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### Form **990-PF**

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

OMB No 1545-0052

2009

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

Ī	For c	alen	dar	year 2009, or ta	ax year beginning		, 2009	, and ending	3			,				
				that apply:		nitial Return	of a former p	-	□ Ni-	ame	change		Fin	al return	<u> </u>	
-			-г	Name of foundation	Amended return		Address (	manye	INC	A		identii	fication nu	mber		
	Use IRS I	the abel			RG FAMILY FOU	ΝΟΣΤΙΟΝ				^	06-1			201		
	Other	wise			r P O box number if mail is		street address)	Room/suite		В				instructions)		
		int ype.	دا	250 ROUND	HILL ROAD						(203	) 8	61-65	19		
	See Specific City or town					State ZIP code			c	•	•		pending, check	here >	$\top$	
	Instru	ction	s.   c	SREENWICH			CT	06831		D	1 Foreign o				<b>&gt;</b>	٠П
-	Н	Che		type of organiza	tion: X Section 5	01(c)(3) exe	empt private f	oundation		7	2 Foreign o	rganiza	ations mee	ting the 85% tes	st, check	
_			Sec	tion 4947(a)(1)	nonexempt charitable		ther taxable j		lation	╛╸			computation		<b>.</b>	Ш
				ket value of all asset	ts at end of year JA	_	nethod: X C	ash 📙 Ad	ccrual	E	under se	rounga Stion 50	ation status 07(b)(1)(A)	s was terminated ), check here	¹ ►	. $\square$
		•	i rai	rt II, column (c), line		Other (speci	·	. – – – – -		⊸ F	If the fou	ndatior	nis in a 60	)-month terminal	tion	
	<u> </u>	•	Α.	2,031		t I, column (	d) must be or	cash basis ,			under se	ction 50	)/(b)(1)(B)	), check here		Щ
	Part	ł		nalysis of Re	total of amounts in		venue and	<b>(b)</b> Net in		ent	(c) A			(d) Disbur		ts
			co	lumns (b), (c), a	and (d) may not neces	expense	es per books	Inco	ome		"	ncome	9	for cha		
				rily equal the an ee the instruction	nounts in column (a)	1								(cash ba		<i>(</i> )
_		$\top$	1		grants, etc, received (att sch	))					1		<del></del>	1		
2010	?		2		oundn is not req to att Sch B								-	1		_
$\sim$			3	Interest on sav	ings and temporary									T		
$\rightleftharpoons$				cash investmen			E 077		- C	77.	-			<del> </del>		-
			4 5a	Dividends and inter Gross rents	rest from securities		5,977.		5,9	,,,,				<del>                                       </del>		
2				Net rental income or (loss)				L-6a St	:mt		1	T	DE	HEN/EF	<del></del>	<u> </u>
=	R		6a		sale of assets not on line 10	,	207,999.				1	1 -		PEIVER		
	E		b	Gross sales price fo assets on line 6a	or all2,503,131		•								SC	
<b>y</b>	Ě		7	Capital gain net inci	ome (from Part IV, line 2)			1	89,5	25.		<u> </u>	MAY	2 6 2010		
Z	E N U		8	Net short-term				<u> </u>						~	- jeg	-
SCANNED JUN @ 1	Ĕ	.	9 10 a	Income modific	cations I	<b></b>					<del> </del>	<del>                                     </del>	OGI	EN, U		╀─
ଉ			ıva	Gross sales less returns and allowances			_				j		Oat	<u> </u>	·	<u>j</u>
			b	Less Cost of goods sold	" "								-	1		
			c	: Gross profit/(loss)	(att sch)									1		٠
		•	11	Other income (	(attach schedule)				-				<del>-</del> -			
							010 000		<u> </u>		ļ			<u> </u>		
-	-	_		Total. Add lines	s 1 through 11 ficers, directors, trustees, etc		213,976.	1	95,5	02.	4			<del> </del>		
		- 1	13 14	Other employee sal		·					+		·	<del> </del> -		
		- 1			employee benefits			<u> </u>			·			<del> </del>		
				Legal fees (attach							<u> </u>	•		-		
		A D VI	b	Accounting fees (at	ttach sch) L-16b Str	ıt	5,114.							1		
		N	C	Other prof fees (at	tach sch)		·· · · <u> </u>									
	P	1   ' 5	17	Interest			1.				ļ			ļ		
	P S	T   1	18		see instr ) FEDERAL TAXE	es	4,853 <u>.</u>				<del> </del>			<del> </del>		
	Ą ź	A	19	Depreciation (a sch) and deple										1		
	N v	11	20	Occupancy							·					
		- 1 '	21		ences, and meetings									<u> </u>		
	A I	E   :	22	Printing and pu			<del></del>				<u> </u>					
		P   '	23	Other expenses	s (attach schedule) BANK CHARGE	, ,	22.									
		N   S	24	Total operating	g and administrative				<del></del>		<del> </del>		_			
	!	š		expenses. Add	I lines 13 through 23		9,990.									
		- 1		Contributions, gifts			76,500.							ļ	76,5	00.
		:	26		s and disbursements.		06 400								76 5	^^
-		+	27	Add lines 24 ar Subtract line 20		<del>                                     </del>	86,490.	<del>                                     </del>			1			<del> </del>	76,5	<u>. u.</u>
		- [ '		Excess of reve	nue over expenses			1			ì			1		
				and disbursem	nents		127,486.	<u> </u>	<u> </u>		<del> </del>			<del> </del>		
					ome (if negative, enter -0-)			<del>  1</del>	95,5	02.	· <del> </del>	_		<del></del>		
-				Adjusted net incom	ne (if negative, enter -0-)			<u> </u>						<del></del>		

