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### **EXTENSION FILED**

Department of the Treasury

Return of Private Foundation

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

OMB No 1545-0052 20**09** 

Treated as a Private Foundation

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements , 2009, and ending For calendar year 2009, or tax year beginning Initial return of a former public charity G Check all that apply Initial return Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS label. THE OLIVER R. GRACE CHARITABLE FOUNDATION 11-3105739 Otherwise, Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see page 10 of the instructions) print C/O WALDMAN, HIRSCH AND COMPANY or type. ONE PENN PLAZA, SUITE 705 705 (212)643-4422 See Specific If exemption application is pending, check here City or town, state, and ZIP code Instructions. 1 Foreign organizations, check here NEW YORK, NY 10119 2. Foreign organizations meeting the 85% test, check here and attach H Check type of organization | X | Section 501(c)(3) exempt private foundation computation . . . . . . Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust If private foundation status was terminated J Accounting method | X Cash Fair market value of all assets at end under section 507(b)(1)(A), check here . Other (specify) of year (from Part II, col (c), line If the foundation is in a 60-month termination 583,435. (Part I, column (d) must be on cash basis ) 16) ▶ \$ under section 507(b)(1)(B), check here . > Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per income income may not necessarily equal the amounts in purposes books column (a) (see page 11 of the instructions) (cash basis only) 25 Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to attach Sch B. . . . . . . . . . 3,321 3,321 3,321. ATCH 1 3 interest on savings and temporary cash investments 13,311 13,311 13,311 Dividends and interest from securities b Net rental income or (loss) 9,553 Net gain or (loss) from sale of assets not on line 10 Revenue Gross sales price for all 352,867 assets on line 6a 9,553. Capital gain net income (from Part IV, line 2). Net short-term\_capital.gain Income modifications CEIVED. 10 a Gross sales less return and allowances b Less Cos of g c Gross profit or (loss) (attach schedule) 555 555 555 ATCH Other income\_(attach.schedule) 11 26,749 17,196 26,774 Total. Add lines Othrough 1 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) **b** Accounting fees (attach schedule) . . . . . c Other professional fees (attach schedule) . . . 17 968 968 968 Taxes (attach schedule) (see page 14 of the instructions) 18 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings 22 Printing and publications . . . . 45 45 45 Operating Other expenses (attach schedule) ATCH 4. 23 24 Total operating and administrative expenses. 1,013 1,013 1,013 Add lines 13 through 23 . . . . . . . . 78,020. 78,020 79,033 78,020. 1,013. 1,013.Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12. -52,259a Excess of revenue over expenses and disbursements 25,736. b Net investment income (if negative, enter -0-) 16,183 c Adjusted net income (If negative, enter -0-).

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 9E1410 2 000 I 300 6B H587 11/2/2010 10:29:33 PM V 09-8.4

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Form 990-PF (2009)

PAGE

Part I	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	20,117.	37,077.	37,077.
2	Savings and temporary cash investments	180,631.	104,596.	104,596.
3	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 (attach schedule) (see page 16 of the instructions)			
7	Other notes and loans receivable (attach schedule)			
'	Less: allowance for doubtful accounts			
رم 8 ام				
#	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·		- <u>-</u>
988	Prepaid expenses and deferred charges	164,577.	151,825.	151,825.
~1	Investments - U S and state government obligations (attach schedule)	200,397.	219,357.	262,197.
•	Investments - corporate stock (attach schedule)	27,740.	27,740.	27,740.
11 °	Investments - corporate bonds (attach schedule)	27,740.	27,740.	
	(attach schedule)			
12	Investments - mortgage loans Investments - other (attach schedule) ATCH 5	19,567.	0.	0.
13 14		19,567.		
	equipment basis Less accumulated depreciation (attach schedule)			
15	Other assets (describe			
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	613,029.	540,595.	583,435.
17	Accounts payable and accrued expenses			· · · · · · · · · · · · · · · · · · ·
18	Grants payable			
	Deferred revenue			
<b>≣</b> 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 02 19 20 21 22 22 22 22 22 22 22 22 22 22 22 22	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe			
23	Total liabilities (add lines 17 through 22)			
- 23				
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
9 24	Unrestricted			
E 25	Temporarily restricted			
B 26	Permanently restricted			
24 25 26	Foundations that do not follow SFAS 117,			
Ē	check here and complete lines 27 through 31. ▶		ŀ	
ි 27	Capital stock, trust principal, or current funds			
	Paid-in or capital surplus, or land, bldg, and equipment fund			
Net Assets	Retained earnings, accumulated income, endowment, or other funds	613,029.		
¥ 30	Total net assets or fund balances (see page 17 of the			
힐		613,029.		
31	Total liabilities and net assets/fund balances (see page 17			
3 '		613,029.		
	of the instructions)			
	Analysis of Changes in Net Assets or Fund E		agree with	
	I net assets or fund balances at beginning of year - Part II,			613,029.
	of-year figure reported on prior year's return)			-52,259.
2 Ente	r amount from Part I, line 27a		2	32,233.
3 Othe	r increases not included in line 2 (itemize) ▶		3	560,770.
4 Add	lines 1, 2, and 3 eases not included in line 2 (itemize) ► ATTACH	<u> </u>		20,175.
5 Decr	eases not included in line 2 (itemize) ATTACH	MENT 6	5	540,595.
6 Tota	l net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II, column (b),	line 30 6	540, 595.

