

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

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.

OMB No 1545-0052

b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 1 Taxes 1 Taxes 1 Taxes 1 Stmt 2 1 1,009. 1 1,0	FOL	caler	idar year 2009, or ta	x year beginning	<u> </u>		, and e	nding		
Dist tile IRIS Name of foundation A Employer identification number 06-1479508	G	Check	all that apply:				•	charity		1
DEKKER FOUNDATION Office and street (a) FO but in memory of mark is not delivered to steen address) Port of the market and street (a) FO but in memory of mark is not delivered to steen address) Port of the market and street (a) FO but in memory of mark is not delivered to steen address) Port of the market and street (a) FO but in memory of mark is not delivered to steen address) Port of the market and street (a) FO but in memory of mark is not delivered to steen address) Port of the market and street (a) FO but in memory of market and street (a) FO s					return	Address char	nge		1 <u> </u>	
Otherwise DEKKER FOUNDATION print p	Us	e the	IRS Name of founda	ation					A Employer identification	n number
print Muthors and catter (or PC box number and rates (or PC box number and rates) Comparison Co					- 017				06 1450506	
or type: Sexpected Colly or town, state, and ZiP code Instructions Control town state, and ZiP code Instructions Control town state, and ZiP code Control town state Control town state, and ZiP code Control town state Control tow	Otl		· 					Dan fauta	*	
See Specific My or Irown, state, and 2/P code WESTON. CT 06883 H. Check type of organization: See Specific Section 507(c)(3) exempt private foundation Section 347(a)(1) nonecempt charitable trust in Come specific Comparation (Comparation Comparation Compara	0			•		elivered to street address)		Hoom/suite		F.0
Instructions Inst								<u> </u>		
H. Check bype of organizations: IX Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt characteris trust. Other tax-bib private foundation Fair market value of all assets at end of year. Accounting method: Closh Closh	Inst	tructio	ane i							
Section 4947(a)(1) nonexempt charantable rust. Under travable private foundation. It arm market value of all sessest and and value. J Accounting method: C Cesh Accrual (from Part II, col. (c), line 16) Control (rough) Con						romat arresta foundation			2. Foreign organization	s, check here
Far market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is unit was terminated If the foundation is the foundation If the foundat	Ϊ,	_					ation		check here and attach or	omputation
It the foundations in a 50-month termination under section 507(b)(1)(B), clerk three Part I. Controllations of the months in accessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary equal title emounts in electron 100 may not recessary emounts of the emotion of the expenses of the emotion of the expenses of the emotion of the emotion 100 may not recessary emotion 100 may not received 100 may not recessary emotion 100 may not received 1	LE			-				uel		
Part I Analysis of Revenue and Expenses (The focial of amounts (a) (a) and (of may not necessary require harmonic in column (b) (a) and (of may not necessary require harmonic in column (b) (a) and (of may not necessary require harmonic in column (b) (a) and (of may not necessary require harmonic in column (b) (a) and (of may not necessary require harmonic in column (b) (b) Net investment (income income in				•		~	^	uai	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Part Analysis of Revenue and Expenses (a) Revenue and cypenses per books (b) Net investment (c) Adjusted net (c)				-			basis)			
The total of amonates in columns (b), (c), and (of may not company of each the amonatory equal equal the amonatory equal equal the amonatory equal equ			Analysis of Revenu	ie and Expenses	3	T		westment		
1 Contributions, grits, grants, etc., received 950. N/A	نت		The total of amounts in	n columns (b), (c), ar	nd (d) may not					for charitable purposes
Check X Life Its stackage a not reported to altack Sct 3 1		1				950.			N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
A Dividends and interest from securities 133. 44. Statement 1										<u> </u>
A Dividends and interest from securities 133. 44. Statement 1		3	Interest on savings and cash investments	temporary						
Sa Gross rents		4			S	133.		44.		Statement 1
Same Note from the content of the		5a	Gross rents							
Decrease sales price for all process of the second form of the part IV, line 2) Decrease sales better second form of the part IV, line 2) Decrease sales better second form of the part IV, line 2) Decrease sales better second form of the part IV, line 2) Decrease sales better second form of the part IV, line 2) Decrease sales better second form of the part IV, line 2) Decrease sales lead to second for second form of the part IV, line 2) Decrease sales lead for line 2 the second form of the part IV, line 2) Decrease sale leas second for second		Ь	Net rental income or (los	is)						
9 Income modifications 10 Gross profit or (loss) 10 Offices coat of goods sold 10 Corposas sold eless returns 11 Officer income 12 Total Add lines 1 through 11 13 Compensation of offices, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees 17 Interest 18 Taxes 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and disbursements Add lines 24 and 25 28 Net investment income (inegative, enter-0-) 29 Cadjusted net income (inegative, enter-0-) 20 Cadjusted net income (inegative, enter-0-) 20 Cadjusted net income (inegative, enter-0-) 20 Cadjusted net income (inegative, enter-0-) 21 Cadjusted net income (inegative, enter-0-) 22 Cadjusted net income (inegative, enter-0-) 23 N/A	ø	6a		ale of assets not on	line 10				DEC	E1/E0
