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Form **990-PF**

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.

2009

OMB No 1545-0052

For	calen	dar year 2009, or tax year beginning		, and ending		
G (Check	all that apply: Initial return	Initial return of a fo	rmer public charity	Final return	1
		Amended return	Address chang	ge <u> </u>	Name change	
Hea	the l	Name of foundation			A Employer identification	number
	abel.					
	erwi		EE		06-1535337	1
	print	Number and street (or P O box number if mail is not d	elivered to street address)	Room/suite	B Telephone number	
	r type	DO EDGEMATER DRIVE			203-703-37	41
	Spe				C if exemption application is p	pending, check here
Inst	ructio	WILTON, CT 06897	_		D 1. Foreign organization	
H (Check	type of organization: X Section 501(c)(3) e	xempt private foundation	•	Foreign organizations me check here and attach or	eeting the 85% test, omputation
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	E If private foundation sta	
I Fa	air ma	rket value of all assets at end of year J Account	ing method: X Cash	Accrual	under section 507(b)(1	
(fi	rom F	Part II, col (c), line 16)	ther (specify)		F If the foundation is in a	
•	\$	973,720. (Part I, colu	ımn (d) must be on cash b	pasis)	under section 507(b)(1	
Pa	art I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	3,750.	•	N/A	
	2	Check X of the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	5.	5.		STATEMENT 1
	4	Dividends and interest from securities	8,355.	8,348.		STATEMENT 2
	5a	Gross rents				
		Net rental income or (loss)				
	62	Net gain or (loss) from sale of assets not on line 10	16,852.			
Revenue	b	Gross sales price for all assets on line 6a 50,131.			RFC	FIVED
ě	7	Capital gain net income (from Part IV, line 2)		16,852.		70
Æ	8	Net short-term capital gain			4	n 7 2010 O
20	9	Income modifications			SEP	10 TO 10
(A)	10a	Gross sales less returns and allowances			W	<u> </u>
SCANNED	١.	Less Cost of goods sold			agn	FNIIT
<u></u>		Gross profit or (loss)				
m	l	Other income		y		
	12	Total Add lines 1 through 11	28,962.	25,205	,	
ا ا	13	Compensation of officers, directors, trustees, etc	0.	0.	,	0.
ם	14	Other employee salaries and wages				
- 1	15	Pension plans, employee benefits		· · · · · · · · · · · · · · · · · · ·		
Ses	16a	Legal fees				
s =	Ь	Accounting fees				
EXP.	C	Other professional fees				
ر آھ	17	Interest	4,149.	4,149.		0.
rati	18	Taxes				
ist	19	Depreciation and depletion				
Ē	20	Occupancy				
Ą	21	Travel, conferences, and meetings				
P	22	Printing and publications				
<u> </u>	23	Other expenses STMT 3	5,899.	5,899	,	0.
atir	24	Total operating and administrative				
Operating and Administrative		expenses Add lines 13 through 23	10,048.	10,048	,	0.
Ō	25	Contributions, gifts, grants paid	75,925.			75,925.
	26	Total expenses and disbursements				
		Add lines 24 and 25	85,973.	10,048	,	75,925.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	-57,011.			
	l .	Net investment income (if negative, enter -0-)		15,157	,	
_		Adjusted net income (if negative, enter -0-)			N/A	
0225	~ -					

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions

06-1535337 Page 2

_			Charles FERARIS, TROSTEE OC Beginning of year En				
Р	<u>art</u>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	1.				
	į	Savings and temporary cash investments	68,310.	5,146.	5,146.		
		Accounts receivable >					
	_	Less; allowance for doubtful accounts					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable					
		Less; allowance for doubtful accounts					
Ø	8	Inventories for sale or use		-	<u> </u>		
Assets	9	Prepaid expenses and deferred charges					
Ą		Investments - U.S. and state government obligations					
	l	Investments - corporate stock STMT 4	347,183.	348,949.	325,453.		
	i	Investments - corporate bonds					
	1	Investments land, buildings, and equipment basis					
		Less accumulated depreciation					
	12	Investments - mortgage loans	`				
	13	Investments - other STMT 5	572,619.	577,007.	643,121.		
		Land, buildings, and equipment: basis	,	,			
		Less accumulated depreciation					
	15	Other assets (describe ▶)					
	"						
	16	Total assets (to be completed by all filers)	988,113.	931,102.	973,720.		
_	T .	Accounts payable and accrued expenses					
	18	Grants payable					
s	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
api	21	Mortgages and other notes payable					
ت	1	Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here		·			
		and complete lines 24 through 26 and lines 30 and 31.	i				
or Fund Balances	24	Unrestricted					
<u>la</u> n	25	Temporarily restricted					
Ва	26	Permanently restricted					
Pur	ļ	Foundations that do not follow SFAS 117, check here					
Ę	l	and complete lines 27 through 31.					
S.	27	Capital stock, trust principal, or current funds	882,014.	882,014.			
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	106,099.	49,088.			
Š	30	Total net assets or fund balances	988,113.	931,102.			
	31	Total liabilities and net assets/fund balances	988,113.	931,102.	 		
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances				
_				1 1			
		I net assets or fund balances at beginning of year - Part II, column (a), line 3	BU		000 113		
	•	st agree with end-of-year figure reported on prior year's return)		11	988,113.		
		r amount from Part I, line 27a		2	-57,011.		
		r increases not included in line 2 (itemize)		3	931,102.		
		lines 1, 2, and 3 eases not included in line 2 (itemize)		4	931,102.		
			luma (h) lina 20	5 6	931,102.		
6	ı Uld	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	unn (v), mie 30		Form 990-PF (2009)		

