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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
In may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 2009

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_				r tax year beginr				-	and endi				, 20		
G	Che	ck all th	nat apply	Initial return	1	Li li	utıal return o	of a former pu	ıblıc charı	ıty		Fınal ı	eturn		
				Amended r	<u>eturn</u>	[Addres	ss change	[1	Name change				
_			Name of four	ndation					<u> </u>	<u>'</u>	A Employer iden	tification nu	mber		
	lee #	ne IRS									[
•		oel.	שמה אירום	STENCROFT FA	MTTV E	יי ע כוואו ז'סי	TON				1 13	3-39763	A A		
		wise,	l —						Doomlo						
		int	ŀ	street (or P O box n				address)	Room/su	uite	JITE B Telephone number (see page 10 of the instructions)				
or type											ĺ				
5	See Specific BOWLING GREEN STATION, I					O. BOX	73		<u> </u>		<u> </u>	518) 64	0-5000		
		ctions	City or town,	state, and ZIP cod	9						C If exemption appli pending, check he	cation is	▶∐		
											D 1 Foreign organi		nere . ►		
	NEW YORK, NY 10274-0073				0073						2 Foreign organi.		- —		
Н	Che	ck type	of organizat	tion X Section	n 501(c)()(3) exempt private foundation						k here and atta			
٢				exempt charitable t				vate foundate	on		Computation				
士							nod X C		rual		E If private foundation		- L		
•			m Part II, co.		$\overline{}$	er (specif	_	asii Acc	ituai		under section 507	'(b)(1)(A), checl	k here		
		Eai (110 ▶ \$						 ı cash basıs)		- 	F If the foundation is		- 1 1		
2				85,784.		olullili (u)	must be or	T Casii Dasis)		_	under section 507				
Li	alt.	total o may n	f amounts in c ot necessarily	nue and Expense columns (b), (c), and equal the amounts se 11 of the instructi	d (d) in	èxpen:	enue and ses per oks	(b) Net inve		((c) Adjusted net income	for	sbursements charitable ourposes n basis only)		
	1			etc , received (attach sche		8	323,975.					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	2	Check I	I I if the f	oundation is not requ	red to			-							
	3	-	— allacii	Sch B		<u>_</u>	8,841.		8,841.	 		ATC	H 1		
	_		-	• •			310,074.	31	0,074.	_		ATC			
	4			st from securities			310,074.	7.	0,074.	-		AIC	н Z		
	5 a			• • • • • • • • •						-					
	b	Net rent	al income or (los	ss)	———	,				_					
ne		6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all			2,	386 <u>,</u> 763.			11	DECE		<u></u>			
en	assets on line 6a		446.						RECE	VED.					
Revenue	7	Capital	gain net incor	me (from Part IV, Iir	e 2) .	1		2,38	6,763.				10		
<u></u>	8	Net sho	ort-term capita	lgaın	崖	*		,	_	8	8441/ - 0	da	S		
	9	Income	modifications							∞	ÛLÎ YAM	4010	8		
	10 a	Gross sa	ales less returns wances			_	,						الإا		
	ь		ost of goods solo							1	OCDEN	1 117	'=		
			_	(attach schedule)				•			OGDEN	I, ∪ I -			
	11			schedule)				-		1			<u></u>		
	12					3 5	529,653.	2 70	5,678.	1					
_				ough 11		3,	0.	2,70	3,070.	+			_		
	13			s, directors, trustees, e						₩-		-			
,,	14			ries and wages .					_	\vdash			_		
ses	15			yee benefits							 _				
ē				hedule)	🖵					<u> </u>					
х	b	Accoun	iting fees (atta	ch schedule)	L										
e E	c	Other p	rofessional fe	es (attach schedule)										
ţ	17			HMENT. 3			1,837.		1,837.						
tra	18			(see page 14 of the instri			44,841.	1	5,194.	1					
and Administrative Expen	19		•	schedule) and deple	, L							 	_		
Ξ	20		,	· · · · · · · · · · · ·	· · ·					1		+			
A							_		=	 		+			
Б	21			and meetings	i					 		+	- .		
ga	22	_	and publication		_		0.4.6								
÷≣∣	23			ch schedule) [5]			246.		246.	₩					
ra	24	Total o	perating and	administrative exp	enses.										
ď		Add line	es 13 through	23			46,924.	1	7,277.						
۷	25	Contrib	utions, gifts, g	rants paid	[_		798 , 230.			L			798,230		
	26	Total exp	enses and disbur	sements Add lines 24	and 25	8	345,154.	1	7,277.				798,230		
\neg	27		t line 26 from												
				penses and disburseme	nte	2 6	84,499.			-					
						-,	,,,,,,,,	2 60	8,401.	 		+			
				me (if negative, enter				2,00	U, 4UI.	 	-0-				
	· · · ·	ALTIUSTA	uet income	nenanve enter	()					i	-11-				