9 Income modifications 10 Gross profit or (loss) 10 Offices coat of goods sold 10 Corposas sold eless returns 11 Officer income 12 Total Add lines 1 through 11 13 Compensation of offices, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees 17 Interest 18 Taxes 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and disbursements Add lines 24 and 25 28 Net investment income (inegative, enter-0-) 29 Cadjusted net income (inegative, enter-0-) 20 Cadjusted net income (inegative, enter-0-) 20 Cadjusted net income (inegative, enter-0-) 20 Cadjusted net income (inegative, enter-0-) 21 Cadjusted net income (inegative, enter-0-) 22 Cadjusted net income (inegative, enter-0-) 23 N/A	, nu	Ь							KEU	FIVED 0
9 Income modifications 10 Gross profit or (loss) 10 Offices coat of goods sold 10 Corposas sold eless returns 11 Officer income 12 Total Add lines 1 through 11 13 Compensation of offices, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees 17 Interest 18 Taxes 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and disbursements Add lines 24 and 25 28 Net investment income (inegative, enter-0-) 29 Cadjusted net income (inegative, enter-0-) 20 Cadjusted net income (inegative, enter-0-) 20 Cadjusted net income (inegative, enter-0-) 20 Cadjusted net income (inegative, enter-0-) 21 Cadjusted net income (inegative, enter-0-) 22 Cadjusted net income (inegative, enter-0-) 23 N/A		7	Capital gain net income	(from Part IV, line 2))			0.		
10a and allowances 10a and allowacces 10a and allowacces 10a and allowacces 10a and allowacces	7	8	Net short-term capita	al gaın						<u>" 7 / 11 U 1 1 1 1 1 1 1 1 </u>
b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 13 Compensation or officers, directors, trustees, etc 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		9							0	
Company Comp	63	10a	and allowances	·		-			000	= =
11 Other income	2	ļ	-					···· <u>-</u>	LOGI	EIV, OT
12 Total Add lines 1 through 11 1,083. 44.	Z	1	, , ,)						
b Accounting fees c Other professional fees 17 Interest 18 Taxes Stmt 2 1,009. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		111				1 003		4.4	<u> </u>	
b Accounting fees c Other professional fees 17 Interest 18 Taxes Stmt 2 1,009. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	씤	12			···		<u> </u>			
b Accounting fees c Other professional fees 17 Interest 18 Taxes Stmt 2 1,009. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	Ź	14	•	•	s, etc	· · ·		0.		0.
b Accounting fees c Other professional fees 17 Interest 18 Taxes Stmt 2 1,009. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	Ă	15	· -	•						
b Accounting fees c Other professional fees 17 Interest 18 Taxes Stmt 2 1,009. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	esc	162		Oyee Delients					-	
c Other professional fees 17 Interest 18 Taxes	ens		_					•		
23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 12,298. 330. 0. 25 Contributions, gifts, grants paid 133,745. 133,745. 26 Total expenses and disbursements Add lines 24 and 25 146,043. 330. 133,745. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	X	,	•	es						
23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 12,298. 330. 0. 25 Contributions, gifts, grants paid 133,745. 133,745. 26 Total expenses and disbursements Add lines 24 and 25 146,043. 330. 133,745. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	èΕ	17	·				·			
23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 12,298. 330. 0. 25 Contributions, gifts, grants paid 133,745. 133,745. 26 Total expenses and disbursements Add lines 24 and 25 146,043. 330. 133,745. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	aţ;	18		St	mt 2	1.009.		0 -		0.
23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 12,298. 330. 0. 25 Contributions, gifts, grants paid 133,745. 133,745. 26 Total expenses and disbursements Add lines 24 and 25 146,043. 330. 133,745. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	iistr	19			-					
23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 12,298. 330. 0. 25 Contributions, gifts, grants paid 133,745. 133,745. 26 Total expenses and disbursements Add lines 24 and 25 146,043. 330. 133,745. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	Ë	20		•					<u> </u>	
23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 12,298. 330. 0. 25 Contributions, gifts, grants paid 133,745. 133,745. 26 Total expenses and disbursements Add lines 24 and 25 146,043. 330. 133,745. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	Ad	21		and meetings		5,955.		0.		0.
23 Other expenses Stmt 3 5,334. 330. 0. 24 Total operating and administrative expenses Add lines 13 through 23 12,298. 330. 0. 25 Contributions, gifts, grants paid 133,745. 133,745. 26 Total expenses and disbursements Add lines 24 and 25 146,043. 330. 133,745. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	Ĭ	22		-						
24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	9	23	•		mt 3	5,334.		330.		0.
25 Contributions, girls, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	ati	24	Total operating and	administrative						
25 Contributions, girls, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	per	.[expenses Add lines	13 through 23				330.		0.
26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	0	25	Contributions, gifts,	grants paid		133,745.				133,745.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		26	Total expenses and	disbursements						
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		<u> </u>			. <u> </u>	146,043.		330.		133,745.
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		27	Subtract line 26 from	n line 12:						
c Adjusted net income (if negative, enter -0-)		1				<144,960.	>			
C Adjusted net income (if negative, enter -0-) 923501 N/A		1						0.		
	9235	C 01				<u> </u>	<u>. </u>		<u> </u>	5 000 55