Page 3

Part IV Capital Gains	and Lo	osses for Tax on In	vestmen	Income	,					
(a) List and desci 2-story brick wa	ribe the ki rehouse;	ind(s) of property sold (e.g. or common stock, 200 shs	, real estate, . MŁC Co.)		(b)	How ac - Purcl - Dona	nase į '	c) Date acc (mo., day,		(d) Date sold (mo., day, yr.)
1a LONG TERM CAPI	TAL (GAIN - DOWNT	OWN AS	SOC				ARIO	US	VARIOUS
b SHORT TERM CAP				•				ARIO		VARIOUS
c 9,000 SHS GOLD					,			6/13		12/31/09
d CAPITAL GAINS				-				<u> </u>		
e			·- ·- ·-							
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale			1	(h) Gain (e) plus (f		
a 41,130.			•							41,130.
b				24,27	79.					-24,279.
c 9,000.				9,00						0.
d 1.										1.
e										
Complete only for assets showing	ıg gain in	column (h) and owned by t	the foundation	on 12/31/69			(1) (Gains (Col.	(h) gain	minus
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			còl. (k), but not Losses (fr	less tha	n -0-) o r
a										41,130.
<u>a</u> b										-24,279.
C										0.
d										1.
e				* 1						
		<i>C</i>	5							, , , , , , , , , , , , , , , , , , , ,
2 Capital gain net income or (net ca	pital loss	$ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases} $	in Part I, line · in Part I, line	<i>1</i> 7	}	2				16,852.
3 Net short-term capital gain or (los	s) as def	ined in sections 1222(5) an	d (6):		٠, ا					
If gain, also enter in Part I, line 8,	column (c).							/-	
If (loss), enter -0- in Part I, line 8		2	Dadwaad	L Tour on No.		3			N/A	<u> </u>
		Section 4940(e) for					ient inco	me		
(For optional use by domestic private	e foundati	ions subject to the section 4	1940(a) tax on	i net investment ir	ncome	e.)				
If section 4940(d)(2) applies, leave the	nis nart hi	lank								
, ,, , ,,	·									
Was the foundation liable for the sec	tion 4942	tax on the distributable am	ount of any ye	ear in the base pe	riod?					Yes X No
If "Yes," the foundation does not qual										
1 Enter the appropriate amount in	each colu	mn for each year; see instru	uctions before	making any entri	es.					
(a) Base period years		(b)			(c)					(d) bution ratio
Calendar year (or tax year beginni	ng ın)	Adjusted qualifying dist		Net value of no	ncna				ol. (b) di	vided by col. (c))
2008			1,911.				<u>7,983.</u>			.143637
2007			3,247.		_1		<u>8,884.</u>			.139226
2006			3,113.				<u>8,863.</u>			.141781
2005			<u>4,953.</u>				<u>3,799.</u>			.120521
2004		8	<u>6,255.</u>		<u>1</u>	<u>,08</u>	<u>5,032.</u>			.079495
2 Total of line 1, column (d)								2		.624660
3 Average distribution ratio for the	5-year ba	se period - divide the total o	on line 2 by 5,	or by the number	r of ye	ars				
the foundation has been in existe	nce if less	s than 5 years						3		.124932
		-								
4 Enter the net value of noncharitat	le-use as	sets for 2009 from Part X, I	lıne 5					4		875,688.
		,								
5 Multiply line 4 by line 3								5		109,401.
· ···anapi, ····a · b, ····a o							-			205/1010
6 Enter 1% of net investment incon	ne (1% ni	Part I line 27h)						6		_152.
Citto 178 of the invocation moon	10 (170 0	rruiti, illo 270)								
7 Add lines 5 and 6								7		109,553.
, ,,aa mica a ana a								1		100,000.
8 Enter qualifying distributions from	n Part XII	, line 4						8		75,925.
If line 8 is equal to or greater than		•	1h and com	olete that nart user	າດ ລ 1	% tav i	- rate	· · · · · · · · · · · · · · · · · · ·		
See the Part VI instructions.	1, 0	are oon are are vi, line	. o, and comp	mar part usii	. y u i	, v tu A I	~10·			