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Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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Par		osses for Tax on Investmen					
	(a) List and describe 2-story brick warehous	e the kind(s) of property sold (e g , rose, or common stock, 200 shares ML	eal estate, C Company)	(b) How acq P — Purch D — Donat	ase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	NUMEROUS SECURITY T	RANSACTIONS - AVAILABI	LE UPON REQUEST	P		Various	Various
b	CAPITAL GAIN THAT IS UN	RELATED TRADE OR BUSINESS	INCOME-SEE FORM 990T			Various	Various
е				<u> </u>			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa	e		(h) Gain or (e) plus (f) m	inus (g)
а			2,29	5,132.		· <del></del>	207,999.
b	<u> </u>						-18,474.
	·						
						<del>.</del>	
е						<del>_</del>	
	(i) Fair Market Value	ng gain in column (h) and owned by  (j) Adjusted basis	(k) Excess of column	<u></u>	n:	(I) Gains (Coli ain minus column (I	umn (h)
	as of 12/31/69	as of 12/31/69	over column (j), if a		tha	in -0-) or Losses (fi	om column (h))
	0.	0.		0.			207 000
a		0.		· · · ·			207,999. -18,474.
			···	+			-10,4/4.
- 0							
e	•						
	Capital gain net income or (net	capital loss) If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7				100 505
3	Not about tarm conital gain or ()	oss) as defined in sections 1222(5) a	<del></del>	-	_2		189,525.
3	. •	,		ŀ			
	If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see the instructions)	If (loss), enter -0-	·	2		
Dar		Section 4940(e) for Reduce	d Tay on Net Investme	ent Incor	ne		
		ion 4942 tax on the distributable ami	• •	period?		Yes	X No
1	Enter the appropriate amount in	each column for each year, see the	instructions before making	any entries	5		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets	(colu	<b>(d)</b> Distributior imn (b) divided	
	2008	55,000.	1,71	4,931.			0.032071
	2007	102,986.		9,029.			0.058216
	2006	120,000.	2,45	5,616.			0.048868
	2005	175,218.	2,63	1,034.			0.066597
	2004	110,500.	3,13	5,719.			0.035239
2	Total of line 1, column (d)				2		0.240991
		e 5-year base period - divide the tot	al on line 2 by 5 or by the		Ì		
3	number of years the foundation	has been in existence if less than 5	years		3		0.048198
4	Enter the net value of noncharit	able-use assets for 2009 from Part )	K, line 5	-	4		1,783,291.
5	Multiply line 4 by line 3				5		85,951.
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6	···	1,955.
7	Add lines 5 and 6				7		<u>87,906.</u>
8	Enter qualifying distributions from	om Part XII, line 4			8		76,500.
	If line 8 is equal to or greater the Part VI instructions	an line 7, check the box in Part VI,	line 1b, and complete that p	art using a	1% t	ax rate. See the	•

