

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

2009

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

For calen	idar year 2009, or tax yea	r beginning,		and ending		
G Check	all that apply:	Initial return		rmer public charity	Final return	1
		Amended return	Address chang	ge L	Name change	
Use the	IRS Name of foundation				A Employer identification	n number
label.	•	RNEY FOUNDA				
Otherwi	,	ONT MANAGEM			04-6614314	
print		O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	200
or type See Spec	-: CIAL DIMEDIA	IORE CENTER			(508)279-4	1300
Instruction	ane Gity Or town, State, at		•		C If exemption application is p	
	BRIDGEWATE				D 1. Foreign organizations	s, check here
	,, <u> </u>	X Section 501(c)(3) ex			Foreign organizations me check here and attach co	omputation
	ction 4947(a)(1) nonexem		Other taxable private founda		E If private foundation sta	
	arket value of all assets at e		• —	X Accrual	under section 507(b)(1)(A), check here
-	Part II, col (c), line 16)		ther (specify)		F If the foundation is in a	
▶ \$			mn (d) must be on cash b		under section 507(b)(1	4.00
Part I	Analysis of Revenue an (The total of amounts in columecessarily equal the amoun	mns (b), (c), and (d) may not ts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grant	ts, etc., received	2,000,000.		N/A	
2		n is not required to attach Sch B			 	
3	Interest on savings and tempo cash investments	orary	7,358.	7,358		STATEMENT 1
	Dividends and interest fro	om securities	57,358.	57,358		STATEMENT 2
5a	Gross rents					
₂ b	Net rental income or (loss)				-	
62	Net gain or (loss) from sale of Gross sales price for all		<178,714.	>		STATEMENT 3
Revenue 2	assets on line 6a	<u>2,269,327.</u>	-	160 000	RECEIVED	
् हे 7	Capital gain net income (from	Part IV, line 2)		168,838	, INCOLIACO	1,,
3 1 8	Net short-term capital gai	ın			11111	
9	Income modifications Gross sales less returns	1			MAY 2 4 2010	<u> </u>
8 9 10a b	and allowances					
ζ p	Less Cost of goods sold		1		OGDEN, UT	
^	Gross profit or (loss)					
· ''	Other income	4 4	1,886,002.	233,554		
12	Total. Add lines 1 throug		52,500.	233,334		0.
13	Compensation of officers, directly of the complex of officers of the complex of the complex of the complex of the compensation of officers, directly of the compensation of officers of the compensation of the	•	52,500.			
14	Pension plans, employee	•	6,359.	0		0.
ဖွာ 15 (၁)	Legal fees	STMT 4	1,455.	0		0.
~	Accounting fees	STMT 5	2,300.	0		0.
ğ ă	Other professional fees	JIMI J	2,300.			
ш г 9 17	Interest		2,378.	2,378	•	0.
18 g	Taxes	STMT 6	6,187.	1,395		0.
Operating and Administrative Exp	Depreciation and depletion	•	679.	0		
E 20	Occupancy					
P 21	Travel, conferences, and	meetings	1,648.	0	•	0.
22	Printing and publications					
ල 23	Other expenses	STMT 7	16,018.	9,542		0.
₩ 24	Total operating and adm	· ·				1
ğ	expenses. Add lines 13 t		89,524.	13,315	•	0.
0 25	Contributions, gifts, gran	ts paid	1,106,144.			1,106,144.
	Total expenses and disb					
	Add lines 24 and 25		1,195,668.	13,315	•	1,106,144.
27	Subtract line 26 from line	: 12:				
a	Excess of revenue over exper	ses and disbursements	690,334.		 	
1	Net investment income (220,239		
923501	Adjusted net income (if n		<u> </u>	<u> </u>	N/A	Form 990-PF (2009)
323001	I HA For Drivacy Act of	and Panerwork Reduction	Act Notice see the instruc	TIONS		FOIII 330-77 (2009)

1

PATRICK CARNEY FOUNDATION

For	m 99	0-PF(2009) C/O CLAREMONT MANAGEMENT			614314 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	11,449.	438,308.	
	L	Savings and temporary cash investments	385,511.	316,784.	316,784.
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable -			
	_	Less: allowance for doubtful accounts			
	1 -	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	l _	disqualified persons			
	′	Other notes and loans receivable 2,000.	2 500	2 000	2 000
	١.	Less: allowance for doubtful accounts	2,500.	2,000.	2,000.
Assets	I -	Inventories for sale or use	2,630.	45.	45.
Ass		Prepaid expenses and deferred charges Investments - U.S. and state government obligations STMT 8	950,078.	1,680,062.	1,676,273.
-		Investments - corporate stock	930,070.	1,000,002.	1,010,213.
	1	Investments - corporate bonds			
	1 -	Investments - Land, buildings, and equipment basis			
	''	Less accumulated depreciation			
	12	Investments - mortgage loans			·
	1	Investments - other STMT 9	4,762,858.	4,364,770.	3,496,453.
	_	Land, buildings, and equipment: basis ► 1,941.	17.027000	2/302///00	0,130,130,
	14	Less accumulated depreciation STMT 10 > 679.	315.	1,262.	1,262.
	15	Other assets (describe)			
	"	,			
	16	Total assets (to be completed by all filers)	6,115,341.	6,803,231.	5,931,125.
		Accounts payable and accrued expenses	2,533.	89.	
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
=	22	Other liabilities (describe >)			
	İ				
_	23	Total liabilities (add lines 17 through 22)	2,533.	89.	
		Foundations that follow SFAS 117, check here			
w		and complete lines 24 through 26 and lines 30 and 31.			
Ş	24	Unrestricted			
aga	25	Temporarily restricted .			
Ä	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
<u>ه</u>		and complete lines 27 through 31.	0	_	
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	0.	0.	
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund	6,112,808.	6,803,142.	
et /	29	Retained earnings, accumulated income, endowment, or other funds	6,112,808.	6,803,142.	
Ž	30	Total net assets or fund balances	0,112,000.	0,000,142.	
	31	Total liabilities and net assets/fund balances	6,115,341.	6,803,231.	
Ξ				0/003/2324	
=	art				
1		I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		C 110 000
_	•	st agree with end-of-year figure reported on prior year's return)		1	6,112,808.
		r amount from Part I, line 27a		2	690,334.
		r increases not included in line 2 (itemize)		3	6,803,142.
		lines 1, 2, and 3	•	4	0.
-		eases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (h) line 30	5	6,803,142.
<u>6</u>	iuta	i net assets of fund balances at end of year (line 4 minus line 5) - Part II, col	um (v), me sv		Form 990- PE (2000)

Part IV Capital Gains and Losses for Tax on Investment Income

Page 3

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(b) D	How ac - Purc - Don	quired hase ation	(c) Date (mo., d	acquired lay, yr.)	(d) Date so (mo., day,	old yr.)		
<u>1a</u>												
<u>b</u>	SEE ATTACHED	STA	TEMENT			<u> </u>					<u> </u>	
<u> </u>						 						
<u>d</u>						-						
<u>e</u>	(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale	Ļ				ain or (loss s (f) minus		
_			(or anowabic)	pius c	Apoliso of sale				(0) piu	(1) 1111103	197	
_a _b			····									
d												
е	2,269,327.				2,100,48	9.					168,8	338.
	Complete only for assets showing	ig gain in	column (h) and owned by	the foundation	on 12/31/69					ol. (h) gain		
	(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			col.	(k), but r Losses	not less tha (from col. (1 -0-) or h)) 	
a												
<u>b</u>				<u> </u>								
_ <u>C</u>								· · · - · · ·				
<u>d</u>											1.00	
<u>e</u>						-		<u> </u>			168,8	<u> 338.</u>
2 0	Capital gain net income or (net ca	ıpıtal loss	$\begin{cases} \text{ If gain, also enter} \\ \text{If (loss), enter -0} \end{cases}$			}	2				168,8	338.
ř1	let short-term capital gain or (los f gain, also enter in Part I, line 8,			nd (6):		}				4-		
	f (loss), enter -0- in Part I, line 8 ort V Qualification U	landar 6	Section 4040(a) for	Doducod	Toy on Not		3	oont Inc		N/A		
								Tent Inc	UITIE			
(FOI	optional use by domestic private	toundati	ons subject to the section 4	494U(a) tax on	net investment in	COME	3.)					
If se	ction 4940(d)(2) applies, leave th	his part b	lank.									
Was	the foundation liable for the sect	tion 4942	tax on the distributable am	nount of any vi	ear in the base per	nd?					Yes X	₹ No
	es," the foundation does not qual				•	.00.						•
	Enter the appropriate amount in (es.					<u> </u>	
Ca	(a) Base period years alendar year (or tax year beginnii	ng in)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) ncha		use assets		Distrit (col. (b) div	(d) oution ratio ided by col. (c))
	2008			4,659.				1,530			.151	
	2007			1,795.		6	, 24	1,948	•			<u> 5075</u>
	2006			3,875.		_2		2,082				<u> 405</u>
_	2005			<u>6,759.</u>				9,051			1.537	
_	2004		2	<u>6,000.</u>	_		28	<u>5,421</u>	•	<u></u>	.091	1094
	otal of line 1, column (d)			105.5		-4			2		2.221	L371
	iverage distribution ratio for the s he foundation has been in exister	•	•	on line 2 by 5,	or by the number	ot ye	ars		3		.444	1274
4 E	inter the net value of noncharitab	ole-use as	sets for 2009 from Part X,	line 5					4_		4,254,2	204.
5 N	fultiply line 4 by line 3								5_		1,890,0	32.
6 E	inter 1% of net investment incom	ne (1% o1	Part I, line 27b)						6_		2,2	202.
	old lines 5 and 6	•	·						7		1,892,2	
	8 Enter qualifying distributions from Part XII, line 4				8		1,106,1					
II	f line 8 is equal to or greater than see the Part VI instructions.			1b, and comp	lete that part usin	g a 1	% tax ı	rate.			_, _ 0 0 , 1	<u> </u>
	C INC FAIT VI INSUBCIONS.				·			· ·			000 DE	(0000)