10160819 788564 88185

Form 800+F (2009) JAMES PERAKIS TRUSTER 06-1,535,337 Page		PERAKIS FOUNDATION					
1a Exempl operating foundations described in section 4940(x)(2), check here ▶ □ and enter YU/x on line 1. Date of ruling or determination letter. Cattach copy of letter if necessary-see instructions)	Form 990-PF (2009)						
Debtes to fruing or determination lettler:			(e), or 4	1948 - s	ee instru	ictio	ns)
b Domestic Coundations that meet the section 494(be) requirements in Part V, check here)				
of Part Line 27b • 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-) 3 Add lines 1 and 2 4 . 0. 5 Listate A (nonce) bax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3.1 fzero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 fzero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 fzero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 fzero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 fzero or less, enter -0- 5 Tax based on investment income. Subtract line 4 fzero line 5 to 6- 6 Teedds-Psymments. a 2009 estimated tax payments and 2008 overpayment credited to 2009 5 Exempt foreign organizations - tax withheld at source 6 Tax pad with application for extension of time to lite from 8688) 6 Extension organizations - tax withheld at source 7 Tax defects and payments. Add lines is a final line for a fire manual organization organizations - tax withheld at source 8 Tax deal of the total of lines 5 and 8 more than line 7, enter amount owed 9 Tax deal. His total of lines 5 and 8 more than line 7, enter amount owed 9 Tax deal. His total of lines 5 and 8 more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be. Credated to 2010 estimated tax burst on a first organization of line 1 favor the amount of line 10 to be. Credated to 2010 estimated tax 12 During the tax year, dot the foundation and connection with 1 fire activities. 12 During the tax year, dot the foundation line from 120-Pol. for this year? 13 During the tax year, dot the foundation line from 120-Pol. for this year? 14 Ta						_	
e. All other domestic foundations enter 2% of the 27b. Exempt Inregin organizations enter 4% of Part I, time 12, cot. (b) 2 Tax under section 511 (dimestic section 4947(a) (1) trusts and taxable foundations only. Others enter -0-) 3 3 3.03. 4 Subtitle A (income) bax (domestic section 4947(a) (1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. (If zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. (If zero or less, enter -0-) 6 Destinability of the subtitle	b Domestic foundatio	ns that meet the section 4940(e) requirements in Part V, check here 🕒 💹 and enter 1%	þ	1		<u>3</u>	03.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 Subtite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax deu. If the total of lines 5 and 8 so more than line 6 tele (Form 8868) 6 Total credits and payments. Add lines 6s through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if 10 total recition 4 and 8 so more than line 7, enter amount owed 9 Tax deu. If the total of lines 5 and 8 so more than line 7, enter amount owed 9 Tax deu. If the total of lines 5 and 8 so more than line 7, enter amount owed 9 Tax deu. If the total of lines 5 and 8 so more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Tax less than lines 10 total recition 1 lines 10 lines 5 and 8, enter the amount overpaid 11 zero year, and the foundation attempt to milluence any national, state, or local legislation or did in participate or mitrevene in any political campaign? 12 bit if spend more than 5100 during the year (either directly or indirectly) for political purposes (see instructions for defination)? 13 If the answer is 'Yes' to lar or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation the Form 112-POL for this year? 14 Text, "attach a detailed of escription of the activities 15 While the same service of the surface in the surfa	•						
3 303.4 Subtile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 1 as based on investment income. Subtract line 4 from line 3. if zero or less, enter -0- 5 1ax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0- 6 Credist-Payments. 2 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt foreign organizations - tax withheld at source C Tax paid with application for extension of time to file (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 5 ait frough 5d 8 Enter any penalty for underspayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 1			J				_
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5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments. 2 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt foreign organizations - fax withheld at source 1 Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 5a through 6d 8 Enter any penalty for underspayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due, if the folial of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due, if the folial of lines 5 and 8 is more than him 7, enter amount owed 9 Tax due, if the folial of lines 5 and 8 is more than him 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of lines 100 be. Credited to 2010 estimated tax. 12 Tax due, if the folial of lines 5 and 8, enter the amount overpaid 11 Letter the amount of lines 100 be. Credited to 2010 estimated tax. 12 Tax due, if the folial of lines 5 and 8, enter the amount overpaid 13 Letter the amount of lines 100 be. Credited to 2010 estimated tax. 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if participate or intervene in any political campaign? 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if participate or intervene in any political campaign? 15 During the tax year, did the foundation intervent the activities. 16 During the tax year, did the foundation intervent the activities. 17 During the tax year, did the foundation intervent the activities. 18 Lines the foundation the Form 112-POP Life or this year? 19 Lines the foundation has a payment or the activities. 10 Lines the foundation has a characterial or the activities. 10 Lines the foundation has a characterial or the activities. 10 Lines the foundation has a characterial or the activiti		-				3	
6 CredistiPsyments: a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backing withhelding erroreously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Friter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than his local of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line? Is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 loo ic Credited to 2016 estimated tax. 12 Enter the amount of line 10 loo ic Credited to 2016 estimated tax. 13 Enter the amount of line 10 loo ic Credited to 2016 estimated tax. 14 Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participale or intervene in any optical campaign? b Did is spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a defailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation his Form 1120+Did. for this year? 1 Type of the condition of the activities of the activities and copies of any materials published or distributed by the foundation of the activities. 3 Has the foundation have unrelated business gross income of \$1,000 or more during the year: 1 Types, Take the distribution of Form \$90-Pi to the changes 3 Has the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there aliquation, terminant, dissolution, or substantial contraction during the year? 7 Did the foundation have unrelated business gross income of \$1,000 or more during the year? 8 Was there aliquation, terminant, dissolution, or subst	, ,	•					
a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add times 5 and frough 6d 8 Enter any penalty for underpayment of estimated tax. Check here		tment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		3	03.
b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d 8akup withholding erroneously withheld 7 Total credits and payments. Add lines 5 as through 6d 8 Enter any penalty for underpayment of estimated tax. Check here	•	1.1	- 4 6				
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Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 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 state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? 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 If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X	·				-		1
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 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV Enter the states to which the foundation reports or with which it is registered (see instructions) CT b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G² If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV Y 					İ	ĺ	
remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CT 9 If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X			oth the stat	e law			
7 X 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 b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X		_			6	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 b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X	•	•					
8a Enter the states to which the foundation reports or with which it is registered (see instructions) CT b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X				-			1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X	•						
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9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X			,		86	x	
year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	·	•)(5) for cal	endar		 -	
			,, ,		9		x
		· · · · · · · · · · · · · · · · · · ·	esses				