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ATCH 4

Form **990-PF** (2009)

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PAGE 1

D.	e+ 11	Balance Sheets description column should be for end-of-year	Beginning of year	Ena	or year
4		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		0.051.060	0.051.062
	2	Savings and temporary cash investments	9,011,518.	9,251,863.	9,251,863
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			<u> </u>
	5	Grants receivable			
ł	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 16 of the instructions)			
ı	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
,	8	Inventories for sale or use			
H222CI2	9	Prepaid expenses and deferred charges			
Ž	10 a	Investments - U S and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule) ATCH 6	262,148.	2,041,096.	2,407,420
ı		Investments - corporate bonds (attach schedule)			
1	11	Investments - land, buildings, and equipment basis			
1		Less accumulated depreciation			
1	12				
- 1	13	Investments - mortgage loans Investments - other (attach schedule) ATCH 7	3,803,797.	3,704,098.	5,126,501
	14	Land, buildings, and		· · · · · · · · · · · · · · · · · · ·	
1		equipment basis Less accumulated depreciation (attach schedule)			
۱	15	Other assets (describe			
- 1	16	Total assets (to be completed by all filers - see the			
1	10		13,077,463.	14,997,057.	16,785,784.
†	17	Accounts payable and accrued expenses	13,077,103.	11,001,001.	10,703,704
- 1	18	Grants payable		· ·	-
- 1	19	Deferred revenue	-		-
=1	20	Loans from officers, directors, trustees, and other disqualified persons			┪
		Mortgages and other notes payable (attach schedule)			-
3	21	Other liabilities (describe			-
1	22	Other liabilities (describe			-
ı	23	Total liabilities (add lines 17 through 22)			
†		Foundations that follow SFAS 117, check here			1
1		and complete lines 24 through 26 and lines 30 and 31.			
ũ	24	Unrestricted			
31	2 5				†
	25 26	Temporarily restricted	-		1
-1	20	Permanently restricted			-
ij		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
5	_	• • • • • •	12 077 462	14 007 057	
5	27	Capital stock, trust principal, or current funds	13,077,463.	14,997,057.	-
3	28	Paid-in or capital surplus, or land, bldg , and equipment fund			4
31	29	Retained earnings, accumulated income, endowment, or other funds	0.	0	<u>-</u>
	30	Total net assets or fund balances (see page 17 of the			
- 1		ınstructions)	13,077,463.	14,997,057.	_
ı	31	Total liabilities and net assets/fund balances (see page 17			
┙		of the instructions)	13,077,463.	14,997,057.	
		Analysis of Changes in Net Assets or Fund I			
		net assets or fund balances at beginning of year - Part II, col	, , , , -		
					13,077,463.
		r amount from Part I, line 27a		2	2,684,499
				3	
	Add	lines 1, 2, and 3		4	15,761,962.
	Decr	eases not included in line 2 (itemize) ATTACHN	MENT 8	5	764,905
	Tota	net assets or fund balances at end of year (line 4 minus line	5) - Part II, column (b), lin	e 30 6	14,997,057.
					Form 990-PF (2009)

	ns and Losses for Tax on Inv and describe the kind(s) of property sold (e		(b) How acquired	(c) Date acquired	(d) Date sold	
	brick warehouse, or common stock, 200 s	shs MLC Co)	P-Purchase D-Donation	(mo, day, yr)	(mo , day, yr)	
1a SEE PART IV SCH	EDULE		ļ. —			
<u>_b</u>	·		-		-	
<u>c</u>			 		 	
e		- · -	 		-	
(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		
a						
_ b						
С						
_d	<u> </u>		<u> </u>			
Complete and of the complete of						
Complete only for assets sr	nowing gain in column (h) and owned (j) Adjusted basis			Gains (Col (h) g (k), but not less t		
(i) F M V as of 12/31/69	as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any		Losses (from co		
<u>a</u>						
					-	
d d			 			
e	-		1			
		f gaın, also enter in Part I, lıne 7				
2 Capital gain net income o		f (loss), enter -0- in Part I, line 7	2	2,	386,763.	
3 Net short-term capital gai	n or (loss) as defined in sections 122	2(5) and (6)		-		
- -	I, line 8, column (c) (see pages 13 an	•				
If (loss), enter -0- in Part I	l, line 8	<u></u> ,	3			
	Jnder Section 4940(e) for Reduction private foundations subject to the s					
	r the section 4942 tax on the distribute not qualify under section 4940(e). De		period?	\Box	Yes X No	
	nount in each column for each year, s	<u>.</u>	e makıng	any entries.		
(a) Base period years Calendar 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	559,668.	13,752,016.		•	0.040697	
2007	75,000.	10,937,722.			0.006857	
2006	350,777.	9,596,391.		•	0.036553	
2005	118,000.	6,115,648.			0.019295	
2004	232,755.	3,251,640.	 		0.071581	
2 Total of line 1, column (c	,		2		0.174983	
	o for the 5-year base period - divide th	-				
number of years the four	ndation has been in existence if less t	than 5 years	3		0.034997	
4 Enter the net value of no	ncharitable-use assets for 2009 from	Part X, line 5	4	15	5,767,699.	
5 Multiply line 4 by line 3			5		551,822.	
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6	6 26,884.		
7 Add lines 5 and 6			7	,	578,706.	
8 Enter qualifying distributi	ons from Part XII, line 4		8		798,230.	
If line 8 is equal to or quart VI instructions on particular to the second of the seco	greater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% tax	x rate. See the	

