	ss any nonrefundable credits. See instructions.	8a \$	3,021
_	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		
	timated tax payments made. Include any prior year overpayment allowed as a credit and any		
	nount paid previously with Form 8868.	8b \$	3,021
		- 	
с Ва	lance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit the FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$	0.00
		- 00 0	
Linder ne	Signature and Verification natities of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the	ne best of my i	cnowledge and belief.
it is true,	correct, and complete, and that I am authorized to prepare this form	10 2001 01 1119 1	moviedge and beller,
	Title ▶ CPA	Date ▶8/	11/2/2
Signature	Inte PCPA		
		Form	8868 (Rev 4-2009)