Form **990-PF** (2009)

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2009.)

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

923541

statement - see instructions.)

during the year?

N/A

N/A

Yes X No

2b

3b

4a

Form 990-PF (2009)

X

Form 990-PF (2009)

Total number of other employees paid over \$50,000

Part VIII Information About Officers, Directors, Trustees, Foundation Ma	nagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	· · · · · · · · · · · · · · · · · · ·	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ation such as the	Expenses
1 N/A		
2		
3		
4		
	<u> </u>	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2.	Amount
1 NONE		
		_
		0.
2		
		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3		0.
Total, And lines i tillough 3		5 .000 DE (2000)

Form **990-PF** (2009)

PATRICK CARNEY FOUNDATION C/O CLAREMONT MANAGEMENT COMPANY

04-6614314

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	4,202,912.
	Average of monthly cash balances	1b	116,077.
	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	4,318,989.
	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	4,318,989.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	64,785.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,254,204.
6	Minimum investment return. Enter 5% of line 5	6	212,710.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	212,710.
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	4,405.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	208,305.
4	Recoveries of amounts treated as qualifying distributions	4	_ 0.
5	Add lines 3 and 4	5	208,305.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	208,305.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,106,144.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
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	1,106,144.
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	1,106,144.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies f	or the section

Page 9

Part XIII Undistributed Income (see instructions) (d) (a) (b) (c) 2008 2009 Corpus Years prior to 2008 1 Distributable amount for 2009 from Part XI. 208,305. line 7 2 Undistributed income, if any, as of the end of 2009 0 a Enter amount for 2008 only b Total for prior years: 0. 3 Excess distributions carryover, if any, to 2009: 11,729. a From 2004 **b** From 2005 325,848. 738,190. c From 2006 610,009. d From 2007 595,287. e From 2008 2,281,063 f Total of lines 3a through e 4 Qualifying distributions for 2009 from Part XII, line 4: ▶\$ 1,106,144 0 a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 208.305. d Applied to 2009 distributable amount 897,839 e Remaining amount distributed out of corpus 0. 0. Excess distributions carryover applied to 2009 (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: 3,178,902 a Corpus Add lines 3f. 4c. and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0 line 4b from line 2b 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 0 assessed d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2008. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2009, Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2010 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 0 section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2004 11,729 not applied on line 5 or line 7 Excess distributions carryover to 2010 3,167,173 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: 325,848. a Excess from 2005 738,190. b Excess from 2006 610,009. c Excess from 2007 595,287. d Excess from 2008 897.839 e Excess from 2009 Form **990-PF** (2009)

the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

SEE STATEMENT 12

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form **990-PF** (2009)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year SEE ATTACHED SCHEDULE				1,106,144.
	}			
Table			D 20	1,106,144.
Total				1,100,144.
b Approved for future payment				
NONE				
				<u> </u>
Total 923611 02-02-10			<u>▶ 3b</u>	0 . Form 990-PF (2009)

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
c					
d					
e	_				
1			\bot		, ''
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	7,358. 57,358.	<u> </u>
4 Dividends and interest from securities			14	57,358.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					· · · · · · · · · · · · · · · · · · ·
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<178,714.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:		-	ŀ		
a					
b	i i				
C					
d					
e			<u> </u>		
12 Subtotal. Add columns (b), (d), and (e)		0		<113,998.	<u> </u>
13 Total. Add line 12, columns (b), (d), and (e)				13	<113,998.
(See worksheet in line 13 instructions to verify calculation	15.)				
Part XVI-B Relationship of Activitie	es to the Acc	omplishment of E	Exempt F	Purposes	
					
Line No. Explain below how each activity for which			-A contribute	ed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other	than by providing fi	unds for such purposes).			
NOT APPLICABLE					
					
	<u>-</u>				
				-	
					
					

923621 02-02-10

Form **990-PF** (2009)

Form 990-PF (2009)