Form **990-PF** (2009)

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	tructi	ons)	
	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		26,8	84.
	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		26,8	84.
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-		26,8	84.
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 29, 979.			
	Exempt foreign organizations-tax withheld at source 6b 0.			
c	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
ď	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		29,9	79.
8	Enter 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 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		3,0	95.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax 3,095. Refunded 11			
Par	t VII-A Statements Regarding Activities			
	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		Х
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
_	of the instructions for definition)?	1b		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?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
-	(1) On the foundation \$ (2) On foundation managers \$	ļ		
e	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		Х
_	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		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
h	If "Yes," has it filed a tax return on Form 990-T for this year?			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	_	Х
•	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
·	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?	6	Х	ļ
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	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
Ju	instructions) CONNECTICUT	-		
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?lf "No," attach explanation	_8b	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			l
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		х

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

_			_	_		-	
F	วทา	٦.	у:	90	J-P	ΥF	(2009)

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

Form 990-PF	(2009) 13-	-3976344	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation Manag and Contractors (continued)	ers, Highly Paid Emplo	yees,
3 Five hig	hest-paid independent contractors for professional services (see page 23 of t	he instructions). If none, o	enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	NON	VE	0
			-
Total num	ber of others receiving over \$50,000 for professional services		▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
	ndation's four largest direct chantable activities during the tax year. Include relevant statistical information si tions and other beneficianes served, conferences convened, research papers produced, etc	uch as the number	Expenses
1 PLE	ASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY DIRECT		
CHA	RITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SUPPORT,		
BY	CONTRIBUTIONS, OTHER CHARITABLE ORGANIZATIONS EXEMPT		0
2 UNDI	CR INTERNAL REVENUE CODE SECTION 501(C)(3).		
3			
3	·		
4			
	Summary of Program-Related Investments (see page 23 of the instruction	ons)	
	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 <u>N/A</u>			
			0.
2	· · · · · · · · · · · · · · · · · · ·		
	·		
All other pro	ogram-related investments See page 24 of the instructions		
3 N/A			
Total. Add	lines 1 through 3		0.

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	922,480.
b	Average of monthly cash balances	_ 1b	10,412,569.
C	: Fair market value of all other assets (see page 24 of the instructions)	1c	4,672,767.
d	Total (add lines 1a, b, and c)	1d	16,007,816.
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	16,007,816.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	. 4	240,117.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	15,767,699.
6	Minimum investment return. Enter 5% of line 5	6	788,385.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) profoundations and certain foreign organizations check here ▶ ☐ and do not complete the	vate operating	
1	Minimum investment return from Part X, line 6	1	788,385.
2 a	Tax on investment income for 2009 from Part VI, line 5	34.	
b			
С		2c	26,884.
3	Distributable amount before adjustments. Subtract line 2c from line 1		761,501.
4	Recoveries of amounts treated as qualifying distributions	. 4	
5	Add lines 3 and 4	5	761,501.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Deduction from distributable amount (see page 25 of the instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1		761,501.
Pa	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	<u> </u>	
а		l ta	798,230.
b			0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc.,	• •	
	DUPPOSOS	2	0.
3	Amounts set aside for specific charitable projects that satisfy the	• • -=	
a		3a	0.
ь		3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	798,230.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on not investment income	• •	
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	26,884.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	771,346.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w		
	qualifies for the section 4940(e) reduction of tax in those years.		