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and addresses

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

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

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06-1485274

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Form 990-PF (2009) THE FEINBERG FAMILY FOUNDATION

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Form 990-PF (2009) THE FEINBERG FAMILY FOUNDATION Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) i Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes 1 a a Average monthly fair market value of securities 1,514,701. **b** Average of monthly cash balances 1 b <u>310,692.</u> c Fair market value of all other assets (see instructions) 1 c 2,340. 1 d ,827,733. d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 2 Acquisition indebtedness applicable to line 1 assets 2 17,285. 3 1,810,448. Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 27,157. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 783,291. Minimum investment return. Enter 5% of line 5 6 89,165. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6 89,165. 2a Tax on investment income for 2009 from Part VI, line 5 2a 3,910. 2b **b** Income tax for 2009. (This does not include the tax from Part VI.) 2 c 3,910. c Add lines 2a and 2b 3 85,255. Distributable amount before adjustments. Subtract line 2c from line 1 4 4 Recoveries of amounts treated as qualifying distributions 5 85,255 6 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 85,255. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc. purposes: a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 76,500. **b** Program-related investments - total from Part IX-B 1 b 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a **b** Cash distribution test (attach the required schedule) 3ь Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 76,500. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) 5 Ω. Adjusted qualifying distributions. Subtract line 5 from line 4 6 76,500.

The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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### Part XIIL Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part I	ΧI,			85,255.
2 Undistributed income, if any, as of the end of 2009				03,233.
a Enter amount for 2008 only			0.	
b Total for prior years: 20, 20, 20				
3 Excess distributions carryover, if any, to 2009:				
a From 2004	0.			
<b>b</b> From 2005 13, 5				
c From 2006	0.			
d From 2007 14,5				
e From 2008	0.			
f Total of lines 3a through e	28,162.			
4 Qualifying distributions for 2009 from Pa				
XII, line 4 ► \$ 76,500 a Applied to 2008, but not more than line 2	<del></del> ,			
••				
<b>b</b> Applied to undistributed income of prior y (Election required — see instructions)	/ears		- · · · · · · · · · · · · · · · · · · ·	
<ul> <li>Treated as distributions out of corpus (Election required — see instructions)</li> </ul>				
d Applied to 2009 distributable amount				76,500.
e Remaining amount distributed out of corp	ous 0.			
5 Excess distributions carryover applied to 2009	8,755.			8,755.
(If an amount appears in column (d), the same amount must be shown in column	(2))			
Same amount must be shown in column	(a).)			
6 Enter the net total of each column as	1			
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	19,407.			
<b>b</b> Prior years' undistributed income. Subtra	oct	0.		
c Enter the amount of prior years' undistrit	out-	•		
ed income for which a notice of deficient	sy 1			
has been issued, or on which the section 4942(a) tax has been previously assessed				
•			· · · · · · · · · · · · · · · · · · ·	
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2008 Subtract line 4a fro				
line 2a Taxable amount — see instructions	· · · · · · · · · · · · · · · · · · ·		0.	
f Undistributed income for 2009. Subtract 4d and 5 from line 1. This amount must				
distributed in 2010	ue			0.
7 Amounts treated as distributions out of		,		
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)			* * * * * * * * * * * * * * * * * * * *	ч
(see instructions)				1
8 Excess distributions carryover from 2004	not			
<ul><li>applied on line 5 or line 7 (see instruction</li><li>Excess distributions carryover to 2010.</li></ul>	ns) 0.			
Subtract lines 7 and 8 from line 6a	19,407.			
10 Analysis of line 9				
a Excess from 2005 4,	344.	·		
<b>b</b> Excess from 2006	0.			
c Excess from 2007 14,	563.			
d Excess from 2008	0.			
e Excess from 2009	0.	<u> </u>		