P	art IV Capital Gains	s and Losses for Tax on Inv	estment Income	-			
		d describe the kind(s) of property sold (	<del>-</del>	(b) How acquired P-Purchase	(c) Date acquired	(d) Date sold (mo , day, yr )	
_	CED DADE IN COUR	rick warehouse, or common stock, 200	shs MLC Co)	D-Donation	(mo., day, yr)	(	
<u>1a</u>		.DOPE		<del></del>		<u> </u>	
_ <u>b</u>				<del> </del>	<u> </u>		
			<del>-</del>				
_ <u>d</u>			<del></del>				
_ <u>e</u>	·		(a) Cook as albas basis			<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini		
<u>a</u>							
b	<u> </u>	<u> </u>					
				<b></b>		<del></del>	
_d							
_е							
<u>C</u>	omplete only for assets s	howing gain in column (h) and owr			Gains (Col (h) g		
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) col (k), but not less than -0-) or over col (j), if any Losses (from col (h))				
а							
	)						
	;						
d	]						
_e	) <u> </u>						
2	Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		9,553.	
3	Net short-term capital gair	 n or (loss) as defined in sections 12					
	If gain, also enter in Part I,	, line 8, column (c) (see pages 13	and 17 of the instructions)				
	ort V. Qualification U	line 8	god Tay on Not Investment Inc	3			
						<del></del>	
(F	or optional use by domesti	c private foundations subject to the	e section 4540(a) tax on het investi	inent inco	ine )		
lf (	section 4940(d)(2) applies,	leave this part blank					
	30000011 4040(d)(2) applies,	reave the part statist					
		the section 4942 tax on the distrib		ase period	d?	Yes X No	
lf'		not qualify under section 4940(e)					
1		ount in each column for each year	, see page 18 of the instructions be	fore mak			
c	(a) Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by		
	2008	91,541.	646,677.			0.141556	
_	2007	87,900.	743,008.			0.118303	
	2006	98,474.	776,926.			0.126748	
	2005	122,521.	759,979.			0.161216	
	2004	117,163.	827,119.			0.141652	
					-		
2	Total of line 1, column (d)			2		0.689475	
3		for the 5-year base period - divide	the total on line 2 by 5, or by the				
		dation has been in existence if less		3		0.137895	
	•		•				
4	Enter the net value of nor	ncharitable-use assets for 2009 fro	m Part X, line 5	4		523,462.	
5	Multiply line 4 by line 3			5		72,183.	
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		257.	
-		, , , , , , , , , , , , , , , , , , ,			<del></del>		
7	Add lines 5 and 6			7		72,440.	
8	Enter qualifying distribution	ons from Part XII, line 4	n ann an ann an ann an ann an an an an a	8	100mm = 40/ ±=-	78,020.	
	If line 8 is equal to or gree Part VI instructions on page	eater than line 7, check the box in	n Paπ VI, line Tb, and complete t	пат рап	using a 1% tax	crate see the	