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Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		_
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
•	line 7	· -	· · · · · · · · · · · · · · · · · · ·		761,501.
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only			135,825.	
	Total for prior years 20 07 ,20 06 ,20 05			133,023.	
3	Excess distributions carryover, if any, to 2009				
	· i · · · · · · · · · · · · · · · ·				
a	1101112001				
D	1101112000				
C	110111 2000				
-	710112007				
	110111 2000	0			
	Total of lines 3a through e	0.			
4	Qualifying distributions for 2009 from Part XII, line 4: ► \$ 798,230.				
а	Applied to 2008, but not more than line 2a			135,825.	
þ	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)	10			
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				662,405.
	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009	0.			0.
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	0.			
	Prior years' undistributed income Subtract				
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				
e	amount - see page 27 of the instructions Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions				
_	İ				
t	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				99,096.
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				<u> </u>
8	instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9:				
а	Excess from 2005 0 .				
	Excess from 2006 0 .				
	Excess from 2007				
	Excess from 2008				
	Excess from 2009 0 .	;			

Pa	rt XIV Private Oper	ating Foundations	see page 27 of the	nstructions and Par	t VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has foundation, and the ruling	•		it is a private opera	ating	
ь	Check box to indicate whe		•		. 4942(1)	(3) or 4942(j)(5)
	Officer box to indicate write	Tax year	Tvate operating localidation	Pnor 3 years		4542()(5)
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	I or the minimum investment return from Part X for each year listed	(4) 2000	(5) 2000	(0) 2001	(4) 2000	
b	85% of line 2a					
c	Qualifying distributions from Part					
_	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct					
е	of exempt activities					
3	2d from line 2c 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					
b	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed			!		
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income (interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)		· <u></u>			
	(3) Largest amount of sup- port from an exempt organization					
	(4) Gross investment income					
Pa		ary Information (C during the year - sec			ation had \$5,000	or more in assets
1	Information Regarding					· · · · · · · · · · · · · · · · · · ·
а	List any managers of before the close of any					ed by the foundation
	TRACY WOLST	TENCROFT				
b	List any managers of ownership of a partner					large portion of the
	NONE	_				
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		<u> </u>
	Check here ► X if t unsolicited requests f organizations under ot	or funds. If the found	dation makes gifts, g	rants, etc (see page	able organizations a 28 of the instructio	nd does not accept ns) to individuals or
а	The name, address, an	d telephone number of	the person to whom a	pplications should be a	ddressed [.]	
ь	The form in which appli	cations should be subr	nitted and information a	and matenals they sho	uld include	
	Any submission deadling	nes:				
	.					
d	Any restrictions or lifectors	mitations on awards,	such as by geogra	phical areas, charitat	ole fields, kinds of	institutions, or other

Form 990-PF (2009)			13-3976344	Page 11
Part XV Supplementary Information (c	ontinued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or App	roved for	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
ATTACHMENT 10				
ATTACINIDAT TO				
				İ
Total			▶ 3a	798,230.
b Approved for future payment		1		
		İ	Ì	
Total	 			

er gross amounts unless otherwise indicated		ited business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income (See page 28 of the instructions)
a				-	
b					
·					_
d					
			+-		
Fees and contracts from government agencies					<u>-</u> -
Membership dues and assessments	· -		14	8,841.	
			14	310,074.	
let rental income or (loss) from real estate				020,0711	
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	2,386,763.	
let income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a			_		
			<u> </u>		
					
	1				
			1		
				2 705 678	
Subtotal Add columns (b), (d), and (e)				2,705,678.	2.705.67
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities	verify calcula to the Ac	tions) complishment of E	xempt Purp	ooses	
Subtotal Add columns (b), (d), and (e)	verify calcula to the Ac	tions) complishment of E	xempt Purp	ooses (e) of Part XVI-A con	tributed importantly
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to taxvi-B Relationship of Activities e No. Explain below how each activities the accomplishment of the form	verify calcula to the Ac	tions) complishment of E	xempt Purp	ooses (e) of Part XVI-A con	tributed importantly
cubtotal Add columns (b), (d), and (e) cotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to t XVI-B Relationship of Activities e No. Explain below how each activities accomplishment of the form	verify calcula to the Ac	tions) complishment of E	xempt Purp	ooses (e) of Part XVI-A con	tributed importantly
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to taxvi-B Relationship of Activities e No. Explain below how each activities accomplishment of the form	verify calcula to the Ac	tions) complishment of E	xempt Purp	ooses (e) of Part XVI-A con	tributed importantly
cubtotal Add columns (b), (d), and (e) cotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to t XVI-B Relationship of Activities e No. Explain below how each activities accomplishment of the form	verify calcula to the Ac	tions) complishment of E	xempt Purp	ooses (e) of Part XVI-A con	tributed importantly
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to taxvi-B Relationship of Activities e No. Explain below how each activities the accomplishment of the form	verify calcula to the Ac	tions) complishment of E	ed in column other than t	ooses (e) of Part XVI-A con	tributed importantly
ubtotal Add columns (b), (d), and (e)	verify calcula to the Ac	tions) complishment of E ch income is reporte exempt purposes (ed in column other than t	ooses (e) of Part XVI-A con	tributed importantl
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to taxvi-B Relationship of Activities e No. Explain below how each activities the accomplishment of the form	verify calcula to the Ac	tions) complishment of E ch income is reporte exempt purposes (ed in column other than t	ooses (e) of Part XVI-A con	tributed importantly
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to taxvi-B Relationship of Activities e No. Explain below how each activities the accomplishment of the form	verify calcula to the Ac	tions) complishment of E ch income is reporte exempt purposes (ed in column other than t	ooses (e) of Part XVI-A con	tributed importantly
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to taxvi-B Relationship of Activities e No. Explain below how each activities accomplishment of the form	verify calcula to the Ac	tions) complishment of E ch income is reporte exempt purposes (ed in column other than t	ooses (e) of Part XVI-A con	tributed importantly
cubtotal Add columns (b), (d), and (e) cotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to t XVI-B Relationship of Activities e No. Explain below how each activities accomplishment of the form	verify calcula to the Ac	tions) complishment of E ch income is reporte exempt purposes (ed in column other than t	ooses (e) of Part XVI-A con	tributed importantly
cubtotal Add columns (b), (d), and (e) cotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to t XVI-B Relationship of Activities e No. Explain below how each activities accomplishment of the form	verify calcula to the Ac	tions) complishment of E ch income is reporte exempt purposes (ed in column other than t	ooses (e) of Part XVI-A con	tributed importantly
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to taxvi-B Relationship of Activities e No. Explain below how each activities the accomplishment of the form	verify calcula to the Ac	tions) complishment of E ch income is reporte exempt purposes (ed in column other than t	ooses (e) of Part XVI-A con	tributed importantly
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to Int XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	verify calcula to the Ac	tions) complishment of E ch income is reporte exempt purposes (ed in column other than t	ooses (e) of Part XVI-A con	tributed importantly