C/O CLAREMONT MANAGEMENT COMPANY

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Oode (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? 1 Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (3) Rental or other other organizations (3) Rental of facilities, equipment, or other assets (3) Rental organization of the other organizations (3) Rental of facilities, equipment, and organizations (3) Rental of facilities, equipment, and organizations (3) Rental organization of the other organizations (4) Remover to any of the above "x**, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in a section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 2b If Yes, Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship (a) Rame of organization (b) Almount involved (c) Description of relationship (a) Rame of organization (b) Type of organization (which prepare has any knowledge	P	àrt XVII	Information Re Exempt Organi	garding Transfers	s To a	nd Transactions	and Relatior	nships With Nonc	haritable)	
the Code (other than section 501c)(3) organizations) or in section 527, relating to profitical organizations? 1 Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other seests (3) Sites of assects to a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (3) Purchase of assects from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental source of services or membership or fundrasing solicitations (5) Cans for foan quarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) States of the services of the services of the services or performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Nemator of services or membership or fundrasing services or servi	1	Did the orc			followin	g with any other organizat	ion described in se	ection 501(c) of		Yes	No
Transfers from the reporting foundation to a nonchardable exempt organization of (1) Cash (2) Other assets (3) Other assets (4) Other assets (5) Other assets (6) Purchases of assets from a nonchardable exempt organization (7) Select of facilities, equipment, or other assets (8) Renation facilities, equipment, or other assets (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (19) It is a solicitied to an guarantees (19) Loss or of one appearantees (19) Loss or of one appearantees (19) Loss or of one appearantees (19) It is a solicitied to the proof of the above is Yes, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services greater of the appearance of services greater of the proof of	•										
10 Other assets 16 Other assets 16 Other assets to a noncharifable exempt organization 19 City Purchases of assets from a noncharifable exempt organization 19 City 19 City City City City City City City City	а	•	, .								
(2) Other assets to a nonchartable exempt organization (1) Sales of assets to a nonchartable exempt organization (2) Purchases of assets from a nonchartable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursement arrangements (5) Loans or loan guarantes (6) Performance of services or methership or fundrasing solicitations (6) Performance of services or methership or fundrasing solicitations (7) A services of the answer to any of the above is "vis." complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services received. (a) Amount involved (b) Amount involved (c) Namount involved (c) Namount involved (c) Namount involved (c) Namount involved (d) Description of invasives, transactions, and sharing arrangements (a) Name of organization (b) Type of organization (c) Description of relationship (d) Description of relationship (e) Preparer's Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (g) Name of organization (h) Type of organization (g) Description of relationship (g) Name of organization (h) Type of organization (g) Description of relationship (g) Research of the organization of organization of which preparer has any trionivilege and build, it is but, comed. (g) Research of the organization of organization of which preparer has any trionivilege and build, it is but, comed. (g) Research of the organization organization of the proper has any trionivil			, ,						1a(1)		X
(1) Sales of assets to a nonchartable exempt organization (2) Purchases of assets from a nonchartable exempt organization (3) Rehatal of facilities, equipment, or other assets (4) Rembursement arrangements (5) Leans or loan guarantees (5) Leans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) It it an answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services opened by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangements. Show in column (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transactions, and sharing arrangements N/A 10 In Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Type of organization (c) Type of organization (d) Description of relationship 11 Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship 12 In the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 13 In Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Proposer's indentifying numbers of the perf of my knowledge and belief, it is but, correct, and complete the policy of the Code (other than section 501(c)(3)) or in section 527? 14 In Yes, "Complete the following schedule. 15 In Yes (C) Description of relationship numbers of the perf of my kn		• •	assets						1a(2)		X
19/2 Modes of assets from a noncharitable exempt organization 19/2 X	b	Other trans	actions:								
(4) Rembursement arrangements (5) Loans or loan quarantees (6) Performance of services or membership or fundraising solicitations (7) Loans or loan quarantees (8) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (10) LX (1		(1) Sales	of assets to a noncharitat	le exempt organization					1b(1)	$oxed{oxed}$	
(4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Example of facilities, equipment, making lists, other assets, or paid employees (8) If the answer to any of the above a "Yes", complete the following solicitations or services green by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services received. (9) Amount involved (1) Name of noncharitable exempt organization (1) Name of noncharitable exempt organization (2) Name of noncharitable exempt organization (3) Loads of the code (either than section 50 (i.e.) or in section 50 (i.e.) or the Code (either than section 50 (i.e.) or in section 50 (i.e.) or the Code (either than section 50 (i.e.) or in section 50 (i.e.) or the Code (either than section 50 (i.e.) or in section 50 (i.e.) or the Code (either than section 50 (i.e.) or in section 50 (i.e.) or the Code (either than section 50 (i.e.) or in section 50 (i.e.) or the Code (either than section 50 (i.e.) or in section 50 (i.e.) o					zation						
(5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Enformance of services price assets, or paid employees (8) If the answer to any of the above is Yes, Complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) Live no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description or transfers, transactions, and sharing arrangements N/A (d) Description of relationship arrangements N/A (e) Name of noncharitable exempt organization (d) Description of relationship arrangements N/A (e) Name of noncharitable exempt organization (e) Description of relationship N/A (e) Description of relationship Propare's identifying number signature of officer or trusted Date Check if Signature of officer or trusted Date Check if Signature Check if Signature Date Check i		(3) Rental	of facilities, equipment, o	or other assets							
(6) Performance of services or membership or fundrasing solicitations Sharing of facilities, equipment, making lists, other assets, or paid employees if the answer to any of the above is Yes'; complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharidable exempt organization (d) Description of transfers, transactions, and always arrangements. N/A 15		• •									
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "es," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation decended less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)) 3)) or in section 52?? (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of physic of other or trusted Date Title Check if Self- Signature of other or trusted Preparer's identifying number of physic of other or trusted Preparer's identifying number is self- signature of other or trusted LEFKOWITZ, GALFINKEL, ET AL P.C. EIN Preparer's identifying number is self- signature of the conditional physics of the physi		• •			1 4.4.					-	
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) he value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)) on section 52?? Yes X No If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of skruft individual fails that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Description of the following schedule. Title Signature of officer or trusted Date Title Preparer's identifying number signature of officers or trusted Date Title Preparer's identifying number signature of officers or trusted Date Title Preparer's identifying number signature of officers or trusted Date Title Preparer's identifying number signature of officers or trusted TEN WEYBOSSET STREET - SUITE 700											
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a] Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) description of transfers, transactions, and sharing arrangements		_		-			huave chow the fa	ur market value of the goo		L	
(a) Live no (b) Amount involved (c) Name of nonchartable exempt organization (d) Description of wansters, wansactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 1 In Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Ves X No Date Trite Preparer's identifying number and which preparer has any knowledge and belief, it is true, correct, and complete Description of tributer or trusted Date Trite Preparer's identifying number and supplying the propagation of the best of my knowledge and belief, it is true, correct, and complete Description of tributer or trusted Date Trite Preparer's identifying number and supplying the propagation of the best of my knowledge and belief, it is true, correct, and complete Description of tributer or trusted Date Trite Preparer's identifying number and supplying the propagation of the best of my knowledge and belief, it is true, correct, and complete Description of tributer or trusted Date Tritle Preparer's identifying number and supplying the propagation of the best of my knowledge and belief, it is true, correct, and complete Description of tributer or trusted Date Tritle Preparer's identifying number and supplying tributer or trusted Tritle Preparer's identifying number and supplying trusted or all information of which propagation and statements, and to the best of my knowledge and belief, it is true, correct, and the supplying number and statements and to the best of my knowledge and belief, it is true, correct, and the supplying number and statements and to the best of my knowledge and belief, it is true, correct, and the supplying number and statements and to the best of my knowledge and belief, it is true, correct, and the supplying number and statements and to the best of my knowledge and belief	•									,615,	
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of variations, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(d)) or in section 527? 1 Yes X No 1 If Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of grunt 1 of tags that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and ballet, it is true, correct, and complete Destruction of officer or trusted Signature of officer or trusted Date Tritle Preparer's identifying number signature of officer or trusted Title Preparer's identifying number in the man tay payer or fiduciary is based on all information of which preparer has any knowledge Title Preparer's identifying number in the information of the preparer has any knowledge and ballet, it is true, correct, and complete Destructions are prepared to the correct of th						o iess than ian market va	ioc in any transact	ion or snaring arrangeme	iit, siioir iii		
N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 3 If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship 1 Indian penalties of pipur 1 of plays that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, if is true, correct, and complete Decisional profile (c) the than taxpayer or fiduciary) is based on all information of which prepare has any knowledge and belief, if is true, correct, and complete Decisional profile (c) that the prepare has any knowledge and belief, if is true, correct, and complete Decisional profile (c) the Correct of the prepare is identifying number and profile (c) the correct of the prepare is identifying number and profile (c) the correct of the prepare is identifying number and profile (c) the prepare is identif	(a)					exempt organization	(d) Descrip	tion of transfers, transactions,	and sharing ar	rangeme	ents
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes	·- <i>/</i>		,			 					
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?					,						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										·	
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						<u> </u>					
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	_						<u> </u>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							 	 			
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							-				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	2.		dation directly or indirect	hy affiliated with or related	to one	or more tay-eyempt organ	nizations describe	1			
b If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjun, I deplay that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Deceration of the preparer has any knowledge Signature of officer or trustee Date Title Preparer's identifying number self-employed Rim's name (or yours) LEFKOWITZ, GARFINKEL, ET AL P.C. EIN TEN WEYBOSSET STREET - SUITE 700	20		-				nzationa describer	•	Yes	X	ON D
(a) Name of organization N/A Under penalties of partial Ideal as that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of perturbation of which preparer has any knowledge Signature of officer or trustee Date Title Preparer's signature Firm's name (or yours) LEFKOWITZ, GARFINKEL, ET AL P.C. It self-employed TEN WEYBOSSET STREET - SUITE 700	ı		, ,		2000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				-	
Under penalties of perjunt I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of many complete Declaration of the preparer has any knowledge Signature of officer or trusted Date Title	_	,,				(b) Type of organization		(c) Description of relat	ionship		
Signature of officer or trustee Date Date Signature Signa			N/A								
Signature of officer or trustee Date Date Signature Signa											
Signature of officer or trustee Date Date Signature Signa							<u></u>				
Signature of officer or trustee Date Date Signature Date Dat			/								
Signature of officer or trustee Date Date Signature Signa			-//	<u> </u>							
Signature of officer or trustee Date Date Signature Signa		Under penaltu	es of perjury, I declare that I had Declaration of perjury (other	ave examined this return, include than taxpaver or fiduciary) is t	iding acco based on	mpanying schedules and state all information of which prepare	ments, and to the be er has any knowledge	st of my knowledge and belief	, it is true, corre	∌ct,	
Firm's name (or yours LEFKOWITZ, GARFINKEL, ET AL P.C. EIN TEN WEYBOSSET STREET - SUITE 700			7111			1	,				
Firm's name (or yours LEFKOWITZ, GARFINKEL, ET AL P.C. EIN TEN WEYBOSSET STREET - SUITE 700	ø	Comment				Pata	Title	 			
Hrm's name (or yours LEFKOWITZ, GARFINKEL, ET AL P.C. EIN ► TEN WEYBOSSET STREET - SUITE 700	Ŧ	Signati				Date		Check if Pr	eparer's identif	lying nur	mber
Hrm's name (or yours LEFKOWITZ, GARFINKEL, ET AL P.C. EIN ► TEN WEYBOSSET STREET - SUITE 700	g	Pre جريد		٠١ ١١(١). [ומפצ	, ca-			, = = = = = = = = = = = = = = = = = = =		
TEN WEYBOSSET STREET - SUITE 700 address, and ZIP code PROVIDENCE, RI 02903	Ś	[OMITTO CARE	יישוו ז						
address, and ZIP code PROVIDENCE, RI 02903 Phone no. 401-421-4800		P S S H						LIN	-		
		addr						Phone no. 40	1-421-	480	0