	PERAKIS FOUNDATION				
Form 9	90-PF (2009) JAMES PERAKIS, TRUSTEE	06-1	<u>535337</u>		Page 5
Par	t 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				
5	section 512(b)(13)? If "Yes," attach schedule (see instructions)	-	11		X
12 [Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
,	August 17, 2008?	-	12		X
13 [Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	L
	Website address ► N/A				
		ephone no. ≥ 203			_
	ocated at ► 59 EDGEWATER DRIVE, WILTON, CT	ZIP+4	<u> 06897</u>		
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	.			ـــا
	and enter the amount of tax-exempt interest received or accrued during the year	<u>▶ 15</u>	N	<u>/A</u>	
	t VII-B Statements Regarding Activities for Which Form 4720 May Be Requir	<u>eu</u>		V	NI.
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		-	Yes	No
	During the year did the foundation (either directly or indirectly):	Yes X	N.		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	res LA_	NO		
((2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	Yes X	No		
	a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
,	for the benefit or use of a disqualified person)?	Yes X	No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
•	If the foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days.)	Yes X	No		
ъI	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 1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶[
c l	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not co	orrected			
l	before the first day of the tax year beginning in 2009?		1c		X
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				
ı	before 2009?	Yes X	No		
	If "Yes," list the years ▶,,,,,				
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No				
	statement - see instructions.)	. N/	A 2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	_			
		Yes X	No		
	during the year? If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified		NU		
	may 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 494				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use S				
	Form 4720, to determine if the foundation had excess business holdings in 2009.)	N/	A 3b		1
,	2 25, 15 35.517mile ii tile rearidation rida ericede basiliede ficialinge in 2000/	-1/			