Pa	rt XVII	Information Exempt Orga		Fransfers To and	Transa	ctions	and Relat	ionships	s With N	lonc	harit	table
1	Did ti	he organization directly	or indirectly	engage in any of th	e following	y with a	any other org	janization	described		Yes	No
а	organi	zations? fers from the reporting fou	indation to a non-	charitable evemnt organiz	ration of	, 0,	30011011 027,	relating to	pontious		•	
•		ash								1a(1)		х
		ther assets								1a(2)		Х
b	Other	transactions										
		ales of assets to a noncha								1b(1)		X
		urchases of assets from a								1b(2)		X
		ental of facilities, equipme								1b(3)		X
		eimbursement arrangeme pans or loan guarantees								1b(4)		X
		erformance of services or										X
c		ig of facilities, equipment,										Х
		answer to any of t									fair i	market
	value	of the goods, other	assets, or sen	vices given by the re	porting fo	undation	If the found	dation rece	eived less	than	fair i	market
	value	in any transaction or	sharing arran	gement, show in colu	ımn (d) t	ne value	of the good	s, other a	assets, or	service	es red	eived
(0)	Lino no	(h) A mount involved	(a) Name of	conchaptable everent everen	roton	(d) Doo	ention of transfe	ra transactio				4-
(a)	Line no	(b) Amount involved N/A	(c) Name or	nonchantable exempt organiz	zauon	N/A	cription of transfe	ers, transactio	ns, and snam	ng arrar	ngemen	ıs
		14,711	<u> </u>		•	14/11		-				
		-	_									
		 :					_					
	_											
											•	
									· · · · · · · · · · · · · · · · · · ·			
2a		foundation directly or	•							_	_	_
_		n 501(c) of the Code (oth		501(c)(3)) or in section 5	277					Ye	es 🔼	∐ No
<u>b</u>	If "Yes	;" complete the following (a) Name of organization		(b) Type of org	anization			(e) Docomotio	n of relations			
		(a) Name of Organization		(b) Type of org	anzauon			(c) Descriptio	TO TEIGUOTIS	пр		
							_					
	-											
	Under belief,	penalties of perjury, I declar it is true, correct, and const	are that I have ex plete Declaration	amined this return, includir of preparer (other than tax	ng accompa payer or fidu	nying scheo iciary) is ba	dules and stater ised on all inform	ments, and to mation of wh	o the best o nich preparer	fmy k hasaı	nowled; ny knov	ge and vledge
	_	11 7	>	_		4/30	110					
<u>e</u>	₽ 50	gnature of officer or trustee				Date	/ •	Title				
문		^	-		Date		Oh a als af		Preparer's			
Sign Here	حٍيْ	Preparer's \(\)	- ,	\sim	1,10		Check if self-employe	ed ▶ 🔲 📗	number (Se page 30 of th	ie 2igus	ctions)	n -
Š	Paid Preparer's Use Only	signature	work	CHJ	<u> </u>	113010	<u> </u>		1000	199	<u>`63</u>	<u> 32</u>
	Paid Preparer's Use Only	Firm's name (or yours if		CO COMPANY, LP				EIN ► 3	3-11874	132		
	•	self-employed), address and ZIP code		X 15014		. .	010 501					
. !		and ZIF Wile	ALBAN:	Y, NY		12.	212-5014	Phone no	518-64	10-5(000	