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, oundation Recipient Purpose of grant or contribution show any relationship to status of Amount any foundation manager or recipient Name and address (home or business) substantial contributor a Paid during the year ASSIST IN PREVENTION ORBIS SIGHTFLIGHT 520 8TH AVE, EXEMPT OF BLINDNESS NY 10018 5,000. NY KIDS IN CRISIS ASSIST IN PROVIDING CRISIS ONE SALEM ST EXEMPT RESOURCES FOR CT COS COB, CT 06807 CHILDREN 10,000. THE CHILD GUIDANCE CENTER OF SOUTHERN CT TP PROVIDE MENTAL HEALTH SUPPORT 103 WEST BROAD STREET EXEMPT FOR CHILDREN AND STAMFORD CT 06901 THEIR FAMILIES 2,500. OPERATION SMILE TO PROVIDE RECONSTRUCTIVE SURGERY 6435 TIDEWATER DRIVE EXEMPT AND HEALTHCARE TO VA 23509 2,000. NORFOLK, INDIGENT CHILDREN THE CHILDREN'S AID SOCIETY ASSIST CHILDREN OF 105 EAST 22ND STREET EXEMPT NEEDY FAMILIES NY 10010 NEW YORK 2,000. See Line 3a statement 55,000. 76,500. Total 3 a **b** Approved for future payment

**Total** 

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Part XVI-A				
Des YVI_A	I Analyei	. At Incama	_Uradiicina	A ctivitine
ran avea	IMILAIVSIS	5 WI IIIC.WIIIE	•FIUGUE.IIIG	ACHVILLES

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded by	section 512, 513, or 514	
Program service revenue.	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
	_		code		(see the instructions)
ab	<u> </u>	-	<del>                                     </del>		
c	<u> </u>				
d	1				
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments		· · · · · · · · · · · · · · · · · · ·			
3 Interest on savings and temporary cash investments			<del>                                     </del>		
4 Dividends and interest from securities			14	5,977.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			<del>                                     </del>		
Net rental income or (loss) from personal property			+		
7 Other investment income	<u> </u>		10	207 000	
Gain or (loss) from sales of assets other than inventory			18	207,999.	
<ul><li>9 Net income or (loss) from special events</li><li>10 Gross profit or (loss) from sales of inventory</li></ul>	<del></del>		+		
11 Other revenue:			+		
			<del>                                     </del>		<u> </u>
ab		.,	+ +		-
С			<del> </del>		
d					
	<del>                                     </del>				
e	1				
e				213,976.	
				213,976. 13	213,976.
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)	lculations.)				213,976.
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  (See worksheet in the instructions for line 13 to verify ca		ishment of Exemp	ot Purpose	13	213,976.
Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in the instructions for line 13 to verify ca  Part XVI-B Relationship of Activities to the	e Accompl		· · ·	13 rs	
Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in the instructions for line 13 to verify ca  Part XVI-B Relationship of Activities to the	e Accompl		· · ·	13 rs	
Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in the instructions for line 13 to verify ca  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which in	e Accompl		· · ·	13 rs	
Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in the instructions for line 13 to verify ca  Part XVI-B Relationship of Activities to the	e Accompl		· · ·	13 rs	
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# Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