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

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

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

PERAKIS FOUNDATION Form 990-PF (2009) JAMES PERAKIS, TRUSTEE 06-1535337 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained Yes No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? N/A7b b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances TRUSTEE JAMES A. PERAKIS 59 EDGEWATER DRIVE 0.50 0 0 0. WILTON, CT 06897 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deterred compensation	account, othe allowances
NONE				
				.
Total number of other employees paid over \$50,000				

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ion Managers, 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 Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the ced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on $\ln N/A$	nes 1 and 2.	Amount
2		0.
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2000)

P	art X Minimum Investment Return (All domestic foundations mu	ust complete this pa	rt Foreign four	ndations, see	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	, etc., purposes:			
a	Average monthly fair market value of securities			1a	380,775.
b	Average of monthly cash balances			1b	36,728.
C	Fair market value of all other assets			1c	471,520.
đ	Total (add lines 1a, b, and c)	•		1d	889,023.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d		_	3	889,023.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see instructions)		4	13,335.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on	Part V, line 4		5	875,688.
6	Minimum investment return. Enter 5% of line 5			6	43,784.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part.)	f (j)(5) private operatin	g foundations an	d certain	
1	Minimum investment return from Part X, line 6			1	43,784.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	303.		
b	income tax for 2009. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	303.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	43,481.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	43,481.
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 >	(III, line 1		7	43,481.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	oses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	75,925.
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	e, 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	d Part XIII, line 4		4	75,925.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inves	tment			
	income. Enter 1% of Part I, line 27b		,	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	75,925.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years with	en calculating whether	the foundation of	qualifies for the	e section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

PERAKIS FOUNDATION JAMES PERAKIS, TRUSTEE

Form 990-PF (2009)

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Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) 2008 Years prior to 2008 2009 Corpus 1 Distributable amount for 2009 from Part XI, 43,481. 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: 33,404. a From 2004 **b** From 2005 68,129. 88,196. c From 2006 94,709 d From 2007 93,420 e From 2008 377,858 f Total of lines 3a through e 4 Qualifying distributions for 2009 from 75,925 Part XII, line 4: ► \$_ 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) 43,481. d Applied to 2009 distributable amount 32,444 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)) Enter the net total of each column as indicated below:

410,302

0.

33,404

376,898

a Corpus	Add lines 3f,	4c, and 4e	Subtract line 5

b Prior years' undistributed income. Subtract 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 assessed

d Subtract line 6c from line 6b. Taxable amount - see instructions

e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.

f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)

8 Excess distributions carryover from 2004 not applied on line 5 or line 7

Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9:

68,129 a Excess from 2005 88,196. b Excess from 2006 94,709

c Excess from 2007 93,420. d Excess from 2008 32,444 e Excess from 2009

Form 990-PF (2009)

0.

0

0

0

0

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

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JAMES PERAKIS, TRUSTEE Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager or substantial contributor Name and address (home or business) a Paid during the year SEE STATEMENT 6 75,925. **▶** 3a **b** Approved for future payment NONE 0.

Total 923611 02-02-10

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Part XVI-A	Analysis of I	ncome-Producing	Activities
------------	---------------	-----------------	------------

Fator and the state of the stat	Unrelated	business income	Excluded b	by section 512, 513, or 514	4-1
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Amount	
a	-				
b	-			· -	
c	- '		 		
d	_		ļ ļ		
e			 		
	_	 	 		
g Fees and contracts from government agencies	-				
2 Membership dues and assessments			 	· · · · · · ·	- -
3 Interest on savings and temporary cash			1 1	_	
investments			14	8,355.	
4 Dividends and interest from securities			14	8,355.	
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	<u> </u>				
8 Gain or (loss) from sales of assets other			10	16 050	
than inventory			18	16,852.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			 		
11 Other revenue:					
a	l t	· · · · · · · · · · · · · · · · · · ·	 - 		
b			-		
<u> </u>	i i		-		
d	-				
e 12 Subtotal. Add columns (b), (d), and (e)	-	0 .		25,212.	0.
13 Total. Add line 12, columns (b), (d), and (e)	11		· I	13	
(See worksheet in line 13 instructions to verify calculations.	١			10	25,212.
Part XVI-B Relationship of Activities		mplichment of E	vamnt D	urnosas	
		<u></u>			
Explain below how each activity for which in the foundation's exempt purposes (other th			A contributed	d importantly to the accomp	olishment of
the foundation's exempt purposes (other th	an by providing func	is for such purposes).			···· ··· ··· · ··· · · · · · · · · · ·
			· ····		
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			<u></u> -		
					
					
					
					
					