Schedule B

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

Department of the Treasury

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization		Employer identification number
THE WOLSTENCROFT FA	AMILY FOUNDATION	13-3976344
Organization type (check or	ne).	13-39/6344
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated a	s a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation
	501(c)(3) taxable private foundation	
instructions General Rule	(7), (8), or (10) organization can check boxes for both the General	• • • • • • • • • • • • • • • • • • • •
-	on filing Form 990, 990-EZ, or 990-PF that received, during the year one contributor. Complete Parts I and II.	ar, \$5,000 or more (in money or
Special Rules		
sections 509(a)(1)	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 and 170(b)(1)(A)(vi), and received from any one contributor, during 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form	ng the year, a contribution of the greater
the year, aggregat	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that rece te contributions of more than \$1,000 for use exclusively for relig ses, or the prevention of cruelty to children or animals Complete I	gious, charıtable, scientific, literary, or
the year, contribut aggregate to more year for an <i>exclus</i> , applies to this orga	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receions for use exclusively for religious, charitable, etc., purposes, be than \$1,000. If this box is checked, enter here the total contribution to religious, charitable, etc., purpose. Do not complete any of the anization because it received nonexclusively religious, charitable,	out these contributions did not ons that were received during the ne parts unless the General Rule etc, contributions of \$5,000 or more
990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules does nust answer "No" on Part IV, line 2 of its Form 990, or check the bPF, to certify that it does not meet the filing requirements of Sched	ox on line H of its Form 990-EZ,
For Privacy Act and Panenwork Re	duction Act Notice see the instructions	Schedule B (Form 990, 990-F7, or 990-PF) (2009)

for Form 990, 990-EZ, or 990-PF.

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2009)		Page of of Part
Name of o	rganization THE WOLSTENCROFT FAMILY FOUNDA	TION	Employer Identification number 13-3976344
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	TRACY WOLSTENCROFT C/O GS FAMILY OFFICE, P.O. BOX 73 NEW YORK, NY 10274-0073	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Person Payroll

Person Payroll Noncash

(a) No.

(a)

(d) Type of contribution

(Complete Part II if there is a noncash contribution.)

(d)
Type of contribution

(b) Name, address, and ZIP + 4

(b) Name, address, and ZIP + 4 (c) Aggregate contributions

(c) Aggregate contributions

of Part II

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization THE WOLSTENCROFT FAMILY FOUNDATION

Employer identification number

13-3976344

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	5,000 SHARES GOLDMAN SACHS GROUP, INC.	-	
		\$\$823,975.	08/03/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

JSA 9E1254 1 000 Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

FORM 990-PF - PART IV

Kind of Property		Description			Description		or D	Date acquired	Date sold
Gross sale Depreciation price less allowed/ expenses of sale allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)			
	PARTNERSHI	-TERM COMMON P, S CORPORA TRUST GAIN	TRUST FUND			574,786.			
		CHS #02318 YPE: SECURIT	IES		D	VAR	VA		
103,660.	291,683.					1,811,977.			
OTAL GAIN (LOSS)						<u>2,386,763.</u>			

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

NET INVESTMENT INCOME	8,841.	8,841.
REVENUE AND EXPENSES PER BOOKS	8,841.	8,841.
		TOTAL
DESCRIPTION	GOLDMAN SACHS #02318	

PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

NET INVESTMENT INCOME	18,079. 10. 151,985. 140,000.
REVENUE AND EXPENSES PER BOOKS	18,079. 10. 151,985. 140,000.
DESCRIPTION	GOLDMAN SACHS #02318-DIVIDENDS GS CAPITAL PARTNERS V-IA K-1 - INTEREST GS CAPITAL PARTNERS V-IA K-1 - DIVIDENDS GS MEZZ PINS V OFFSHORE LID - DIVIDENDS

20040945

FORM 990PF, PART I - INTEREST EXPENSE

AND EXPENSES PER BOOKS REVENUE

INVESTMENT INCOME

1,837.

GOLDMAN SACHS #02318

DESCRIPTION

1,837.

TOTALS

1,837.

1,837.

ATTACHMENT 3

10:46:53 AMV 09-5.2

ATTACHMENT 4

- TAXES FORM 990PF, PART I

	NET	INVESTMENT	INCOME	.0	0.	15,194.	15,194.
REVENUE	AND	EXPENSES	PER BOOKS	2,647.	27,000.	15,194.	44,841.
							TOTALS
			DESCRIPTION	FEDERAL TAXES	ESTIMATED TAXES	FOREIGN TAXES PAID	

ATTACHMENT 5

- OTHER EXPENSES FORM 990PF, PART I REVENUE AND EXPENSES PER BOOKS 246.