Fo	rm 9	90-PF (2009) DEKKER FOUNDATION		06-	1479508 Pag	ge 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of		
Ė			(a) Book Value	(b) Book Value	(c) Fair Market Value	
		Cash - non-interest-bearing	162,996.	100,288.	100,288	
		Savings and temporary cash investments	155,196.	73,044.	73,044	<u>4 .</u>
	3	Accounts receivable >				
	١.	Less; allowance for doubtful accounts				
	4	Pledges receivable >				
	١.	Less; allowance for doubtful accounts				
	1 _			_		
	6	Receivables due from officers, directors, trustees, and other				
	_	disqualified persons				
	′	Other notes and Toans receivable				
	_	Less; allowance for doubtful accounts				
Assets	1	Inventories for sale or use				_
Ass	1	Prepaid expenses and deferred charges				
		Investments - U.S. and state government obligations				
		Investments - corporate stock				—
		Investments - corporate bonds				—
	131	Investments - land, buildings, and equipment basis				
	10	Less accumulated depreciation				
	13	Investments - mortgage loans Investments - other Stmt 4	107 160	107 160	107 160	_
		Land, buildings, and equipment: basis	107,169.	107,169.	107,169	<u>,</u>
	14	Less accumulated depreciation				
	15	Other assets (describe				—
	'"	The descript P			·	_
	16	Total assets (to be completed by all filers)	425,361.	280,501.	280,501	1
_		Accounts payable and accrued expenses	123,331.	200,301.	200,301	<u></u>
	18	Grants payable				
Ŋ	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
api	21	Mortgages and other notes payable		- *		
	22	Other liabilities (describe ► DUE TO CTM)	5,050.	5,150.		
	23	Total Irabilities (add lines 17 through 22)	5,050.	5,150.		
		Foundations that follow SFAS 117, check here				
m		and complete lines 24 through 26 and lines 30 and 31				
če	24	Unrestricted				
alar	25	Temporarily restricted				
J B	26	Permanently restricted				
Š		Foundations that do not follow SFAS 117, check here				
F.		and complete lines 27 through 31.	_			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	0.	0.		
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	420,311.	275,351.		
ž	30	Total net assets or fund balances	420,311.	275,351.		
		Takel Bakillalas and ask assault for discharge	405 361	200 501		
_	31	Total liabilities and net assets/fund balances	425,361.	280,501.	· · · · · · · · · · · · · · · · · · ·	—
P	<u>art</u>	III Analysis of Changes in Net Assets or Fund Ba	alances			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30			—
		st agree with end-of-year figure reported on prior year's return)		1	420,311	Ĺ.
		r amount from Part I, line 27a		2	<144,960	
		r increases not included in line 2 (itemize)		3		<u>).</u>
		lines 1, 2, and 3		4	275,351	
5	Decr	eases not included in line 2 (itemize)		5		<u>.</u>
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	275,351	<u>.</u>
022	e				Form 990-PF (200)9)