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1		-	rectly engage in any of the following				Yes	No
)(3) organizations) or in section 5		ations?			
а		· · · · ·	ation to a noncharitable exempt or	rganization of:		10/1		.
	(1) C					1a(1)		X
		ther assets				1a(2)		
b		transactions: ales of assets to a noncharital	hla ayampt arganization			1b(1)	l	x
	٠,							X
	٠,		ncharitable exempt organization			1b(2)	-	X
		tental of facilities, equipment, (-	-	1b(3)		X
		eimbursement arrangements		-	•	1b(4) 1b(5)		X
		oans or loan guarantees	embership or fundraising solicitation	one		1b(6)		X
						10(0)		X
0			uling lists, other assets, or paid en		ays show the fair market value of the goods,		L	
C		•		• • •	in any transaction or sharing arrangement,		5615,	
			other assets, or services received		in any transaction of sharing arrangement,	SHOW HI		
a)	Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions, and	sharing a	zangeme	ents
<u>~,</u>	<u></u>	(B) / Intodic involved	N/A	o onompt or gamzation	(b) bescription of dansers, transactions, and	- Siding d		
			N/A					
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		-, , , , , , , , , , , , , , , , , , , 						
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<u>٠</u>	le the	foundation directly or indirect	I graffiliated with, or related to, one	n or more tay-evennt organiza	Lione described			
26		*	r than section 501(c)(3)) or in sec	, ,	alions described	Yes	Γ Υ	No
		s," complete the following sch		Allon 527	L		[_23	7 INO
_) 11 163	(a) Name of org		(b) Type of organization	(c) Description of relations	ship		
		N/A_		(v) type or or garmanent	(0) = 000 p 100 p 1			
_								
_								
					nts, and to the best of my knowledge and belief, it is	s true, corre	ect,	
	and con	nplete Declaration of preparer (other	than taxpayer or iduoary) is based or	all information of which preparer ha				
	*	/ Some A	The The	STEE 1 8/29/10	TRUSTBE			
ě	Sı	gnature of officer of trustee		Date /	Title			
Ĕ		Preparers	111 h		ten 1 Check if Prepar	rer's identif	ying nur	nber
ğ	ئي جَ	signature DANIE		uper ofu la	\$\\\ \\ \Z3\\\ \pi \\ \text{self-employed} \rightarrow \rightarrow \rightarrow \qquad \qq \qq \qq \qq			
יי	Paid Preparer's Use Only	Firm's name (or yours KAHN	· · · · · · · · · · · · · · · · · · ·	A & CO., LTD.	EIN ►			
	rep Jse	if self employed) 800	SOUTH STREET, S					
	4	address and ZIP code WALT			Phone no. 781 -	547-	880	0
				····		orm 99 0		
								. ,

FORM 990-PF INTEREST ON SAVI	NGS A	ND TEM	PORARY C	ASH I	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
INTEREST							5.
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMN A				5.
FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECU	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
DIVIDENDS		8,356.			1.	8,35	
TOTAL TO FM 990-PF, PART I, I	N 4	8,356.		1.		8,355.	
FORM 990-PF	C	THER E	XPENSES	- 		STATEMENT	3
DESCRIPTION	EXPE	(A) ENSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
PORTFOLIO DEDUCTION OTHER EXPENSES		5,890.	5	,890. 9.			0.
TO FORM 990-PF, PG 1, LN 23		5,899.	5	,899.			0.
FORM 990-PF	CC	RPORAT	E STOCK			STATEMENT	4
DESCRIPTION			- · · ·	во	OK VALUE	FAIR MARKE	т
FIDELITY					348,949.	325,4	53.
TOTAL TO FORM 990-PF, PART II	[, LIN	NE 10B			348,949.	325,4	53.

FORM 990-PF OT	HER INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
DOWNTOWN ASSOCIATES II, LP. GOLDMAN SACHS TREASURY FUND	COST COST	477,989. 99,018.	544,103. 99,018.
TOTAL TO FORM 990-PF, PART II, LI	*NE 13	577,007.	643,121.
	AND CONTRIBUTIONS DURING THE YEAR	5	STATEMENT 6
RECIPIENT NAME AND ADDRESS	RECIPIENT RELAT		PIENT ATUS AMOUNT
A BETTER CHANCE OF WILTON, INC PO BOX 7658 WILTON, CT 06897	NONE GENERAL SUPPORT	NONPRO ORGANI	
ALZHEIMERS FOUNDATION OF AMERICA 322 8TH AVE, 7TH FLOOR NEW YORK, NY 10001	NONE GENERAL SUPPORT	NONPRO ORGANI	•
CENTER FOR HOPE 590 BOSTON POST ROAD DARIEN, CT 06820	NONE GENERAL SUPPORT	NONPRO ORGANI	
CHARITY FOLKS 17 BATTERY PLACE, STE 730 NEW YORK, NY 10004	NONE GENERAL SUPPORT	NONPRO ORGANI	•
CURE ALZHEIMER FUND 34 WASHINGTON STREET, SUITE 300 WELLESLEY HILLS, MA 02481	NONE GENERAL SUPPORT	NONPRO ORGANI	
DOCTORS WITHOUT BORDERS 333 7TH AVE, 2ND FLOOR NEW YORK, NY 10001	NONE GENERAL SUPPORT	NONPRO ORGANI	