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number Name of the organization PATRICK CARNEY FOUNDATION C/O CLAREMONT MANAGEMENT COMPANY 04-6614314 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note, Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor, Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. ___ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. ___ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2009) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Page 1 of 1 of Part I

04-6614314

Name of organization

PATRICK CARNEY FOUNDATION
C/O CLAREMONT MANAGEMENT COMPANY

ON Employer identification number

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	GOLEEN PARTNERS: PATRICK CARNEY 254 TANGIER AVENUE PALM BEACH, FL 33480	\$1,055,266. 	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	PATRICK CARNEY 254 TANGIER AVENUE PALM BEACH, FL 33480	\$944,734. 	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Oncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

PATRICK CARNEY FOUNDATION
C/O CLAREMONT MANAGEMENT COMPANY

04-6614314

(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
Part I		(see instructions)	
	SHARES OF VARIOUS STOCKS		
1			
		\$1,055,266.	11/12/09
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
ranti			
-		\$	
			<u> </u>
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
rant i			
			
(a)		(a)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I		(oo maaaanana,	
			
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(see instructions)	
			
		\$	
(2)			
(a) No.	(b)	(c)	(d)
from	(b) Description of noncash property given	FMV (or estimate)	Date received
Part I	pescription of noncasti property given	(see instructions)	Date received
			·
_			
		s	

	ses for Tax on Investment Income		La viv		
(a) List and 2-story bri	describe the kind(s) of property so ick warehouse; or common stock, 2	old, e.g., real estate, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date so (mo., day, yr.)	ld r.)
1a FIDELITY 671-66	67579 -SEE ATTAC	CHED STATEMENT		12/19/0704/03/	09
b FIDELITY 671-66				11/12/09VARIOU	
c 250,000 SHS MO	HIGHER ED LN	71122 V 11112111111		12/28/0705/04/	
d 200,000 SHS MO	HIGHER ED LN			12/28/0705/04/	
e 100,000 SHS MO	HIGHER ED LN		<u> </u>	12/28/07/05/04/	
	ION FINL SVCS			12/28/07/06/05/	
	ION TIND BYCE		 -	12/20/01/00/03/	<u>U J</u>
<u>9</u> h			 -		—
					
	 				—
					—
					—
					_
n					
0				 	_
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h (e) r) Gain or (loss) plus (f) minus (g)	_
a 251,900.	10, 000 0000	442,460.	(0)	<190,56	<u> </u>
		708,029.		359,39	<u>v.</u> >
272 222		250,000.			0.
d 250,000.		200,000.			0.
100		100,000.			0.
f 100,000.		400,000.			0.
		400,000.			<u> </u>
<u>g</u>				 	—
<u>h</u>					—
<u> </u>			 _		
<u></u>					—
<u>k</u>			<u> </u>		—
<u> </u>					
<u>m</u>		-			—
<u>n</u>					
Complete only for accets showing	g gain in column (h) and owned by	the foundation on 12/31/69	(1) Los	nage (from an) (h))	—
(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	Gains (excess	sses (from col. (h)) of col. (h) gain over col. (k), iot less than "-0-")	
2		(m)		<190,56	<u> </u>
a b		 		359,39	
· 		 			0.
d d					0.
		 			0.
et		 			0.
		 			<u>··</u>
g h		 			
1		 			
		 			
k		 			
1			·		
m -					
n .		 			
0		 			
<u> </u>				····	
2 Capital gain net income or (net cap	pital loss) { If gain, also ente If (loss), enter "-	er in Part I, line 7 0-" in Part I, line 7	2	168,83	<u>8.</u>
3 Net short-term capital gain or (los: If gain, also enter in Part I, line 8, or If (loss), enter "-0-" in Part I, line 8	column (c).	nd (6):		N/A	