(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.)			P-	(b) How acquired P - Purchase D - Donation		acquired day, yr.)	(d) Date sold (mo., day, yr.)	
1a				1	Donation	_		
b NON	VE .							
<u>c</u>				<u> </u>				
<u>d</u>				ļ <u>.</u>				
<u>e</u>	(O Decree of the cold	1		L				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Sain or (loss) s (f) minus (
<u>a</u>				<u> </u>				
<u>b</u>			<u> </u>		-			
c d								
e								
	gain in column (h) and owned by	the foundation	n on 12/31/69			I) Gains ((Col. (h) gain i	minus
(i) F.M V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any				cò	l. (k), but	not less than (from col (l	-0-) or	
a								
b								
С								
d						_		
e					1			
2 Capital gain net income or (net cap	$ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases} $			}	2	·-·		
3 Net short-term capital gain or (loss		nd (6):						
If gain, also enter in Part I, line 8, c	olumn (c).			 				
If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	der Section 4940(e) for	Reduced	Tax on Net	Inve	stment In	come		
If section 4940(d)(2) applies, leave thi Was the foundation liable for the section If "Yes," the foundation does not qualif Enter the appropriate amount in ea	on 4942 tax on the distributable am	mplete this pa	art.					Yes X No
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying dis	tributions	Net value of no	(c) ncharit	able-use assets		Distribi	(d) ution ratio ded by col. (c))
2008	· ·	8,608.			655,012		(.,,	.226878
2007	9	8,244.		1,	097,72	5.		.089498
2006		7,650.			695,874			.111586
2005	2	<u>4,120.</u>			308,748			.078122
2004		500.			<u>234,09</u>	5.		.002136
2 Total of line 1, column (d)						2		.508220
3 Average distribution ratio for the 5- the foundation has been in existence		on line 2 by 5,	or by the number	of year	S	3		.101644
4 Enter the net value of noncharitable	e-use assets for 2009 from Part X, I	line 5				4		304,338.
5 Multiply line 4 by line 3						5		30,934.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6		0.
7 Add lines 5 and 6						7		30,934.
8 Enter qualifying distributions from	Part XII, line 4					8		133,745.
If line 8 is equal to or greater than I	ine 7, check the box in Part VI, line	1b, and comp	olete that part using	g a 1%	tax rate.			

_	n 990-PF (2009) DEKKER FOUNDATION	<u> 06 – </u>	<u>1479</u> !	<u>508</u>		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ir	ıstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔙 and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	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-)	2				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6						
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 784		ļ			
	Exempt foreign organizations - tax withheld at source 6b	Ť				
	Tax paid with application for extension of time to file (Form 8868) 6c	┪				
	Backup withholding erroneously withheld 6d	┨				
	Total credits and payments. Add lines 6a through 6d	٦,			7	84.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				04.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. 9				
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			7	84.
	Enter the amount of line 10 to be. Credited to 2010 estimated tax		 			0.
	Int VII-A Statements Regarding Activities		<u> </u>			<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve				Yes	No
• •	any political campaign?	ie iii	}	1a		X
h	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 publish		}	טו		Α_
	distributed by the foundation in connection with the activities.	ieu oi				
•	Did the foundation file Form 1120-POL for this year?					х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		F	1¢		
u	(1) On the foundation \blacktriangleright \$ 0 (2) On foundation managers. \blacktriangleright \$					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	•				
6	managers. > \$ 0.	,	`			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		x
	If "Yes," attach a detailed description of the activities.				_	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A [4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					ļ
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st	ate law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		Γ	7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	CT					
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					1
	of each state as required by General Instruction G? If "No," attach explanation			8ь	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	alendar	Ī			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		_	10_		X
			Form		-PF	(2009)