DEDIVITO	FOUNDATION	TAMEC	DEDVELC	MDIICME
PERAKIS	LOUNDATION	JAMES	PERALIS.	TRUSTE

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I BRANCED I COMPACTION CAMED I BRANCE	b, IRODIL	00	1333337
EPILEPSY FOUNDATION 8301 PROFESSIONAL PLACE LANDOVER, MD 207857223	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	6,000.
FAMILY AND CHILDRENS AGENCY 9 MOTT AVENUE NORWALK, CT 06850	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	500.
FOUNDATION FOR SUSTAINABLE DEVELOPMENT 517 POTRERO AVE, SUITE B SAN FRANCISCO, CA 94110	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	1,000.
HEIFER INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AR 72202	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	1,000.
LONG WHARF THEATRE 222 SARGENT DRIVE NEW HAVEN, CT 06511		NONPROFIT ORGANIZATI	500.
NORWALK GRASS ROOTS TENNIS 15 EASTWOOD ROAD NORWALK, CT 06850	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	100.
NURSING & HOME CARE 180 SCHOOL ROAD, P.O. BOX 489 WILTON, CT 06897	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	500.
OBSESSIVE-COMPULSIVE FOUNDATION 676 STATE STREET NEW HAVEN, CT 06511		NONPROFIT ORGANIZATI	31,000.
PLAYWRIGHTS HORIZONS 416 WEST 42ND STREET NEW YORK, NY 10036	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	775.
ROUNDABOUT THEATRE CO. 231 WEST 39TH STREET, SUITE 1200 NEW YORK, NE YORK 10018	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	2,000.

DEBYRIG	FOUNDATION	.ТАМГС	DEBAKTS	שתיפוומיה
FERMITS	LOCKDALLON	United	T DIVINITO 1	TIOOTH

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v	U-	- 1			J	_	_	•

SILVER HILL HOSPITAL 208 VALLEY ROAD NEW CANAAN, CT 068404398	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	10,000.
STAR, INC. 182 WOLFPIT AVENUE NORWALK, CT 06851	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	500.
THE ACTORS' FUND OF AMERICA 729 SEVENTH AVENUE, 10TH FLOOR NEW YORK, NE YORK 10019	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	2,500.
THE SILVERMINE FUND 1037 SILVERMINE ROAD NEW CANAAN, CT 068404398	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	500.
THERAPEUTIC ADVENTURES P.O. BOX 4668 CHARLOTTESVILLE, VA 22905	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	1,000.
WILTON COMMONS PO BOX 7505 WILTON, CT 06897	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	500.
WILTON CONGREGATIONAL CHURCH 70 RIDGEFIELD ROAD WILTON, CT 06897	NONE GENERAL SUPPORT	CHURCH	4,100.
WILTON LIBRARY ASSOCIATION 137 OLD RIDGEFIELD ROAD WILTON, CT 06897	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	1,500.
AMERICARES FOUNDATION 88 HAMILTON AVENUE STAMFORD, CT 06902	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	600.
WESTPORT COUNTRY PLAYHOUSE 25 POWERS COURT WESTPORT, CT 06880	NONE GENERAL SUPPORT	NONPROFIT ORGANIZATI	500.

PERAKIS	FOUNDATION	JAMES	PERAKIS.	TRUSTE

06-1535337

SWIM ACROSS THE SOUND 2800 MAIN STREET BRIDGEPORT, CT 06606	NONE GENERAL	SUPPORT	NONPROFIT ORGANIZATI	250.
BUILD ON P.O. BOX 16741 STAMFORD, CT 06905	NONE GENERAL	SUPPORT	NONPROFIT ORGANIZATI	200.
NAMI WALKS 241 MAIN STREET, 5TH FL HARTFORD, CT 06106	NONE GENERAL	SUPPORT	NONPROFIT ORGANIZATI	1,100.
RATTLESTICK PLAYWRIGHTS THEATRE 224 WAVERLY PLACE NEW YORK, NY 10014	NONE GENERAL	SUPPORT	NONPROFIT ORGANIZATI	2,000.
TOTAL TO FORM 990-PF, PART XV, LI	INE 3A			75,925.