Patrick Corney Foundation 2009 Form 990PF FYE 12/31/09 04-6614314

Date (Date on Check) Grantee name	Grantee Address	Debit Purpose of Grant
/ /09 BARK	PO Box 12065 Portland, OR 97212	500.00 general operations
/09 Lewis and Clark Collega	0615 SW Palatine Hill Rd. Portland, OR	500.00 general operations
1/19/09 Irish Georgian Society	115 East 89th St , Suite 3B, NY, NY 10128	500.00 general operations
2/10/09 Big Bros Big Sister of Greater New Bedford	800 Purchase St. NB, MA 02740	500.00 general operations
2/10/09 Boston College	140 Commonwealth Ave Chestnut Hill, MA 02167	1,000.00 corp membership/tax deductible
2/10/09 Campaign for Catholic Schools	143 Newbury St., Boston, MA 02116	10,000 00 general operations
2/10/09 Community Foundation for PB and Martin Counties	700 South Dixle Highway, WP8, FL 33401	1,000 00 membership/tax deductible
2/10/09 Council on Foundations	1828 L St. NW Suite 300 Washington DC 20036	610.00 dues/tax deductible
2/10/09 Friends Academy	1088 Tucker Road Dartmouth, MA 02747	1,000.00 general operations
2/10/09 Kennedy Donovan Center	1 Commercial St. Foxboro, MA 02035	1,000.00 capital improvements
2/10/09 Ufe Resources	100 River St., Braintree, MA 02184	200.00 general operations 3,000.00 programming
2/10/09 Market Ministries, Inc. 2/10/09 MGH	60 Eighth St. NB, MA 02740 165 Cambridge St., Suite 600 Boston, MA 02114	20,000 00 pilot study
2/10/09 Mission Schools International	140 Commonwealth Ave Chestnut Hill, MA 02167	200.00 general operations
2/10/09 Namasket Group	56 Bridge St., Fairhaven, MA 02719	1,000.00 general operations
2/10/09 New England Province of Jesuits	PO Box 9199 Watertown, MA 02741	5,000.00 general operations
2/10/09 Sovereign Military Order of Malta	1730 M St. NW Suite 403, Washington, DC	1,400.00 dues/tax deductible
2/10/09 Third Eye Unlimited	48 Union St. NB, MA 02740	2,000.00 general operations
2/10/09 Women's Fund	63 Union St., NB, MA 02740	1,000.00 scholarships
2/10/09 Yoga Kids, Inc	PO Box 187 Marion, MA 02738	2,500.00 general operations
2/10/09 YWCA of SE MA	20 South Sixth St. NB, MA 02740	1,000.00 general operations
2/17/09 ST Mary's Church	783 Dartmouth St. Dartmouth, MA 02748	1,000.00 general operations
3/24/09 United Way of GNB	PO Bax 7823 NB, MA 02742	10,000 00 programming
3/24/09 Southcoast Health Systems	101 Page St NB, MA 02740	20,000.00 Capital Campaign
3/24/09 Catholic Schools Foundation	260 Franklin St., Suite 630 Boston, MA 02110	12,000 00 scholarships
3/24/09 Edward Kennedy Institute	501 Capital Court NE, Suite 100 Wasington DC 20002	20,000 00 general operations 10,000 00 capacity building
3/24/09 Holy Family Holy Name School	91 Summer St. NB MA 02740	7,500.00 programming
3/24/09 Dana Farber Cancer Institute	10 Brookline Place West, 6th Floor, Brookline, MA 02445 202 Spring St Marion MA 02738	5,000.00 capacity building
3/24/09 Marion Institute 3/24/09 Junior Achievement	106 Spring St. NB, MA 02740	1,000.00 general operations
3/24/09 St. Brendan's Church	60 Turner Ave Riverside RI 02915	1,000.00 general operations
3/24/09 FINCA	PO Box 98048 Washington DC 20090	500 00 general operations
3/24/09 Community Boating Center	1641 Padnaram Ave. NB, MA 02744	500 00 camperships
3/24/D9 Community Nurse & Hospice Care	62 Center St. Flarhaven, MA 02719	500.00 general operations
3/24/09 Massachusetts Children's Alliance	14 Beacon St. Suite 505 Boston, MA 02108	1,000.00 general operations
(09 Mission Schools International	140 Commonwealth Ave Chestnut Hill, MA 02167	2,000.00 general operations
09 Nativity Prep	66 Spring St NB, MA 02740	5,000.00 scholarships
3/24/09 Town of PB United Way	PO Box 1141 Palm Beach, FL 33480	2,500.00 general operations
3/24/09 WHALE	128 Union St NB, MA 02740	500 00 membership/tax deductible
3/31/09 REEF	P.O. Box 246 Key Largo, FL 33037	1,000.00 general operations
4/21/09 Cenacle Sisters' Retreat House	1400 S. Dixle Highway Lantana, FL 33462	1,000.00 general operations
4/21/09 St. Anthony's Parish	12 Howlan Rd. Bloomfield PEI, Canada	500.00 general operations 500.00 general operations
4/21/09 John Thomas and Special Friends Fund	PO Boox 602 Dedham, MA 02027 89 S Street Suite 700 Boston, MA 02111	125.00 general operations
5/5/09 Yoga Hope 5/5/09 American Cancer Society	1115 W. Chestnut. St. Brockton, MA	250 00 medical research
5/5/09 Haiti Mission Fund/Newman Congregational Churh	100 Newman Ave, Rumford, RI 02916	200.00 general operations
5/18/09 Women's Fund	63 Union St., NB, MA 02740	2,000.00 programming
5/18/09 American Red Cross	139 Main St. Cambridge MA 02124	1,000.00 programming
5/18/09 Child and Family Services	1061 Pleasant St. NB MA 02740	1,000.00 general operations
5/18/09 Church of the Ascension	221 West 107th St , NY, NY 10025	2,000.00 programming
5/18/09 Facing History and Ourselves	16 Hurd Rd., Brookline, MA 02445	1,000.00 programming
5/18/09 Community Boating Center	P.O. Box 41021 NB, MA 02324	500 00 scholarships
5/18/09 Diocese of Palm Beach	995 N Military Trail Palm Beach Gardens, FL	1,000 00 general operations
5/18/09 College of New Rochelle	29 Castle Place, New Rochelle, NY 10805	75,000.00 general operations
5/18/09 Community Foundation of Southeastern MA	63 Union St., NB, MA 02740	1,500.00 general operations
5/18/09 WHALE	128 Union St NB, MA 02740 PO Box 1470 Fall River, MA 02722	3,000.00 programming 10,000.00 programming
5/18/09 Catholic Charities Appeal Fall River 5/18/09 First Church of Nazarene	764 Hathaway Rd, NB, MA 02740	10,000.00 capital improvements
5/18/09 YWCA of SE MA	20 South Sixth St. NB, MA 02740	5,000 00 capital improvements
5/18/09 Boston College	140 Commonwealth Ave Chestnut Hill, MA 02167	200,000.00 capital improvements
5/26/09 Ireland US Council	420 Lexington Avenue, Suite #356 New York, NY 10170	500.00 economic development
5/26/09 American Cancer Society	30 Speen Street Framingham, MA 01701	100.00 medical research
6/2/09 Third Eye Unlimited	48 Union St. NB, MA 02740	3,000.00 programming
6/2/09 Jimmy Fund	77 4th Ave Needham, MA 02494	100 00 medical research
6/2/09 United Way of GNB	105 williams st, New Bedford, MA 02742	5,000 00 programming
6/9/09 Isla Verde Charity Golf	c/o Manny Garcia, Spinakker Ln., S. Dartmouth, MA	500 00 general operations
6/16/09 American Cancer Society	5 Manley Street W Bridgewater, MA	1,000.00 medical research
6/30/09 Dartmouth Natural Resources Trust	P.O. Box P-17 Dartmouth, MA 02748	100 00 membership/tax deductible
6/30/09 Children international	PO Box 219055 Kansas City, MO 64121	264 00 programming 200 00 general operations
6/30/09 Phoenix Multisport	4645 North Broadway Unit C4 Boulder, CO 80304 c/o Tracie Souza Hidden Brook 42 W Hill Rd NB, MA	100 00 medical research
/09 Muscular Dystrophy Association /09 The Coalition for Buzzard's Bay	620 Belleville Ave., New Badford, MA 02745	250 00 general operations
7/15/09 Carmelite Monastery	25 Watson Ave., Barrington, RI 02806	200 00 general operations
7/15/09 Boys and Girls Club of Greater New Bedford	166 Jenney St., New Bedford, MA 02741	1,000 00 programming
7/15/09 Bishop Stang High School	500 Slocum Rd., N. Dartmouth, MA 02747	250.00 scholarships
7/15/09 ALLY Foundation	138 St. james Ave, Boston, MA 02116	1,000.00 general operations
7/15/09 Steppingstone inc	S22 N Main St., Fall River, MA 02720	750.00 capital improvements

Patrick Carney Foundation 2009 Form 990PF FYE 12/31/09 04-6614314

Date (Date	C	Grantee Address	Debit	Purpose of Grant
on Check)	Grantee name Nativity Prep	66 Spring St. NB, MA 02740		general operations
	Pan Mass Challenge	c/o Bob Downing 23 Hawks Perch Plymouth, MA 02369	•	medical research
1	Pan Mass Challenge	c/o Jim Flanagan 76 McIntosh Land Bedford NH 03110		medical research
•	New Bedford Star Kids	P.O. Box 6214 Middletown RI 02842	1.750.00	scholarships
	St. Mary's Education Fund	PO Box 1470 Fall River, MA 02722	-	scholarships
	Boston Children's Hospital	1 Autumn St. #731 Boston, MA 02215	•	medical research
	Pan Mass Challenge	c/o Neal Balboni PO Box 331 Marion, MA 02738	•	medical research
	William J O'Connor Scholarsip Foundation	c/o 311 Village Green No., Plymouth, MA 02360	100.00	scholarships
	Whitmarsh House	PO Box 72832 Providence, RI 02908	250 00	general operations
	YWCA of SE MA	20 South Sixth St. NB, MA 02740	1,000.00	capital improvements
	Scholarship for Advanced Guyanese Education	12021 Wilshire Blvd., 249 LA, CA 90025	500.00	scholarships
	Leukemia and Lymphoma Society	651 W Washington Blvd Chicago, IL 60661	100.00	medical research
	Berkley Scholarship Fund	21 North Main St., Berkley MA 02779	100.00	scholarships
	Crossroads for Kids	119 Myrtle St. Duxbury, MA 02332	250.00	general operations
	St. Vincent's Home	2425 Highland Ave. Fall River, MA 02720	1,000.00	general operations
	SHARE Foundation	285 Old Westport Rd., N Dartmouth, MA 02747	100.00	general operations
	Boston College	140 Commonwealth Ave Chestnut Hill, MA 02167	50,000.00	scholarships
	Our Sisters School	145 Brownell Ave New Bedford, MA 02740	8,000.00	scholarships
	Narconon Druge Education Program	76 Winn Street, Suite 2C Woburn, MA 01801	1,000.00	programming
	Catholic Social Services	1600 Bay Street, Fall River MA 02724	2,500 00	programming
	Nativity Prep	66 Spring St. NB, MA 02740		scholarships
	Child and Family Services		5,000 00	programming
	Umass Dartmouth	285 Old Westport Rd., N Dartmouth, MA 02747	50 00	general operations
	St. Mary's Parish	783 Dartmouth St. Dartmouth, MA 02748	1,000.00	general operations
	Rosarian Academy	B07 North Flagler Dr. West Palm Beach, FL 33401	250.00	scholarships
	Sister Paulanne's Needy Family Fund	1775 Grove St. Glenview, IL 60025	1,000.00	general operations
	Leukemia and Lymphoma Society	9 Erie Dr. Natick, MA 01766	100 00	medical research
	Rotch-Jones-Duff House	396 County Street NB, MA 02740	250.00	general operations
	Dartmouth Natural Resources Trust	PO Box P-17 Dartmouth, MA 02748	50.00	general operations
	Council on Foundations	PO Box 75661 Baltimore, MD 21275	770.00	dues/tax deductible
	New Bedford Whaling Museum	18 Johnny Cake Hill New Bedford, MA 02740	150.00	membership/tax deductible
	Yoga Kids, Inc	PO Box 187 Marlon, MA 02738	5,000.00	programming
	Umass Dartmouth	285 Old Westport Rd., N Dartmouth, MA 02747	250,000.00	capital improvements
	Pontifical North American	3211 Fourth St. NE Washington, DC 20017	20,000.00	scholarships
	Third Eye Unlimited	48 Union St. NB, MA 02740	200 00	programming
	St. Vincent's Home	2425 Highland Ave. Fall River, MA 02720	100.00	programming
, /09	5t, Vincent's DePaul Society	141 Washington St. Taunton, MA	100.00	general operations
/os	SHARE Foundation	285 Old Westport Rd., N Dartmouth, MA 02747	100.00	general operations
12/15/09	First Night New Bedford	PO Box 1701, New Bedford, MA 02741	500.00	general operations
12/15/09	Community Foundation of Southeastern MA	63 Union St., NB, MA 02740	1,000 00	general operations
12/15/09	Marion Institute	202 Spring St Marion MA 02738	100.00	programming
12/15/09	Holy Union Sisters	PO Box 410 Milton, MA 02186	100.00	general operations
12/15/09	Catholic Schools Foundation	260 Franklin St., Suite 630 Boston, MA 02110	10,000.00	scholarships
12/15/09	New Bedford Police Association	PO Box 5719 New Bedford, MA 02740	100.00	general operations
12/15/09	Penikese Island School	PO Box 161 Woods Hale, MA 02543	200.00	general operations
12/15/09	Schwartz Center for Children	One Posa Place Dartmouth, MA 02747	100.00	general operations
12/15/09	Boston College	140 Commonwealth Ave Chestnut Hill, MA 02167		capital improvements
12/22/09	Dartmouth Friends of the Elderly	PO Box 87113 Dartmouth, MA 02748		general operations
12/22/09	The Nemasket Group	56 Bridge St., Fairhaven, MA 02719	•	general operations
12/22/09	St. Anthony of Padua Church	1359 Acushnet Ave. New Bedford, MA 02746	•	capital improvements
12/22/09	New Bedford Preservation Society	PO Box 1618 New Bedford, MA 02741		membership/tax deductible
12/22/09	Order of Malta	PO Box 10023 Uniondale, NY 11555	•	general operations
12/22/09	Schooner Ernestine-Morrissey Association	PO Box 2995 New Bedford, MA 02741	•	general operations
12/22/09	Dana Farber Cancer Institute	10 Brookline Place West, 6th Floor, Brookline, MA 02445		medical research
12/22/09	Bishop Stang High School	500 Slocum Rd., N. Dartmouth, MA 02747	100,000,00	capital improvements