	990-PF (2009) DEKKER FOUNDATION	06-1479	508		Page 5
Pa	art VII-A Statements Regarding Activities (continued)				
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? Website address N/A		_ 13	X	<u> </u>
14		▶203-22	6-3	152	
•	Located at ▶ 8 WELLS HILL ROAD, WESTON, CT	ZIP+4 ▶06			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	2 P <u>33</u>		•	
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 10 1		<i>,</i>	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
12	During the year did the foundation (either directly or indirectly):				110
	• • • • • • • • • • • • • • • • • • • •	es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	C3 (22) NO			
	<u> </u>	es X No			
		es X No			
		es X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	· · · · · · · · · · · · · · · · · · ·	es X No			
	(6) Agree to pay money or property to a government official? (Exception Check "No"	00 [22] 100			
	If the foundation agreed to make a grant to or to employ the official for a period after				
		es X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here	▶ □	"		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
•	before the first day of the tax year beginning in 2009?		10		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(j)(3) or 4942(j)(5)):				
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	ıa			
		es X No			
	If "Yes," list the years				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	t			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack	1			
	statement - see instructions.)	N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	>				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	es X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons at				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to or				
	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	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	,	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		х

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

Orm 990-PF (2009) DEKKER FOUNDATION Part VII-B Statements Regarding Activities for Which	Form 4720 May Re I	Required (contin	06-14795	08 Page 6
 Part VII-B Statements Regarding Activities for Which 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section). Influence the outcome of any specific public election (see section 4955); any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes. Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53.4945 or in a current notice regarding disaster assistance (see instruorganizations relying on a current notice regarding disaster assistance check is a lift the answer is "Yes" to question 5a(4), does the foundation claim exemption is expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 494. Sa Did the foundation during the year receive any finds directly or indirectly to condition the statement required by Regulations. 	n 4945(e))? or to carry on, directly or indirectly or indirectly or indirectly or indirectly or indirectly or indirectly or described in section der the exceptions described fuctions)? here from the tax because it mainta	ectly, Ye Ye Ye for Ye un Regulations	es X No	5b
 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a part of the foundation in the f	personal benefit contract? shelter transaction? able to the transaction?	Ye	s X No N/A	6b X
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	ınagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(-) Eypapas
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MARCEL DEKKER WELLS HILL ROAD WESTON, CT 06883 HARRIETT DEKKER	TRUSTEE 0.00 TRUSTEE	0.	0.	0.
B WELLS HILL ROAD WESTON, CT 06883 DAVID DEKKER	0.00 TRUSTEE	0.	0.	0.
WELLS HILL ROAD WESTON, CT 06883 RUSSELL DEKKER	0.00 TRUSTEE	0.	0.	0.
WELLS HILL ROAD WESTON, CT 06883	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000	cluded on line 1). If none, (b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Fotal number of other employees paid over \$50,000				
- O.S				000 PE (0000)

Form **990-PF** (2009)

Form 990-PF (2009) DEKKER FOUNDATION	06-1	479508 Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	lation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
Total number of others recovered over CEO 000 for professional courses		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
	at and a fact and a second and a second	
List the foundation's four largest direct charitable activities during the tax year. Include relevant stat number of organizations and other beneficiaries served, conferences convened, research papers pri	istical information such as the	Expenses
1 N/A	555554, 5.65	
1		
2		
3		
4		
D. H.W. D.L.		
Part IX-B Summary of Program-Related Investments	1 10	
Describe the two largest program-related investments made by the foundation during the tax year o	n lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
An other program-related investments. See instructions.		

0. Form **990-PF** (2009)

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, 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	107,169.
b	Average of monthly cash balances	1b	107,169. 201,804.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	308,973.
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	O.
3	Subtract line 2 from line 1d	3	308,973.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,635.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	304,338.
6	Minimum investment return Enter 5% of line 5	6	15,217.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	15,217.
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	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	15,217.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	15,217.
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	15,217.
P	art XII Qualifying Distributions (see instructions)		-
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	133,745.
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	133,745.
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	133,745.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	nualifies f	