INVESTMENT

246.

TOTALS

DESCRIPTION PORTFOLIO DEDUCATIONS K-1

246.

246.

THE WOLSTENCROFT FAMILY FOUNDATION

- CORPORATE STOCK PART II FORM 990PF,

ATTACHMENT 6

ENDING FMV

BOOK VALUE ENDING

DESCRIPTION

GOLDMAN SACHS #02318

2,041,096.

2,407,420.

TOTALS

2,041,096.

2,407,420.

2,262,450. 764,400. 2,099,651.

804,098. 900,000. 2,000,000.

ENDING

ENDING BOOK VALUE

ATTACHMENT

5,126,501.

3,704,098.

TOTALS

GS CAPITAL PARTNERS V-IA, LP GS MEZZ PTRS V OFFSHORE LTD GS INVEST PTRS FD OFFSHORE, LP

- OTHER INVESTMENTS

PART

FORM 990PF,

DESCRIPTION

09-5.2
AMV 0
10:46:53
21/2010 1
4/21
3814
HKSBUE

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

DESCRIPTION

TRUOMA

APPRECIATION OVER DONOR'S COST BASIS OF STOCK RECEIVED BY FOUNDATION

764,905.

TOTAL

764,905.

FORM 990PF, PART VIII

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

PAGE 26 20040945 10:46:53 AMV 09-5.2

EXPENSE ACCT AND OTHER ALLOWANCES	.0	.0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	0.
COMPENSATION	.0	.0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE - AS NEEDED	TRUSTEE - AS NEEDED	GRAND TOTALS
NAME AND ADDRESS	TRACY WOLSTENCROFT C/O GOLDMAN SACHS FAMILY OFFICE BOWLING GREEN STATION, P.O. BOX 73 NEW YORK, NY 10274-0073	CATHERINE WOLSTENCROFT C/O GOLDMAN SACHS FAMILY OFFICE BOWLING GREEN STATION, P.O. BOX 73 NEW YORK, NY 10274-0073	

FOUNDATION
FAMILY
WOLSTENCROFT
THE

13-3976344

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

SEE ATTACHED LIST

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

ATTACHMENT 10

798,230

501(C)(3) NONE

FOR GENERAL CHARITABLE PURPOSES

798,230.

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 10 PAGE 27

10.46 53 AM

HKSBUE 3814 4/21/2010

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THE WOLSTENCROFT FAMILY FOUNDATION CHARITABLE CONTRIBUTION LIST 12/31/2009

EIN: 13-3976344

Date	Check #	Description	Amount
02/02/09	136	North Shore Land Alliance, Old Westbury, NY	2,000 00
02/25/09	137	International Rescue Committee, New York, NY	80,000 00
03/18/09	138	Give 2 Asıa, New York, NY	25,000 00
06/07/09	143	Pomona College, Claremont, CA	10,000 00
07/07/09	140	Bowdoin College, Brunswick, ME	225,000 00
06/07/09	142	Greenwich Academy, Greenwich, CT	15,000 00
06/07/09	141	Brunswick School, Brunswick, ME	115,000 00
06/21/09	144	Dartmouth College, Hanover, NH	5,000 00
08/04/09	145	Greenwich Academy, Greenwich, CT	1,230 00
10/04/09	146	Brunswick School, Brunswick, ME	10,000 00
10/07/09	147	National Park Conservation Association, Washington, DC	10,000 00
12/01/09	148	National Geographic, Washington, DC	200,000 00
12/30/09		International Rescue Committee, New York, NY	100,000 00
		TOTAL CHARITABLE CONTRIBUTIONS PAID	\$ 798,230.00