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	<u>ne ins</u>	truction	ons)
1 a	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 ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2	257.
	here X and enter 1% of Part I, line 27b			
С	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		2	257.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		2	57.
6	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 340.			
	Exempt foreign organizations-tax withheld at source 6b 0.			
c	Tax paid with application for extension of time to file (Form 8868) 6c 810.			
	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d		1,1	5û.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			
9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		8	93.
11	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be Credited to 2010 estimated tax ▶  893. Refunded ▶ 11			
Pai	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1 b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
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
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<b> </b>	<u> X</u>
	If "Yes," attach the statement required by General Instruction T		į	
6	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		l Ì	
	conflict with the state law remain in the governing instrument?	6	Х	
7	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	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) $\triangleright$ $\frac{NY}{r}$			
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	8 b	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 calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		х

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

enterprise at any time during the year?

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)

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

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

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

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

Form **990-PF** (2009)

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Par	t VII-B Statements Regarding Activities fo	r Which Form 4	720 May Be Requ	ired (continued)			
5 a	During the year did the foundation pay or incur any amour	nt to					
	(1) Carry on propaganda, or otherwise attempt to influen	ce legislation (section	4945(e))?	Yes X No			
	(2) Influence the outcome of any specific public election	•	- ·				
	directly or indirectly, any voter registration drive?						
	(3) Provide a grant to an individual for travel, study, or oth	er sımılar purposes?		. Yes XNo			
	(4) Provide a grant to an organization other than a charit section 509(a)(1), (2), or (3), or section 4940(d)(2)? (9)	•		Yes X No			
	(5) Provide for any purpose other than religious, charitab	. •					
	purposes, or for the prevention of cruelty to children or			Yes X No			
b	if any answer is "Yes" to 5a(1)-(5), did any of the transa						
	Regulations section 53 4945 or in a current notice regardi				5b		
	Organizations relying on a current notice regarding disaste	er assistance check h	ere	<b>▶</b> X			
С	If the answer is "Yes" to question 5a(4), does the foundar						
	because it maintained expenditure responsibility for the gra	•		Yes X No			
	If "Yes," attach the statement required by Regulations section			· —	]		
6 a	Did the foundation, during the year, receive any funds, di		pay premiums				
-	on a personal benefit contract?			. Yes X No			
b	Did the foundation, during the year, pay premiums, direct			:t?	6 b	X	
	If "Yes" to 6b, file Form 8870	, , ,					
7 a	At any time during the tax year, was the foundation a par	ty to a prohibited tax	shelter transaction?	. Yes X No			
b	If yes, did the foundation receive any proceeds or have a						
Par	t VIII Information About Officers, Directors,	, Trustees, Foun	dation Managers,	Highly Paid Emplo	yees,		
1	and Contractors List all officers, directors, trustees, foundation ma	anagers and their	compensation (see	page 22 of the instru	ictions).		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	(e) Expens	se account, lowances	
T OF	DATHE C. CDAGE	devoted to position	(·····································	and deferred compensation	Other an		
	RAINE G. GRACE COVE NECK ROAD	IRECTOR	-0-	-0-	_	0-	
49	COVE NECK ROAD			-		<del></del>	
-		<del> </del>					
2	Compensation of five highest-paid employees (oth	er than those inc	luded on line 1 - se	e page 23 of the inst	ructions).		
	f none, enter "NONE."						
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		se account, owances	
		}					
	NONE						
			<del></del>				
		-					
		İ					
					<u> </u>		
		İ					
Tete	I number of other employees paid over \$50,000					<u> </u>	
TOTA	I number of other employees paid over \$50,000	· · · · · · <u>· · · · · · · · · · · · · </u>	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Form 99	0-PF (2009)	

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empand Contractors (continued)	oloyees,
3 Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If no	ne. enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		(-,
<del></del>		
- <b></b>		
_		
- <b></b>		
<b></b>		
Total numbe	er of others receiving over \$50,000 for professional services	NONE
Total Hallis	a control recovering even week person on professional cultures 11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	
Part IX-A	Summary of Direct Charitable Activities	
	fation's four largest direct charitable activities during the tax year include relevant statistical information such as the number	Expenses
of organization	ons and other beneficianes served, conferences convened, research papers produced, etc	240.000
1 N/A		
	N/A	-
	<del></del>	-
2		_
		_
3		
		-
		-
4		_
		_
		_
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)	
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
1_10015_		-
		-
2		
		-
		-
All -45	and all the second of the second of the second of	
	ram-related investments. See page 24 of the instructions	
3 NONE		_
		-
Total Add I	non 1 through 2	
rotal. Add II	nes 1 through 3	<b>&gt;</b>