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,				
line 7				15,217.
2 Undistributed income, if any, as of the end of 2009	-			
a Enter amount for 2008 only			0.	
b Total for prior years:		<u>-</u>		
, ,		0.		
3 Excess distributions carryover, if any, to 2009:			-	
a From 2004				
b From 2005 8,737.		•		
c From 2006 42,901.				
d From 2007 43,878.				
e From 2008 116,289.				
f Total of lines 3a through e	211,805.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 133,745.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			45.045
d Applied to 2009 distributable amount	110 500			15,217.
e Remaining amount distributed out of corpus	118,528.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below;				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	330,333.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract		-		
lines 4d and 5 from line 1. This amount must			•	
be distributed in 2010		···	·	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				1
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	330,333.			
10 Analysis of line 9:				
a Excess from 2005 8,737.				
b Excess from 2006 42,901.				
c Excess from 2007 43,878.				
d Excess from 2008 116, 289. e Excess from 2009 118, 528.				
e Excess from 2009 118,528.				Form 990-DE (2000)

Part XIV Private Operating F	FOUNDATION	-to-otions and Dark	(II A		1479508 Page 1
				N/A	
1 a If the foundation has received a ruling o		• •	,		
foundation, and the ruling is effective fo			▶ └┌─	1.0.00.00	1
b Check box to indicate whether the found		ig foundation described		4942(j)(3) or L	
2 a Enter the lesser of the adjusted net	Tax year	(1) 0000	Prior 3 years	1 40,000	
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					_
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					_
3 Complete 3a, b, or c for the alternative test relied upon:				•	
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					-
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or	more in assets
at any time during t	ne year-see the i	nstructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation who year (but only if they have contributed in			ntributions received by the	foundation before the	close of any tax
HARRIETT DEKKER					
b List any managers of the foundation who other entity) of which the foundation has			ı (or an equally large portio	on of the ownership of	f a partnership or
None					
2 Information Regarding Contributi			•		
Check here 🕨 📖 if the foundation o					
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations	under other conditions, co	omplete items 2a, b, c	, and d
a The name, address, and telephone num	•	• •			
DEKKER FOUNDATION, C			NT LLC, 203-	-226-3152	
8 WELLS HILL ROAD, W					
b The form in which applications should b	e submitted and informat	ion and materials they	should include:		
c Any submission deadlines: NONE					
d Any restrictions or limitations on awards	s, such as by geographica	il areas, charitable fields	s, kinds of institutions, or o	other factors:	
NONE	, , , , , , , , , , , , , , , , , , ,			•	

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient	Continuation	, anount
a Paid during the year	or substantial contributor	recipient		
See_Statement 5				
Total			▶ 3a	133,745
None				
Total			▶ 3h	0

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)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	Code		we		
a	ļ		<u> </u>		
b	-				
·					
d					
e			<u> </u>		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	133.	
5 Net rental income or (loss) from real estate.		i			
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					
		 -		-	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory		_			
11 Other revenue:					
a					
b					
C	-				
d		· · · · · · · · · · · · · · · · · · ·		·- - ·	·····
e				1 2 2	
12 Subtotal. Add columns (b), (d), and (e)	<u></u> i	0.	<u>[]</u>		0.
13 Total Add line 12, columns (b), (d), and (e)				13	133.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acco	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incom			contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other than b	y providing tu	nas for such purposes).			
	<u> </u>				
					