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

Name of estate or trust				Employer identif	icatio	n number
THE WOLSTENCROFT FAMILY FOUNDATION 13-39763						
Note: Form 5227 filers need to complete only Pa		** * * * * * * * * * * * * * * * * * * *				
Part I Short-Term Capital Gains and Lo	sses - Assets	Held One Y	ear or Less	(e) Cost or other	.	(f) Gain or (loss) for
(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(a) Description of property (b) Date acquired (c) Date soid (d) Color area (c) Color area (d)					
1a						
						_
_						
		-				
_						
	<u>l</u>					
b Enter the short-term gain or (loss), if any, fro	m Schedule D-1	, line 1b		• • • • • • • • • • • • • • • • • • • •	1b_	
2 Short-term capital gain or (loss) from Forms	4684, 6252, 678	31, and 8824			2	
Net short-term gain or (loss) from partnershiShort-term capital loss carryover Enter the a					3_	
Carryover Worksheet					4_	()
5 Net short-term gain or (loss). Combine line column (3) on the back	_	• • •			5	
Part II Long-Term Capital Gains and Losses					. •	
(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a						
ATTACHMENT 11			2,103,660.	291,6	83.	1,811,977.
MILITAGINIBAT II						
		<u>.</u>			<u></u>	
b Enter the long-term gain or (loss), if any, from	n Schedule D-1	line 6b	<u> </u>	<u> </u>	6Ь	
7 Long-term capital gain or (loss) from Forms					7	
8 Net long-term gain or (loss) from partnership	s, S corporation	s, and other es	tates or trusts	• • • • • • • •	8	574,786.
9 Capital gain distributions					9	
10 Gain from Form 4797, Part I					10	
11 Long-term capital loss carryover. Enter the a Carryover Worksheet	-		·		11	()
12 Net long-term gain or (loss). Combine lines	6a through 11	n column (f) E	nter here and on line	14a,	12	2,386,763.
column (3) on the back					ıız	

Schedule D (Form 1041) 2009 Page 2 Summary of Parts I and II Part III (1) Beneficiaries' (2) Estate's (3) Total Caution: Read the instructions before completing this part. (see page 5) or trust's Net short-term gain or (loss) Net long-term gain or (loss): 2,386,763. b Unrecaptured section 1250 gain (see line 18 of the wrksht.) 14b Total net gain or (loss). Combine lines 13 and 14a ▶ 15 2,386,763. Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheets necessary **Capital Loss Limitation** Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3,000 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss CarryoverWorksheeton page 7 of the instructions to figure your capital loss carryover Tax Computation Using Maximum Capital Gains Rates Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero Caution: Skip this part and complete the worksheet on page 8 of the instructions if. • Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col (2) or line 14c, col (2) is more than zero. Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) 17 17 Enter the smaller of line 14a or 15 in column (2) 18 but not less than zero 18 Enter the estate's or trust's qualified dividends 19 from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) 19 Add lines 18 and 19 20 20 If the estate or trust is filing Form 4952, enter the 21 amount from line 4g; otherwise, enter -0-..▶ 22 Subtract line 21 from line 20. If zero or less, enter -0-23 Subtract line 22 from line 17. If zero or less, enter -0-23 24 Enter the smaller of the amount on line 17 or \$2,300 25 Is the amount on line 23 equal to or more than the amount on line 24? Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. No. Enter the amount from line 23 Subtract line 25 from line 24 26 26 Are the amounts on lines 22 and 26 the same? 27 Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22 28 Enter the amount from line 26 (If line 26 is blank, enter -0-) 29 Subtract line 28 from line 27 Multiply line 29 by 15% (.15) 30 30 Figure the tax on the amount on line 23. Use the 2009 Tax Rate Schedule for Estates and Trusts 31 (see the Schedule Ginstructions in the instructions for Form 1041) 32 32 Figure the tax on the amount on line 17. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule Ginstructions in the instructions for Form 1041) 33

Schedule D (Form 1041) 2009

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041. Schedule

THE WOLSTENCROFT FAMILY FOUNDATION Schedule D Detail of Long-term Capital Gains and Losses

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	ATTACHMENT

Description	Date	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
CAPTIAL GAINS (LOSSES) HELD FOR INVESTMENT	FURFUSES				
TOTAL CAPITAL GAINS (LOSSES) HELD FOR INVE	INVESTMENT PURPOSES	SES			
			2,103,660.	291,683.	1,811,977.
GOLDMAN SACHS #02318	VAR	VAR	2,103,660.	291,683.	1,811,977.
	7117	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	.000/001/2		
Totals			2,103,660.	291,683.	1,811,977.

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Tracy R. Wolstencroft Foundation FYE 12-31-09

Schedule D Attachment

EIN: 13-3976344

Description	Date Acquired	Date Sold	Shares Sold	Cost of Stock	Sale Price	Gain/Loss	-
Goldman Sachs Group, Inc	11/26/94	01/23/09	12,189.00	\$ 144,004.50	\$ 835,261.16	\$ 691,256.66	LT
Goldman Sachs Group, Inc	11/26/94	02/18/09	5,000.00	\$ 59,071.50	\$ 430,301.58	\$ 371,230.08	LT
Goldman Sachs Group, Inc	11/26/94	2/19/2009	5,000.00	\$ 59,071.50	\$ 436,547.55	\$ 377,476.05	LT
Goldman Sachs Group, Inc	11/26/94	8/11/2009	2,500.00	\$ 29,535.75	\$ 401,549.67	\$ 372,013.92	LT
			,				_
				\$ 291,683.25	\$ 2,1 03,659.96	\$ <u>1,811,976.71</u>	LT