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see page 24 of the instructions.)	ign foundations	5,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposesį:		
а	Average monthly fair market value of securities	1a	370,377.
b	Average of monthly cash balances	1b	161,057.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	531,434.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	]	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	531,434.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	7,972.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	523,462.
6	Minimum investment return. Enter 5% of line 5	6	26,173.
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privious foundations and certain foreign organizations check here ▶ and do not complete this	ate operating	
1	Minimum investment return from Part X, line 6	1	26,173.
2a			
b	Income tax for 2009 (This does not include the tax from Part VI)  2b	1	
C	Add lines 2a and 2b	2 <sub>C</sub>	257.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	25,916.
4	Recoveries of amounts treated as qualifying distributions		
5		1 - 1	25,916.
6	Add lines 3 and 4  Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	25,916.
		1 . 1	,
Ра	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		70 000
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	78,020.
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	0.
3	Amounts set aside for specific charitable projects that satisfy the		•
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3 b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	78,020.
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 (see page 26 of the instructions)	5	257.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	77,763.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v qualifies for the section 4940(e) reduction of tax in those years	whether the foun	dation

, ,	Textille official income (see page	20 of the mandello	110)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				25,916.
2	Undistributed income, if any, as of the end of 2009		_	· · · · · · · · · · · · · · · · · · ·	
а	Enter amount for 2008 only				
b	Total for pnor years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009	·			
	From 2004				
b	From 2005				
_	• • • • • • • • • • • • • • • • • • • •				
ں ۔					
a					
e		225 001			
	Total of lines 3a through e	335,881.			
4	Qualifying distributions for 2009 from Part XII, line 4 > \$				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)			<u> </u>	
C	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				25,916.
	Remaining amount distributed out of corpus	52,104.			
5	Excess distributions carryover applied to 2009				
6	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	387,985.			
	Prior years' undistributed income Subtract	··			
_	line 4b from line 2b				
С	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 page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
^	instructions)				<del> </del>
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	76,841.			
9	Excess distributions carryover to 2010.				
-	Subtract lines 7 and 8 from line 6a	311,144.			
10	Analysis of line 9				
	Excess from 2005				
	Excess from 2006				
	20000 110111 2000	-	}		-
	Execusion from Edel	İ			
	Excess from 2000				
e	Excess from 2009 52, 104.	,			

Pa	rt XIV Private Oper	ating Foundations	(see page 27 of the	e instructions and Pa	rt VII-A, question 9)	NOT APPLICABL
1 a						
	foundation, and the ruling	g is effective for 2009, e	enter the date of the ruling	9	. •	
b	Check box to indicate wh	ether the foundation is	private operating found	dation described in section	4942(j)	(3) or 4942(J)(5)
2 a	Enter-the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(c) 10m/
	I or the minimum investment return from Part X for each year listed					
b	85% of line 2a			<del> </del>		
С	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 potentials					
е	of exempt activities					<del></del>
	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					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
L	4942(j)(3)(B)(i)					
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income	ŀ				
	(interest, dividends, rents, payments on securities					
	foans (section 512(a)(5)), or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as					
	(j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization					
	(4) Gross investment income	laformation (C	amplete this post	anly if the found	stion had \$5 000 a	ne more in cocet
Fa	Supplementa at any time of	luring the year - se	e page 28 of the in	structions.)	ation had \$5,000 c	or more in asset
1	Information Regarding	•				
а	List any managers of the before the close of any					d by the foundation
	-		ley have continuited	more man \$5,000) (St	se section 507 (d)(2) )	
	LORRAINE G.					
b	List any managers of ownership of a partner					large portion of the
	ownership or a partner	ship of other entity) o	which the foundation	irrias a 10% or greater	meresi	
	NONE					
2	Information Regarding	Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ► X If the	•		· -	able organizations an	nd does not accept
	unsolicited requests for	or funds If the foun	dation makes gifts, o	grants, etc (see page	28 of the instruction	s) to individuals or
	organizations under oth	ner conditions, comple	ete items 2a, b, c, and	Id		
а	The name, address, ar	nd telephone number	of the person to whor	m applications should be	e addressed	
b	The form in which appl	ications should be sul	omitted and informati	on and materials they	should include	
				_		
С	Any submission deadling	nes				
	Amu materialisms as 1		augh es his sass	anhical areas shortel	hle fields kinds of in	etitutions or other
a	Any restrictions or lir factors	mitations on awards,	such as by geogra	арпісаі агеаѕ, спапіа	DIE HEIUS, KIIIUS OF III	isulutions, or other