			-		

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No

1 Did	the organization directly or indirectly engage in any of the follo	wing with any other organization	described in section 501(c) of		Yes	No
the	Code (other than section 501(c)(3) organizations) or in section	527, relating to political organiz	rations?			
a Tra	nsfers from the reporting foundation to a noncharitable exempt	organization of:				
(1)	Cash			1a(1)]	<u>X</u> _
(2)	Other assets			1a(2)		X
b Oth	er transactions.					
(1)	Sales of assets to a noncharitable exempt organization			1b(1)		X
(2)	Purchases of assets from a noncharitable exempt organization	1		1b(2)		Х
(3)	Rental of facilities, equipment, or other assets			1b(3)		
(4)	Reimbursement arrangements			1b(4)		X
(5)	Loans or loan guarantees			1b(5)		Х
	Performance of services or membership or fundraising solicita	ations		1b(6)		X
	aring of facilities, equipment, mailing lists, other assets, or paid			1c		X X X
	ne answer to any of the above is "Yes," complete the following so		avs show the fair market value of the goods		ets.	
	services given by the reporting foundation. If the foundation rec				,,,	
	umn (d) the value of the goods, other assets, or services receive		any management of one mig an angement,	, 00		
a) Line no		ble exempt organization	(d) Description of transfers, transactions, an	ıd sharıno arr	angeme	nte.
	N/A		(b) Description of transfers, transactions, an	id Sharing ari	nigerne	
	-	 .				
	<u> </u>	- v-v				
	<u> </u>					
2a Isti	he foundation directly or indirectly affiliated with, or related to, o	ne or more tax-exempt organiza	tions described			
ın s	ection 501(c) of the Code (other than section 501(c)(3)) or in s	ection 527?		Yes	X	No
			•			
(11 G	'es," complete the following schedule.					
0 11 1	/es," complete the following schedule. (a) Name of organization	(b) Type of organization	(c) Description of relation	nship		
ווס	(a) Name of organization	(b) Type of organization	(c) Description of relation	nship		
וו ס		(b) Type of organization	(c) Description of relation	nship		
D II 1	(a) Name of organization	(b) Type of organization	(c) Description of relation	nship		
0 11 1	(a) Name of organization	(b) Type of organization	(c) Description of relation	nship		
	(a) Name of organization	(b) Type of organization	(c) Description of relation	nship		
	(a) Name of organization N/A					
Under	(a) Name of organization	ccompanying schedules and statemen	nts, and to the best of my knowledge and belief, it i		t,	
Under	(a) Name of organization N/A N/A r penalties of perjury, declare that have examined this return, including a	ccompanying schedules and statemen	nts, and to the best of my knowledge and belief, it is any knowledge			
Under	(a) Name of organization N/A r penalties of perjury, declare that have examined this return, including a complete. Declaration of prerparer (other than taxpayer or fiduciary) is based	ccompanying schedules and statemen	nts, and to the best of my knowledge and belief, it i		at,	
Under	(a) Name of organization N/A r penalties of perjury, declare that have examined this return, including a complete Declaration of preparer (other than taxpayer or fiduciary) is based Signature of officer or trustee	ccompanying schedules and statemen on all information of which preparer ha	nts, and to the best of my knowledge and belief, it is any knowledge Title	is true, correc	-	
Under and c	(a) Name of organization N/A r penalties of perjury, declar that have examined this return, including a complete Declaration of pregarer (other than taxpayer or fiduciary) is based Signature of officer or trustee	ccompanying schedules and statemen	nts, and to the best of my knowledge and belief, it is as any knowledge Title Check if Self-		-	ber
Under and c	(a) Name of organization N/A r penalties of perjury, declar that have examined this return, including a complete Declaration of pregarer (other than taxpayer or fiduciary) is based Signature of officer or trustee	ccompanying schedules and statemen on all information of which preparer had been been been been been been been bee	nts, and to the best of my knowledge and belief, it is any knowledge Title To Check if Preparents	is true, correc	-	ber
Under and c	(a) Name of organization N/A r penalties of perjury, declar that have examined this return, including a complete Declaration of pregarer (other than taxpayer or fiduciary) is based Signature of officer or trustee	ccompanying schedules and statemen on all information of which preparer had been partially to the partial Date.	nts, and to the best of my knowledge and belief, it is as any knowledge Title Check if Self-	is true, correc	-	ber
Under and c	(a) Name of organization N/A repenalties of perjury, declare that have examined this return, including a complete Declaration of preparer (other than taxpayer or fiduciary) is based Signature of officer or futustee Preparer's signature Firm's name (or yours RSM MCGLADREY, INC.) if self-employed). 850 CANAL STREET,	companying schedules and statemen on all information of which preparer has Date Date Date ATH FLOOR	ints, and to the best of my knowledge and belief, it is as any knowledge Title Check if Self- employed Prepa	is true, correc	-	ber
Under	(a) Name of organization N/A r penalties of perjury, declar that have examined this return, including a complete Declaration of pregarer (other than taxpayer or fiduciary) is based Signature of officer or trustee	companying schedules and statemen on all information of which preparer has Date Date Date ATH FLOOR	Title Check if self-employed Prepared Phone no. (203	is true, correc	- 31:	12