1,106,144.00

				Realiz	Realized Gains and Losses	d Losses						
	Date	Date	,		;			1	Long Term		Disallowed	T To
Description	Acquired Goleen	Acquired PCF	Date Sold	Quantity	Net Proceeds		Cast	Sains (Loss)	dains (Loss) at xfer	Gains (Loss)	Loss	Gains (Loss)
DFA T A US Core Equity 2 Portfolio		12/19/2007	4/3/2009	23,148.148	124,975.00		211,342.59			(86,367.59)	2,831.49	(83,536 10)
DFA Tax Managed US Small Cap Port		12/19/2007	4/3/2009	1,923.077	24,975.00		44,480.77			(19,505.77)	127.46	(19,378 31)
DFA Tax Managed US Targeted Value Port		12/19/2007	4/3/2009	4,363.002	49,975.00		91,753.93			(41,778.93)	973.95	(40,804.98)
DFA Tax Managed US Mkt Wide Val Port II		12/19/2007	4/3/2009	6,227.545	51,975.00		100,138.92			(48,163.92)	1,323.41	(46.840.51)
Chooc	3/9/2007		11/16/2009	63.000	10,485.01	10,209.15	5,102 55		5,106.60	275 86		5,382.46
Henderson Land	10/30/2008	10/30/2008 11/12/2009 1	11/23/2009	2,000.000	14,192.00	13,986 00	7,003 40		6,982.60 14 943 00	714 80)		14 228 20
Philip Morris	11/10/2008	11/12/2009	11/16/2009	400.000	20,291.91	20,060.00	16,766.78		3,293.22	231.91		3,525.13
Time Warner Inc	11/10/2008	11/12/2009	11/16/2009	455.000	14,707.31	14,537.25	10,154.20		4,383.05	170.06		4,553.11
Legg Mason	11/10/2008	•	11/16/2009	365.000	11,434.99	11,231.05	5,855 91		5,375.14	203.94		5,579.08
Allergan	11/11/2008	11/12/2009	11/16/2009	722.000	43,269.15	43,052.86	27,302.07		15,750.79	216.29		15,967 08
American Tower	11/11/2008	11/12/2009	11/16/2009	2,310.000	92,992.42	91,868.70	65,929 48		25,939.22	1,123.72		27,062.94
Apple	11/11/2008	11/12/2009	11/16/2009	82.000	16,988.52	16,764.90	7,636.66		9,128.24	223 62		9,351 85
Cipal Salaran	44444000	11/12/2003	11/16/2009	462.000	20.128,111	70 128 10	74 001 48		4 236 62	682 18		4 918 78
Cilead Sciences Organia Sociene	11/11/2008	11/12/2009	11/16/2009	3 215 000	67 034 69	78, 130, 10 68 137 55	44 805 20		21.327.35	902 14		22.229.49
Research in Motion	11/11/2008	11/12/2009	11/16/2009	1.264.000	78.221.47	79,240,16	58,161.29		23,078.87	(1,018.69)		22,060.18
Vestas Wind	11/11/2008		11/16/2009	2,503.000	62,815.68	61,703.95	38,045.60		23,658.35	1,111.73		24,770.08
Visa	11/11/2008	11/12/2009	11/16/2009	511.000	40,677.23	40,880.00	26,888.82		13,991.18	(202.77)		13,788 41
Ameripuse	11/10/2008	11/12/2009	11/16/2009	260.000	10,108.34	10,163.40	5,161.94		5,001.46	(55.06)		4,946.40
Canadian Nat Res	11/10/2008		11/16/2009	371.000	25,611.97	24,764.25	17,712.39		7,051.86	847.72		7,899.58
Diageo	11/10/2008	11/12/2009	11/16/2009	309.000	21,097.79	20,916.21	18,702.53		2,213.68	181.58		2,395.26
Dun & Bradstreet	11/26/2003	11/12/2009	11/16/2009	102.000	8,279.82	8,241.60	4,869.48		3,372.12	38.22		3,410.34
EOG Resources	12/20/2006	11/12/2009	11/16/2009	491.000	44,460.72	43,453.50	31,910 09		11,543.41	1,007.22		12,550.63
Express Scripts	2/25/2008	11/12/2009	11/16/2009	81.000	6,999.17	6,880.95	5,322.45		1,558.50	118.22		1,676.72
Google	10/23/2008	11/12/2009	11/16/2009	23.000	13,246.10	13,157.15	8,050.85		5,106.30	88.92		5,195.25
Grupo Televisa	11/11/2008	11/12/2009	11/16/2009	426.000	9,342.70	8,967.30	6,932.13		2,035.17	375.40		2,410.57
Hewlett Packard	10/24/2008	11/12/2009	11/16/2009	379.000	19,169.89	18,915.89	13,335.45		5,580.44	254.00		5,834.44
Loews	11/10/2008	11/12/2009	11/16/2009	947.000	34,360.68	33,599.56	28,842 78		4,756.78	761.12		5,517.90
News Corp	11/10/2008	11/12/2009	11/16/2009	1,138.000	14,683.20	14,350.18	9,320.68		5,029.50	333.02		5,362.52
Occidental Pet	12/20/2006	11/12/2009	1/16/2009	757.000	64,179.47	62,414.65	38,350.22		24,064.43	1,764.82		25,829.25
Progressive Corp	11/10/2008	11/12/2009	11/16/2009	1,591.000	27,199 84	27,206.10	19,597.94		7,608.16	(6.26)		7,601.90
Sealed Air	11/10/2008	11/12/2009	11/16/2009	1,211 000	27,217.12	26,399.80	19,629.83		6,769.97	817.32		7,587.29
Texas Inst	11/10/2008	11/12/2009	11/16/2009	1,126.000	29,258 00	28,645.44	18,704.55		8,940.89	612.56		9,553.45
Unitedhealth Group	11/10/2008	11/12/2009		454.000	13,262.89	13,202.32	10,028.04		3,174.28	60.57		3,234.85