Form 990-PF (2009)			11-3105739	Page 11
Part XV Supplementary Information (c	continued)			
3 Grants and Contributions Paid Dur	ing the Year or App	oved for Fu	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of		Amount
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
<b>a</b> Paid dunng the year SEE STATEMENT ATTACHED	N/A	N/A		78,020
				-
	· ·			
Total			▶ 3a	78,020
b Approved for future payment				
		1		
		]		
Total				
IDIAL	<b> </b>			

Part XVI	-A Analysis of Income-Produ	icing Activ	vities	_		
Enter gross	amounts unless otherwise indicated	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income (See page 28 of
• •	n service revenue.	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
a b				-		
_		_				
e						
f				ļ		
•	s and contracts from government agencies					
	ship dues and assessments			14	3,321.	
	on savings and temporary cash investments ds and interest from securities			14	13,311.	<del></del>
	al income or (loss) from real estate					
	t-financed property					· · · · · · · · · · · · · · · · · · ·
	debt-financed property			<u> </u>		
	al income or (loss) from personal property			16	9.	
	vestment income					-
8 Gain or (I	loss) from sales of assets other than inventory			18	9,553.	
9 Net inco	ome or (loss) from special events					
10 Gross p	rofit or (loss) from sales of inventory			<u> </u>		
11 Other re				15	555.	
MIC	ROYALTY INCOME SCELLANEOUS			41	333.	
· -	· · · · · · · · · · · · · · · · · · ·			1 37		<u></u>
d e	<del> </del>			<del> </del>		
	Add columns (b), (d), and (e)	· ·		<u> </u>	26,749.	
	dd line 12, columns (b), (d), and (e)			<u> </u>	13	26,749.
Part XVI- Line No. ▼	Explain below how each activities the accomplishment of the for page 29 of the instructions )	ity for whi	ch income is reported	in column	(e) of Part XVI-A con	tributed importantly to such purposes) (See
					<del> </del>	
					<del></del>	
			NOT APPLICABL	E		
	-					
				_		
			<u> </u>			

Pa	rt XVI	Information Exempt Orga		ransfers To	and Transa	ctions a	ınd Relati	onships W	ith N	onc	harii	table
1	Did t	he organization directle	y or indirectly ode (other than	engage in any	of the following (3) organizations	ng with an	y other org	anization descretating	cribed		Yes	No
а		izations? fers from the reporting f										
		ash								1a(1)		Х
		ther assets								1a(2)		Х
b		transactions										
	(1) S	ales of assets to a nonct	naritable exempt o	organization						1b(1)		X
	(2) P	urchases of assets from	a nonchantable	exempt organization	on					1b(2)		X
		ental of facilities, equipm							,	1b(3)		X
		eimbursement arrangeme								1b(4)		X
		oans or loan guarantees								1		X
_		erformance of services of								1b(6)		$\frac{x}{x}$
C بہ		ng of facilities, equipmer e answer to any of t								1c	for	
d		of the goods, other										
		in any transaction of	•	,	. •							
	value	in any transaction of	sharing arran	gement, snow	iii column (a) t	iic value c	or the good.	s, other asse		,c. 1100	,0 10	00.100
(a)	Line no	(b) Amount involved	(c) Name of	noncharitable exem	npt organization	(d) Descr	ription of transfe	ers, transactions,	and shan	ng arra	ngeme	nts
		N/A			· · · · · · · · · · · · · · · · · · ·	N/A	· .					
						<u> </u>		<del></del>	_·			
		 				<del> </del>		·				
						_						
					<del></del>							
								· · · · · · · · · · · · · · · · · · ·				
2 a	is the	foundation directly or	indirectly affilia	ited with, or rel	ated to, one or i	more tax-ex	empt organiz	ations describ	ed in			
		n 501(c) of the Code (oth						. <i></i>	[	Ye	s L	No
b	If "Ye	s," complete the following	g schedule									
		(a) Name of organization	<u> </u>	(b) Ty	pe of organization		(	c) Description of	relations	nip		
			<del></del>									
_			<del></del>						- hast of	mu k	nouded	lae and
	Under belief,	penalties of perjury, I decli	are that I have ex plete Declaration	amined this return of prepater (other,	, including accompa than taxpayer or fid	anying scriedu uciary) is baş	ed on all inforr	nation of which	preparer	has ar	ny kno	wledge
		- Ola-	L gra			11/10/	10	11/12/	/ /	PA	8.5	•
a,		anature of officer or trustee	- pu-			Date	<u> </u>	Title	0		حوار	
ere	- 31	gnature of officer or trustee			Dete	Date	<del></del>		parer's	dentif	vina	
Sign Here	υ <sub>ν</sub> .		4	1.1	Date	11	Check if	nun	nber (Sec e 30 of th	e Signa	ture o	n O
ğ	rer's	Preparer's signature	1 / 1	M	//	12/12	self-employe		0 <b>-</b> 46-			• /
נט	Paid Preparer's Use Only	Firm's name (or yours if	WALDMA	AN, HIRSCH	& COMPANY	, L.L.P		EIN ▶ 13-	40356	594		
	F. y	self-employed), address.		ENN PLAZA,		<u> </u>		<u>F</u>			-	
		and ZIP code	NEW YO	•		101	19	Phone no 2	12.64	13.4	422	