Form 990-PF Dividen	ds and	Inter	est from	Secu	rities	Statement	1	
Source	urce		Ca Gross Amount		ital Gains ividends	Column (A) Amount		
DIVIDENDS TAX FREE DIVIDENDS	-		44. 89.		0.		44. 89.	
Total to Fm 990-PF, Part I,	ln 4	133.			0.	1	133.	
Form 990-PF		Tax	es			Statement	2	
Description	Expe	a) nses Books	(b) Net Invenent Inc	est-	(c) Adjusted Net Incom			
2008 FEDERAL TAXES		1,009.	-	0.			0.	
To Form 990-PF, Pg 1, ln 18		1,009.		0.			0.	
Form 990-PF	01	ther E	xpenses			Statement	3	
Description	Expe	a) nses Books	(b) Net Inve		(c) Adjusted Net Incom			
INVESTMENT FEES		330.		330.			0.	
MISCELLANEOUS	!	4. 5,000.		0. 0.			0.	
To Form 990-PF, Pg 1, ln 23		5,334.		330.			0.	
Form 990-PF	Oth	er Inv	estments			Statement	4	
Form 990-PF Description	Oth	Va	estments luation ethod	Вос	ok Value	Statement Fair Market		
	Oth	Va M	luation	Вос	ok Value 107,169.	Fair Marke	t	

	ants and Contributions Paid During the Year	Statement 5		
Recipient Name and Address	Recipient Relationship and Purpose of Grant	Recipient Status	Amount	
AMERICAN CANCER SOCIETY	NONE CONTRIBUTION FOR ASSISTANCE WITH DONEE'S PROGRAM EXP	OTHER PUBLIC CHARITY	100.	
COMMITTEE FOR THE WEIZMANN INSTITUTE	NONE CONTRIBUTION FOR ASSISTANCE WITH DONEE'S PROGRAM EXP	OTHER PUBLIC CHARITY	63,250.	
DAVID DEKKER	NONE CONTRIBUTION FOR ASSISTANCE WITH DONEE'S PROGRAM EXP	OTHER PUBLIC CHARITY	<125.>	
MOUNT SINAI SCHOOL	NONE CONTRIBUTION FOR ASSISTANCE WITH DONEE'S PROGRAM EXP	OTHER PUBLIC CHARITY	5,000.	
NORWALK GRASS ROOTS	NONE CONTRIBUTION FOR ASSISTANCE WITH DONEE'S PROGRAM EXP	OTHER PUBLIC CHARITY	125.	
RESEARCH FOR THE CURE	NONE CONTRIBUTION FOR ASSISTANCE WITH DONEE'S PROGRAM EXP	OTHER PUBLIC CHARITY	1,800.	
RETREAT	NONE CONTRIBUTION FOR ASSISTANCE WITH DONEE'S PROGRAM EXP	OTHER PUBLIC CHARITY	3,800.	
THE BACHMAN STRAUSS PARKINSON FOUNDATION	NONE CONTRIBUTION FOR ASSISTANCE WITH DONEE'S PROGRAM EXP	OTHER PUBLIC CHARITY	59,795.	
Total to Form 990-PF, Part XV	7, line 3a		133,745.	

Form 88	368 (Rev. 4-2009)			Page 2		
Note.	u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed u are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)	Form		▶ X		
Part	II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies r	needed).			
Туре о	Name of Exempt Organization	Emp	loyer identi	fication number		
print	DEKKER FOUNDATION			06-1479508		
File by th extended due date filing the			RS use only			
return Se						
☐ F	type of return to be filed (File a separate application for each return) form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A form 990-BL Torm 990-PF Form 990-T (trust other than above) Form 4720	= 1	orm 5227 orm 6069	Form 8870		
STOP!	Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly file	d Form 886	i8.		
Tele If th If th box ▶ 4	If it is for part of the group, check this box and attach a list with the names and EINs of all request an additional 3-month extension of time until or calendar year 2009, or other tax year beginning this tax year is for less than 12 months, check reason that it is the property of the	memb	ers the exte	ccounting period		
_	ADDITIONAL INFORMATION IS NEEDED IN ORDER TO FILE A CO	MPL	ETE AN	D ACCURAT		
	TAX RETURN.					
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			200		
_	onrefundable credits. See instructions	8a	\$	300.		
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated					
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.			784.		
	Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit			704.		
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions			0.		
	Signature and Verification					
Under p	enalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the , correct, and complete, and that I am authorized to prepare this form.	best o	f my knowled	ge and belief,		
Signatu	Titlo	Data	_			

Form **8868** (Rev. 4-2009)