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

-	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ [X]]
	u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this			
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed For	rm 8868	
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
A core	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete		
Part i	·	•	▶ □	}
All oth	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	exten	sion of time	
	ncome tax returns			
noted (not at you m	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronicationatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or collust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits.	cally if	(1) you want the addition ated Form 990-T Instead,	nal
Туре	Name of Exempt Organization	Emp	loyer identification num	ber
print	PERAKIS FOUNDATION			
	JAMES PERAKIS, TRUSTEE	0	6-1535337	
File by the	for Number, street, and room or suite no. If a PO box, see instructions			
filing you return S	BE ST HEGEWATER DATE			
ınstructı				
	WILTON, CT 06897		·	
Check	type of return to be filed (file a separate application for each return)			
	Form 990 Form 990-T (corporation) Form 47	'2N		
=	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 52			
	Form 990-EZ Form 990-T (trust other than above) Form 60			
	Form 990-PF Form 1041-A Form 88			
	JAMES A. PERAKIS			
	books are in the care of \triangleright 59 EDGEWATER DRIVE - WILTON, CT 06897			
	ephone No ► <u>203-703-3741</u> FAX No ►			3
	ne organization does not have an office or place of business in the United States, check this box	,	▶	<u>}</u>
	is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the		• •	
box 🕨	If it is for part of the group, check this box and attach a list with the names and EINs of all	memb	ers the extension will cov	/er
1	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt	ıl		
	AUGUST 15, 2010 , to file the exempt organization return for the organization named a		The extension	
•	s for the organization's return for			
	► X calendar year 2009 or			
	tax year beginning, and ending		<u> </u>	
2	f this tax year is for less than 12 months, check reason.		Change in accounting pe	eriod
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	Г		
	nonrefundable credits. See instructions	3a	\$	0.
b	f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated			
	ax payments made Include any prior year overpayment allowed as a credit	3b	\$ 1,54	46.
С	Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,			
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)			
	See instructions	3c	\$	0.
Cautio	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	EO for payment instruction	ons
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form 8868 (Rev. 4-	2009)

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Form 8	868 (Rev. 4-2009)			Page 2	2_	
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	x		▶ X		
-	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		3868			
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).					
Part	II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	opies r	eeded)		_	
	Name of Exempt Organization	Empl	oyer iden	tification number	_	
Туре	PERAKIS FOUNDATION					
print	JAMES PERAKIS, TRUSTEE	0	06-1535337			
File by the	Number street and room or suite no. If a P.O. hov. son instructions	For IF	RS use on	ly	_	
due date	* 59 EDGEWATER DRIVE					
filing the return S						
instruction	WILTON, CT 06897				_	
Check	t 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	Fo	rm 5227	Form 8870)	
	Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	Fc	rm 6069			
STOP	! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	slv file	d Form 8	868	_	
3101					_	
	JAMES A. PERAKIS					
	books are in the care of > 59 EDGEWATER DRIVE - WILTON, CT 06897				-	
	ephone No. ► <u>203-703-3741</u> FAX No. ►			. —		
	ne organization does not have an office or place of business in the United States, check this box			▶		
	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)			-	•	
box		memb	ers the ex	tension is for.	_	
	request an additional 3-month extension of time until NOVEMBER 15, 2010					
	For calendar year 2009, or other tax year beginning, and ending					
	If this tax year is for less than 12 months, check reason		Change in	accounting period	ı	
	State in detail why you need the extension	חחם	DADE	A COMPLEMI	_	
	ADDITIONAL TIME IS NECESSARY TO GATHER INFORMATION TO	PKE	PARE	A COMPLETI	ᆫ	
	AND ACCURATE TAX RETURN.				_	
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			0		
	nonrefundable credits. See instructions	8a	\$	0	•	
	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		•	1.546		
	previously with Form 8868	8b	\$	1,540	•	
	Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit		\$	0		
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Signature and Verification	8c	>		•	
Undo	Signature and verification penalties of perjury. Leckere that his form, including accompanying schedules and statements, and to the	hact c	f my knowl	adae and holief		
it is tru	penantes of perjury, 1 geogre that charles examined this form, including accompanying schedules and statements, and to the e, correct, and complete, and that care authorized to prepare this form.			,		
Signati		Data		14/10		
oigiiall	THE CEA	שומוני	- ''		_	

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Form 8868 (Rev. 4-2009)