347,237.10 (183,655.28) 5,256 31 168,838.13

1,319,327.16 1,055,266.23 1,155,745.34

2009 DEPRECIATION AND AMORTIZATION REPORT

	Ending Accumulated Depreciation		679.	679.	
	Current Year Deduction	.0	619.	619.	
	Current Sec 179 Expense				
	Beginning Accumulated Depreciation	826.		826.	
	Basis For Depreciation	1,141.	1,941.	3,082.	
	Reduction In Basis				
	Section 179 Expense				
990-PF	Bus % Excl				
	Unadjusted Cost Or Basis	1,141.	1,941.	3,082.	
}	Soc.>	HY1.7	MQ19B		1
ŀ	Lufe	5.00	5.00		 1
-	Method				1
	Date Acquired N	09/11/06 200DB	01/31/09 200DB		
FORM 990-PF PAGE 1	Description	(D)COMPUTER HARDWARE	COMPUTER	* TOTAL 990-PF PG 1 DEPR	
ORM 95	Asset	∺	73		
Er c					_ `

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone •

FORM 990-PF INTEREST ON SAVINGS A	ND TEMPORARY CA	ASH INVESTMENTS	STATEMENT	1
SOURCE			AMOUNT	
INTEREST INCOME			7,35	8.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		7,35	8.
	····			
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMENT	2
SOURCE DIVIDENDS AND	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	STATEMENT COLUMN (A) AMOUNT	
		CAPITAL GAINS	COLUMN (A)	

FORM 990)-PF	GAIN OR	(LOSS)	FROM	SALE	OF	ASSETS	STA	rement -	3
DESCRIPT	(A) TION OF PROPERT	Y					MANNER ACQUIRED	DATE ACQUIRED	DATE	sold
	7 671-667579 -S D STATEMENT	EE					Purchased	12/19/07	04/0	3/09
	(B)		C)		(D)		(E)		(F)	
	GROSS SALES PRICE		T OR BASIS	EXI	PENSE SALE	OF	DEPREC	. GAIN	OR LO	ss
	251,900.		442,460	•		0.	,	0.	<190,	560.
DESCRIPT	(A) TION OF PROPERT	Y					MANNER ACQUIRED	DATE ACQUIRED	DATE	SOLD
	7 671-667579 -S STATEMENT	EE					DONATED	11/12/09	VARI	OUS
	(B)		C)		(D)		(E)		(F)	
	GROSS SALES PRICE		T OR BASIS	EXI	PENSE SALE		DEPREC	. GAIN	OR LO	SS
_	1,067,427.	1,	055,266	•		0.	•	0.	12,	161.
DESCRIPT	(A) TION OF PROPERT	Y					MANNER ACQUIRED	DATE ACQUIRED	DATE	SOLD
250,000	SHS MO HIGHER	ED LN					PURCHASED	12/28/07	05/0	4/09
	(B)		C)		(D)		(E)		(F)	
	GROSS SALES PRICE		T OR BASIS	EXI	PENSE SALE	OF	DEPREC	. GAIN	OR LC	SS
_	250,000.		250,000			0 .		0.	"	0.

DESCRIP	(A) TION OF PROPERTY				MANNER ACQUIRED	DATE ACQUIRED	DATE SOL
200,000	SHS MO HIGHER E	D LN			PURCHASED	12/28/07	05/04/0
	(B)	(C)	(D)		(E)		(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE (OF	DEPREC.	GAIN	OR LOSS
	200,000.	200,000.		0.		0.	0
DESCRIP	(A) TION OF PROPERTY				MANNER ACQUIRED	DATE ACQUIRED	DATE SOL
100,000	SHS MO HIGHER E	D LN			PURCHASED	12/28/07	05/04/0
	(B)	(C)	(D)	_	(E)		(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE (J₽.	DEPREC.	GAIN	OR LOSS
•	100,000.	100,000.		0.		0.,	0
DESCRIP	(A) TION OF PROPERTY				MANNER ACQUIRED	DATE ACQUIRED	DATE SOL
400,000	SHS UNION FINL	SVCS			PURCHASED	12/28/07	06/05/0
400,000	(B)	(C)	(D)	าต	PURCHASED (E)	12/28/07	06/05/0 (F)
400,000			(D) EXPENSE (SALE	OF			
400,000	(B) GROSS	(C) COST OR	EXPENSE (OF 0.	(E) DEPREC		(F)
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	EXPENSE ((E) DEPREC	GAIN	(F) OR LOSS
DESCRIP	(B) GROSS SALES PRICE 400,000.	(C) COST OR OTHER BASIS	EXPENSE (0.	(E) DEPREC	GAIN O. DATE ACQUIRED	(F) OR LOSS
DESCRIP	(B) GROSS SALES PRICE 400,000. (A) TION OF PROPERTY R HARDWARE (B)	(C) COST OR OTHER BASIS 400,000.	EXPENSE (SALE)	0.	DEPREC. MANNER ACQUIRED	GAIN O. DATE ACQUIRED	(F) OR LOSS 0 DATE SOL
DESCRIP	(B) GROSS SALES PRICE 400,000. (A) TION OF PROPERTY	(C) COST OR OTHER BASIS 400,000.	EXPENSE (0.	MANNER ACQUIRED PURCHASED	GAIN O. DATE ACQUIRED	OR LOSS O DATE SOL VARIOUS (F)
DESCRIP	(B) GROSS SALES PRICE 400,000. (A) TION OF PROPERTY R HARDWARE (B) GROSS SALES PRICE	(C) COST OR OTHER BASIS 400,000.	EXPENSE (SALE (D) EXPENSE (0.	MANNER ACQUIRED PURCHASED (E) DEPREC	GAIN O. DATE ACQUIRED VARIOUS	OR LOSS O DATE SOL VARIOUS (F)
DESCRIP	(B) GROSS SALES PRICE 400,000. (A) TION OF PROPERTY R HARDWARE (B) GROSS SALES PRICE	(C) COST OR OTHER BASIS 400,000. (C) COST OR OTHER BASIS 1,141.	EXPENSE (SALE (D) EXPENSE (0.	MANNER ACQUIRED PURCHASED (E) DEPREC	GAIN O. DATE ACQUIRED VARIOUS GAIN	OR LOSS DATE SOL VARIOUS (F) OR LOSS
DESCRIP COMPUTE	(B) GROSS SALES PRICE 400,000. (A) TION OF PROPERTY R HARDWARE (B) GROSS SALES PRICE 0.	(C) COST OR OTHER BASIS 400,000. (C) COST OR OTHER BASIS 1,141.	EXPENSE (SALE (D) EXPENSE (0.	MANNER ACQUIRED PURCHASED (E) DEPREC	GAIN O. DATE ACQUIRED VARIOUS GAIN	OR LOSS DATE SOL VARIOUS (F) OR LOSS <315

FORM 990-PF	LEGAL	FEES	S	FATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL FEES	1,455.	0.		0.
TO FM 990-PF, PG 1, LN 16A =	1,455.	0.		0.
FORM 990-PF	ACCOUNTI	NG FEES	S	ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREP	2,300.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	2,300.	0.		0.
FORM 990-PF	TAX	ES	S	FATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES FOREIGN TAXES INCOME TAXES	4,487. 1,395. 305.	0. 1,395. 0.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 18 =	6,187.	1,395.		0.
FORM 990-PF	OTHER E	XPENSES	S'	ratement 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES COMPUTER SUPPLIES PAYROLL PROCESSING TELEPHONE INSURANCE	9,542. 1,782. 1,346. 1,334. 90.	9,542. 0. 0. 0.		0. 0. 0. 0.

PATRICK CARNEY FOUNDATION C/O C	LAREMONT				04-6614	314
POSTAGE MEMBERSHIPS AND DUES LICENSES AND FEES	121. 1,280. 523.	_	0. 0. 0.			0.
TO FORM 990-PF, PG 1, LN 23	16,018.	9,	542.			0.
FORM 990-PF U.S. AND STATE	CITY GOV	/ERNMENT	OBLIGATIO	NS	STATEMENT	8
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VAL	UE	FAIR MARKE VALUE	т
	×		1,680,	062.	1,676,2	73.
TOTAL U.S. GOVERNMENT OBLIGATIONS	;	•	1,680,	062.	1,676,2	73.
TOTAL STATE AND MUNICIPAL GOVERNM	ENT OBLIC	FATIONS			· <u> </u>	
						
TOTAL TO FORM 990-PF, PART II, LI	NE 10A	:	1,680,	062.	1,676,2	73.
	NE 10A HER INVES	STMENTS	1,680,	062.	1,676,2	
FORM 990-PF OT	HER INVES	ETMENTS JATION THOD	1,680, BOOK VAL			9
FORM 990-PF OT DESCRIPTION	HER INVES	JATION		UE	STATEMENT FAIR MARKE	9 T
	HER INVES	JATION THOD	BOOK VAL	UE 770.	STATEMENT FAIR MARKE VALUE	9 T
FORM 990-PF OT DESCRIPTION MUTUAL FUNDS	HER INVES VALU MET CO	JATION PHOD OST	BOOK VAL 4,364, 4,364,	UE 770.	STATEMENT FAIR MARKE VALUE 3,496,4	9 T
FORM 990-PF OT DESCRIPTION MUTUAL FUNDS TOTAL TO FORM 990-PF, PART II, LI	HER INVES VALU MET CO	JATION THOD OST HELD FOR	BOOK VAL 4,364, 4,364,	UE 770. 770.	STATEMENT FAIR MARKE VALUE 3,496,4	9 T 53.
FORM 990-PF OT DESCRIPTION MUTUAL FUNDS TOTAL TO FORM 990-PF, PART II, LI FORM 990-PF DEPRECIATION OF ASS	COST	JATION THOD OST HELD FOR	BOOK VAL 4,364, 4,364, INVESTMEN ACCUMULAT DEPRECIAT	UE 770. 770.	STATEMENT FAIR MARKE VALUE 3,496,4 3,496,4 STATEMENT	9 T 53. 53.