THE OLIVER R. GRACE CHARITABLE FOUNDATION
FORM 990-PF - PART IV

Kınd of P				cription	<u> </u>	pr pr	Date	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	Р	acquired Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adı basıs	Ц	or (loss)	
		US TREASURY	BILLS			P	VARIOUS	VARIOUS
		PROPERTY TY		TIES				
25,000.		323,807.					1,193.	
		SENTRY SELE	CT DIVERSI	FIED INCOME	10,000	P	VARIOUS	VARIOUS
27 067		PROPERTY TY	PE: SECURI	TIES			8,360.	
27,867.		19,507.					8,360.	
OTAL GAIN(LO	OSS)						9,553.	
·	·							
	•							

THE OLIVER R. GRACE CHARITABLE FOUNDATION SCHEDULE OF CHARITABLE CONTRIBUTIONS FOR THE PERIOD JANUARY 1, 2009 TO DECEMBER 31, 2009 EIN 11-3105739

	DEDUCTIBLE
CHARITABLE ORGANIZATION	CONTRIBUTION
American Tinnitus Association	5,000 00
Cancer Research Institute	65,000 00
Carnegie Hill Neighbors	1,000 00
Citymeals on wheels	520 00
Community Foundation of Oyster Bay	1,000 00
Doctors w/o borders	1,000 00
F Cecil Grace Foundation	1,000.00
Fresh Air Fund	500 00
National Institute of Social Sciences	1,000.00
Oyster Bay Fire Companies	500 00
Oyster Bay Historical Society	250 00
Police Athletic League	250 00
Youngs Memorial Cemetery	1,000.00
Total	78,020 00

# - INTEREST ON TEMPORARY CASH INVESTMENTS FORM 990PF, PART I

ADJUSTED NET INCOME	1,022. 44. 2,255.	3,321.
NET INVESTMENT INCOME	1,022. 44. 2,255.	3,321.
REVENUE AND EXPENSES PER BOOKS	1,022. 44. 2,255.	3,321.
		TOTAL
DESCRIPTION	US TREASURY INTEREST THRU K-1 OTHER INTEREST INCOME	

INCOME
OTHER
1
⊢∥
PART
990PF,
FORM

THE OLIVER R. GRACE CHARITABLE FOUNDATION

ADJUSTED NET INCOME 555.	555.
NET INVESTMENT INCOME 555.	555.
REVENUE AND EXPENSES PER BOOKS 555.	555.
	TOTALS
- THRU K-1	
DESCRIPTION ROYALTY INCOME	

· TAXES
PART I -
990PF,
ORM

ADJUSTED NET INCOME	968.	968.
NET INVESTMENT INCOME	. 896	996
REVENUE AND EXPENSES PER BOOKS	.896	968.
		TOTALS
DESCRIPTION	FOREIGN TAXES EXPENSE	

		REVENUE		
		AND	NET	ADJUS
		EXPENSES	INVESTMENT	NET
DESCRIPTION		PER BOOKS	INCOME	INCO
BANK CHARGES		45.	45.	
	TOTALS	45.	45.	