_											
	1 Did th descri relatir	ne organization directly of the in section 501(c) of the granization organization	or indirectly en f the Code (oth ons?	gage in any of the foll ner than section 501(c	lowing with (3) organiz	any otho ations)	er organization or in section 52	77,		Yes	No
		fers from the reporting t		noncharitable exemp	ot organizat	on of.					
	<b>(1)</b> C	ash							1 a (1)		X
	(2) 0	ther assets		•					1a (2)		X
	<b>b</b> Other	transactions:									
	<b>(1)</b> S	ales of assets to a nonc	haritable exer	npt organization					1 b (1)		X
	<b>(2)</b> P	urchases of assets from	i a noncharitat	ole exempt organization	on				1 b (2)		X
	<b>(3)</b> R	ental of facilities, equipi	ment, or other	assets					1 b (3)		Χ_
	<b>(4)</b> R	eimbursement arrangen	nents						1 b (4)		X
	<b>(5)</b> Lo	oans or loan guarantees	3						1 b (5)		Χ_
	<b>(6)</b> P	erformance of services	or membershij	o or fundraising solicit	tations				1 b (6)		X
	c Sharıı	ng of facilities, equipme	nt, mailing list	s, other assets, or par	id employee	es			1c		X
	d If the	answer to any of the ab oods, other assets, or se ransaction or sharing ari	ove is 'Yes,' cervices given to	omplete the following	schedule (	Column (	(b) should alway	ys show the fair r	market value et value in	of	
-	Line no	(b) Amount involved		f noncharitable exempt orga				isfers, transactions, a		aement	
۱¢	) Lille IIO	(b) Amount involved	(C) Name o	i noncharitable exempt orga	anization	(4)	Description of trai	isiers, transactions, a	ilu sharing arran	yemena	<u>,                                    </u>
				-							
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				.=.				<del> </del>			—
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	descr	foundation directly or in ibed in section 501(c) o s,' complete the followin	f the Códe (otl	ted with, or related to, ner than section 501(c	, one or mo (3)) or in s	re tax-e section 5	xempt organiza 527?	tions	Yes	X	No
_		(a) Name of organization		(b) Type of or	rganization		(4	) Description of	relationship		
_											
	Under pena complete	alties of perjury, I declare that I Declaration of preparer (other)	have examined the	is return, including accompar uciary) is based on all inform	nying schedules nation of which	and state preparer h	ments, and to the boas any knowledge	est of my knowledge a	nd belief, it is trui	e, correc	t, and
;	<b></b>	$\sim$ $\sim$ $\sim$ $\sim$	CA			15	112/10	<b>&gt;</b>			
	Sign	ature of officer of trustee				Date		Title			
		1 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1		7.0-		Date	://	Check if	reparer's Identify	ing num	ber rs)
	Paid	Preparer's signature				1	10/0	I self-	See <b>Signature</b> in 200166473		ə <i>)</i>
	Pre- parer's	Firm's name (or STEV)	EN MOSKOW	ITZ CPA PC				EIN >	0010047	<u>,                                     </u>	
	Use	yours if self-		INS RD 5th Fl	oor						
	Only	address and	YTOWN	LIG ND JUI FI		Y 10	591-5139	Phone no ► (	914) 366	-671	. 4
3/		I TANK						T. Horic Ho	Form <b>99</b>		
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### Form 990-PF Part I, Line 6a

### **Net Gain or Loss From Sale of Assets**

2009

ame		Employer Identification Number
THE FEINBERG FAMILY FOUNDAT	TION	06-1485274
Asset Information:		
Description of Property: SEC	URITIES TRANSACTIONS	
Date Acquired Various	How Acquired Purchased	<del></del>
Date Sold Various	Name of Buyer	
Sales Price. 2,503,131.	Cost or other basis (do not reduce by depreciation)	2,295,132.
Sales Expense.	Valuation Method:	
Total Gain (Loss): 207, 9	999. Accumulation Depreciation:	
Description of Property:	·	
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method:	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property.		
Date Acquired	How Acquired:	
Date Sold	Name of Buyer:	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation	
Description of Property.		
Date Acquired:	How Acquired:	
Date Sold	Name of Buyer:	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method.	
Total Gain (Loss):	Accumulation Depreciation.	
Description of Property:		
Date Acquired	How Acquired:	
Date Sold.	Name of Buyer:	
Sales Price.	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method·	
Total Gain (Loss)	Accumulation Depreciation.	
Description of Property:	·	
Date Acquired	How Acquired:	
Date Sold	Name of Buyer	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method <sup>.</sup>	
Total Gaın (Loss)	Accumulation Depreciation:	
Description of Property.		
Date Acquired	How Acquired	· · · · · · · · · · · · · · · · · · ·
Date Sold	Name of Buyer:	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense:	Valuation Method:	<u> </u>
Total Gain (Loss):	Accumulation Depreciation:	<u> </u>
Description of Property:		
Date Acquired:	How Acquired:	
Date Sold:	Name of Buyer	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense.	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	

## Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Line 3a Statement				
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				Person or Business
AMERICAN RED CROSS  2025 E STREET NW  WASHINGTON DC 20006		EXEMPT	TO SUPPORT DISASTER RELIEF PROGRAMS	Person or Business X 2,500. Person or Business
KING LOW HEYWOOD THOMAS ANNUAL FUND 1450 NEW FIELD AVE STAMFORD CT 06905		EXEMPT	TO HELP SUPPORT SCHOOL PROGRAMS	Person or Business X 19,000. Person or
MAKE-A-WISH FOUNDATION 3550 N CENTRAL AVE		EXEMPT	TO GRANT WISHES OF CHILD WITH LIFE THREATENING	Person or Business X
PHOENIX, AZ 85012			ILLNESSES	Person or Business
THE RONALD MCDONALD HOUSE OF NY 405 EAST 73RD STREET NEW YORK NY 10021		EXEMPT	PROVIDE ACCOMODATIONS FOR PEDIATRIC PARIENTS	Person or Business X 2,000. Person or
CITY HARVEST			FIGHTING HUNGER	Business Person or
575 EIGHTH AVE NEW YORK, NY 10018		EXEMPT		Business X 2,000. Person or Business
BOYS AND GIRLS CLUB OF GREENWICH 4 HORSENECK LANE GREENWICH, CT 06830		EXEMPT	TO PROVIDE CLUB PROGRAMS & SERVICES	Person or Business X 10,000. Person or
UNITED WAY OF GREENWICH  1 LAFAYETTE COURT  GREENWICH CT 06830		EXEMPT	TO SUPPORT  COMMUNITY OUTREACH PROGRAMS	Person or Business X 2,500.
GREANTON CI 06830				Person or Business

Form 990-PF, Page	11, Part XV,	line	За
Line 3a statement			

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year SAVE THE CHILDREN 54 WILTON ROAD WESTPORT CT 06880		EXEMPT	HELP IMPOVERISHED CHILDREN & FAMILIES	Person or Business X  2,000.  Person or Business
THE MCCARTON FOUNDATION 350 EAST 82ND ST NEW YORK, NY 10028		EXEMPT	PROVIDE SUPPORT FOR CHILDREN WITH AUTISM	Person or Business X 2,000. Person or
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND ST NEW YORK, NY 10168		EXEMPT	TO HELP PEOPLE FLEEING RACIAL AND ETHNIC PERSECUTION	Person or Business X 2,000. Person or Business
GREENWICH HOSPITAL  89 LAKE AVENUE  GREENWICH CT 06830		EXEMPT	TO PROVIDE QUALITY HEALTHCARE SERVICES	Person or Business X

Total

55,000.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STEVEN MOSKOWITZ CPA	ACCOUNTING	5,114.			

Total

5,114.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

	End of Year			
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value		
PORTFOLIO INVESTMENTS	1,446,751.	1,810,773.		

Form 990-PF, Page 2, Part II, Line 10b

Continued

,	-Ottu	990-6	г, г	age	۷,	ran	н,	Line	IUL
١	L-10b	Stmt							

		End of Year		
Line 10b - Investments - Cor	· I	Book Fair Market Value Value		
Total		46,751. 1,810,773.		

Form 990-PF, Page 2, Part II, Line 22

Otner	LIAD	Stmt
0	-145	•

Line 22 - Other Liabilities:	Beginning Year Book Value	Ending Year Book Value
DUE TO BROKER	40,789.	0.
DUE TO ORACLE INVESTMENT MANAGEMENT	0.	5,000.
Total	40,789.	5,000.