11

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

GOLEEN PARTNERS LLC: PATRICK CARNEY 254 TANGIER AVENUE

PALM BEACH, FL 33480

FORM 990-PF

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

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

KATHLEEN LARISA, CLAREMONT MANAGEMENT I, LLC ONE LAKESHORE CENTER BRIDGEWATER, MA 02324

TELEPHONE NUMBER

508-279-4300

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS SHOULD BE WRITTEN REQUESTS ON LETTERHEAD AND SHOULD PROVIDE INFORMATION REGARDING QUALIFIED CHARITABLE STATUS AND INTENDED USE OF GRANT.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE OTHER THAN AS DETAILED IN 2 (B) ABOVE.

Department of the Treasury Internal Revenue Service

Depreciation and Amortization 990-PF

(Including Information on Listed Property)

▶ Attach to your tax return.

OMB No 1545-0172

Sequence No 67

► See separate instructions. Business or activity to which this form relates Name(s) shown on return PATRICK CARNEY FOUNDATION 04-6614314 FORM 990-PF PAGE 1 C/O CLAREMONT MANAGEMENT COMPANY Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 250,000. 1 Maximum amount See the instructions for a higher limit for certain businesses 2 2 Total cost of section 179 property placed in service (see instructions) 800,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-5 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (c) Elected cost (b) Cost (business use only) (a) Description of property 6 7 7 Listed property. Enter the amount from line 29 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 the tax vear 15 15 Property subject to section 168(f)(1) election 16 16 Other depreciation (including ACRS) Part III | MACRS Depreciation (Do not include listed property) (See instructions) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2009 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year placed in service (d) Recovery period (e) Convention (a) Depreciation deduction (a) Classification of property (f) Method only - see instructions) 3-year property 19a 679 1,941 MO 200DB YRS. 5-year property b 7-year property d 10-year property 15-year property е 20-year property f 25 yrs. S/L 25-year property g MM S/L 27.5 yrs h Residential rental property MM S/L 27 5 yrs. 39 vrs MM S/L i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System S/L Class life 20a 12 yrs S/L 12-vear b 40 yrs. MM S/L 40-year Part IV Summary (See instructions) 21 21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 679. 22 Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr 23 For assets shown above and placed in service during the current year, enter the

Form 4562 (2009)

portion of the basis attributable to section 263A costs

O CLAREMONT MANAGEMENT COMPANY

04-6614314 Page 2

Form 4562 (2009)		CLAREI										0014		age z
Part V Listed Property (ertain otl	her vehic	les, cell	ular tele	phone	s, certain	compute	ers, and	property	y usea to	or enterta	unmeni
Note: For any veh	ncle for w	hich vou are i	ising the	standard	d mileag	e rate o	r dedu	cting lease	expens	e, comp	leteonly	, 24a, 24	1b, colum	ıns (a)
through (c) of Sec	ction A, all	of Section B	, and Sec	ction C if	applica	ble.								
Section A - D	•				$\overline{}$			1						
24a Do you have evidence to sup			ent use cl	aimed?	<u> </u>	es L	_ No	t	T-'		nce writ	ten? L	Yes	<u>No</u>
_ (a)	(b) Date	(c) Business	,	(d)	Rae	(e) sis for depr	eciation	(f)		(g)	_ `	(h)		(i) cted
Type of property (list vehicles first)	placed in	ınvestmen	t o	Cost or ther basis		siness/inve	stment	Recovery period		thod/ /ention		eciation uction	sectio	n 179
	service	use percenta	ige			use only		L <u>'</u>					co	ost
25 Special depreciation allows	ance for q	ualified listed	property	y placed	ın servi	ce during	g the t	ax year ar	ıd					
used more than 50% in a c										25				
26 Property used more than 5	50% in a c	qualified busin	ess use:			_			,		···			
			%					ļ <u>.</u>	ļ		ļ		ļ	
			%										ļ	
			%											
27 Property used 50% or less	in a qual	ified business	use:										,	
			%						S/L ·				1	
			%						S/L -				_	
			%						S/L·		ļ		<u> </u>	
28 Add amounts in column (h), lines 25	through 27.	Enter her	e and on	line 21	, page 1				28				
29 Add amounts in column (i)	, lıne 26. E	Enter here and	d on line	7, page ⁻	1							29	<u> </u>	
			Section	B - Infor	mation	on Use	of Vel	hicles						
Complete this section for vehic	cles used	by a sole pro	pnetor, p	artner, o	r other '	more th	an 5%	owner,"	or relate	d persor	1			
If you provided vehicles to you	ır employe	es, first ansv	ver the q	uestions	ın Secti	on C to	see if	you meet	an exce	otion to	complet	ing this	section fo	or
those vehicles.														
			1	a)	(b)		(c)	1	d)	(e)	(1	0
30 Total business/investment mil	es driven d	luring the	1	hicle	1	hicle	١ ١	/ehicle		hicle	1	hicle	1	icle
year (do not include commu														
31 Total commuting miles driv		the vear				_								-
32 Total other personal (nonc	_	· ·						-						
driven	Ommuni	g) 11111CS												
33 Total miles driven during the	na vear						 		<u> </u>					
Add lines 30 through 32	ic year.				ļ									
34 Was the vehicle available t	for nareon	nal use	Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
during off-duty hours?	or person	iai usc	103	110	103	119	1.00			'''	1.00	1	1	
35 Was the vehicle used prim	arily by a	more				 	1			 		<u> </u>		
than 5% owner or related	• •	111010							i	1				
36 Is another vehicle available	•	onal	-						 	<u> </u>				
	o ioi perac	Jilai			1									
use?	· · · · · · · · · · · · · · · · · · ·	- Questions	for Emm	levere M	/ho Pro	vido Vol	hioloc	for Hea h	v Their	Employ		L		
Answer these questions to def												re not n	nore than	5%
	terrinie ii	you meet am	exception	ii to com	bieting .	Section	D 101 V	rei iicies us	sed by e	ripioyee	S WIIO a	i e not n	nore triari	370
owners or related persons 37 Do you maintain a written		tomost that s	robibito	all paragr	201 1100	of volue	00 100	duding co	mmutino	by you	<u> </u>		Yes	No
	policy sta	ternerit that p	roriibits i	ali persor	iai use i	or verillici	65, IIIC	Juding Co	minutary	, by you	1		163	110
employees?			. مدرطیطمی			مماميطم	04001	at aammuu	tina bu	(O) IF			-	
38 Do you maintain a written		•					•			youi				
employees? See the instru					ncers, c	airectors	, Or 19	o or more	owners					+-
39 Do you treat all use of veh	•													+
40 Do you provide more than		=			intorma	tion fron	1 your	employee	s about					
the use of the vehicles, an														+
41 Do you meet the requirem													-	+
Note: If your answer to 37	, 38, 39, 4	0, or 41 is "Y	es," ao n	ot comp	ete Sec	tion B to	or the	coverea v	enicies.					
Part VI Amortization			()=1	1	(-)			(4)	·	(2)			16	
(a) Description of co	sts	Da	(b) te amortization		(C) Amortizal	ble		(d) Code		(e) Amortizz	ition	A	(f) mortization	
			begins	<u> </u>	amoun	<u> </u>		section		period or pe	rcentage	f	or this year	
42 Amortization of costs that	begins du	uring your 200	9 tax ye	ar:					1					
				-			+							
				<u></u>										
43 Amortization of costs that	_	•	-							•	43			
44 Total. Add amounts in col	<u>umn (f). S</u>	ee the instruc	tions for	where to	report						44			