ADJUSTED	NET	INCOME	45.	45.
NET	INVESTMENT	INCOME	45.	45.
AND	IXPENSES	PER BOOKS	45.	45.

ATTACHMENT 5	ENDING
ATTACI	BNDING
RT II - OTHER INVESTMENTS	
FORM 990PF, PAR	

THE OLIVER R. GRACE CHARITABLE FOUNDATION

FMV BOOK VALUE DESCRIPTION

0

.

TOTALS

PENGROWTH TRUST

PAGE 20

11-3105739

ATTACHMENT 6

## FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

NONDEDUCTIBLE EXPENSES - THRU K-1 FEDERAL TAX EXPENSE

20,175.

TOTAL

20,175.

### **SCHEDULE D** (Form 1041)

Department of the Treasury Internal Revenue Service

# **Capital Gains and Losses**

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). OMB No 1545-0092

2009

Name of estate or trust Employer identification number THE OLIVER R. GRACE CHARITABLE FOUNDATION 11-3105739 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (b) Date acquired (c) Date sold (a) Description of property (d) Sales price (see page 4 of the instructions) the entire year (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr ) (mo . dav. vr ) Subtract (e) from (d) 1a 1,193. b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, 1,193. 5 Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (c) Date sold (a) Description of property (Example 100 shares 7% preferred of "Z" Co ) (b) Date acquired (d) Sales price (see page 4 of the instructions) the entire year Subtract (e) from (d) (mo, day, yr) (mo, day, yr) 6a 8,360. 6b b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 9 Capital gain distributions Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 8,360. column (3) on the back. Schedule D (Form 1041) 2009

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

D	-	_	2

	dule D (Form 1041) 2009					Page Z
Pai	Summary of Parts I and II		(1) Benefici		(2) Estate's or trust's	(3) Total
42	Caution: Read the instructions before completing this	T	(see page	= 5)	Oi tiusts	1,193.
13 14	• • • • • • • • • • • • • • • • • • • •	13				1,155.
		14a				8,360.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht).					
c	28% rate gain					
15	Total net gain or (loss). Combine lines 13 and 14a	15			.,	9,553.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Foi		-T, Part I, line 4	a) If lines	14a and 15, col	umn (2), are net gains, go
to Pa	art V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete P	Part IV a	and the Capital L	.oss Cam	over Worksheet	l, as necessary
Pai	rt IV Capital Loss Limitation					
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	art I, I	ne 4c, if a trust)	, the sm	aller of	
а	The loss on line 15, column (3) or b \$3,000 e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page				16	()
Note	e: If the loss on line 15, column (3), is more than \$3,000, <b>or</b> if Form 1041, pag- rover Worksheet on page 7 of the instructions to figure your capital loss carryove	e 1, lın	e 22 (or Form 9	990-T, lin	e 34), is a loss, i	complete the Capital Loss
	Tax Computation Using Maximum Capital Gains Rate			<u> </u>		
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu		) are name o	r an am/	nunt is entered	l in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor			anam	Junt 13 Cintered	This alt i or i dit ii did
	tion: Skip this part and complete the worksheet on page 8 of the instruc					
	other line 14b, col. (2) or line 14c, col. (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
	n 990-T trusts. Complete this part only if both lines 14a and 15 an					
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa er line 14b, col. (2) or line 14c, col. (2) is more than zero.	rt and	complete the	e worksi	neet on page	8 of the instructions if
			T 1			T
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	17			
18	Enter the smaller of line 14a or 15 in column (2)					
	but not less than zero 18					
19	Enter the estate's or trust's qualified dividends					
	from Form 1041, line 2b(2) (or enter the qualified					
20	dividends included in income in Part I of Form 990-T)		<del> </del>			
20 21	Add lines 18 and 19					
21	amount from line 4g, otherwise, enter -0-					
22	Subtract line 21 from line 20 If zero or less, enter -0-		22			
23	Subtract line 22 from line 17 If zero or less, enter -0-		23			
	Oubtract line 22 from the 17 fr 2010 of 1000, officer 0		· ·   <del>- </del>			
24	Enter the smaller of the amount on line 17 or \$2,300		24			
25			• •			
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
	No. Enter the amount from line 23		25			
26	Subtract line 25 from line 24					
27	Are the amounts on lines 22 and 26 the same?		, , <del>                                   </del>			
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27			
				_		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			
29	Subtract line 28 from line 27		29			
30	Multiply line 29 by 15% ( 15)				30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate	e Sch	edule for Esta	ates and	l Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041)				31	
32	Add lines 30 and 31				32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate	e Sch	edule for Esta	ates and	i Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041).					<del>                                       </del>
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 h					
	G, line 1a (or Form 990-T, line 36)	<u> </u>	<u> </u>	<u></u>		edule D (Form 1041) 2009
					8ch	00.000 1 1 E0.000 10411 2009

### **SCHEDULE D-1** (Form 1041)

Department of the Treasury

Continuation Sheet for Schedule D
(Form 1041)

▶ See instructions for Schedule D (Form 1041).

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

Internal Revenue Service Name of estate or trust

THE OLIVER R. GRACE CHARITABLE FOUNDATION

Employer identification number 11-3105739

THE OLIVER R. GRACE CHAR				11-3105739			
Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less							
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)		
US TREASURY BILLS	VARIOUS	VARIOUS	325,000.	323,807.	1,193		
		, ,					
					,		
					<del></del>		
•			-				
	!						
	<u> </u>	<u> </u>					

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . . . .

1,193.

Schedule D-1 (Form 1041) 2009

Schedule D-1 (Form 1041) 2009 Page 2 Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side Employer identification number Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (b) Date (c) Date sold (mo , day, yr ) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (f) Gain or (loss) Subtract (e) from (d) acquired (mo , day, yr ) 6a SENTRY SELECT DIVERSIFIED 27,867. INCOME 10,000 SHS **VARIOUS VARIOUS** 8,360. 19,507.

8,360.

6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b . . . . . . .

Form 8868 (R	Rev 4-2009)			Page 2
• If you a	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	<u></u>		XI
Note. On	ly complete Part II if you have already been granted an automatic 3-month extension on a previously file	^ xd Fo	m 8	
• If you a	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	,u 1 0	0	500
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	nies	ne.	eded)
	Name of Exempt Organization Employer Identi			
Type or print	THE OLIVER R. GRACE CHARITABLE FOUNDATION 11-31057		AIu	miser
File by the	Number, street, and room or suite no. If a P.O box, see instructions.			
extended				
due date for filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
return See instructions	NEW YORK, NY 10119	F. 1		
				3.0
	pe of return to be filed (File a separate application for each return)	г		
	rm 990 X Form 990-PF Form 1041-A		$\neg$	Form 6069
	m 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 4720	L	''	Form 8870
	m 990-EZ Form 990-T (trust other than above) Form 5227			
STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.				
	oks are in the care of ► WALDMAN, HIRSCH & CO.			
Telephone No. ▶ 212 643-4422 FAX No. ▶ 212 564-7617				
● If the organization does not have an office or place of business in the United States, check this box				
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)      If this is				
	nole group, check this box	ach a		
	e names and EINs of all members the extension is for			
4 I req	juest an additional 3-month extension of time until 11/15/2010			
<b>5</b> Fог	calendar year 2009, or other tax year beginning and ending	—:		
		ae in	acco	ounting period
	e in detail why you need the extension	,		, and a particular
PERTINENT INFORMATION NEEDED TO COMPLETE THIS RETURN IS NOT AVAILABLE				
	THIS TIME.			
-				
8a If thi	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	$\top$		
		0.	\$	0.
	refundable credits. See instructions.	8a	•	
	s application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
	payments made. Include any prior year overpayment allowed as a credit and any amount paid	25.00		1 150
	iously with Form 8868.	8ь	\$	1,150.
	nce Due. Subtract line 8b from line 8a. 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.	8c	\$	
	Signature and Verification			0.
	ties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of the cect, and complete, and that I am authorized to prepare this form	of my	know	ledge and belief,
Signature >	Title ▶ Date	<b>&gt;</b>		
		Fom	886	88 (Rev 4-2009)

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