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

2009

Department of the Treasury
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year **2009**, or tax year beginning _____, and ending _____

G Check all that apply: Initial return Initial return of a former public charity Final return
 Amended return Address change Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation THE CANARY CHARITABLE FOUNDATION	A Employer identification number 13-4005475
	Number and street (or P O box number if mail is not delivered to street address) Room/suite C/O FSC, 499 PARK AVE, 26TH FL.	B Telephone number 212-688-4010
	City or town, state, and ZIP code NEW YORK, NY 10022	C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 13,590,767.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	2,435,000.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	247,200.	258,661.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	16,624.			
	b Gross sales price for all assets on line 6a	525,000.			
	7 Capital gain net income (from Part IV, line 2)		16,624.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income	296,395.	106,303.		STATEMENT 2	
12 Total. Add lines 1 through 11	2,995,219.	381,588.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees	STMT 3 250.	0.		250.
	c Other professional fees				
	17 Interest				
	18 Taxes	STMT 4 4,196.	4,196.		0.
	19 Depreciation and depletion				
	20 Occupancy				
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses	STMT 5 5,042.	3,958.		1,084.	
24 Total operating and administrative expenses. Add lines 13 through 23	9,488.	8,154.		1,334.	
25 Contributions, gifts, grants paid	987,700.			987,700.	
26 Total expenses and disbursements. Add lines 24 and 25	997,188.	8,154.		989,034.	
27 Subtract line 26 from line 12	1,998,031.				
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)		373,434.			
c Adjusted net income (if negative, enter -0-)			N/A		

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value	
Assets	1 Cash - non-interest-bearing	40,822.	96,318.	96,318.
	2 Savings and temporary cash investments			
	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			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis ▶				
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other STMT 6	10,868,766.	12,810,947.	13,494,449.	
14 Land, buildings, and equipment basis ▶				
Less: accumulated depreciation ▶				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers)	10,909,588.	12,907,265.	13,590,767.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
22 Other liabilities (describe ▶ DUE TO AFFILIATES)	354.	0.		
23 Total liabilities (add lines 17 through 22)	354.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	10,909,234.	12,907,265.	
30 Total net assets or fund balances	10,909,234.	12,907,265.		
31 Total liabilities and net assets/fund balances	10,909,588.	12,907,265.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	10,909,234.
2 Enter amount from Part I, line 27a	2	1,998,031.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	12,907,265.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	12,907,265.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SEE STATEMENT	P	VARIOUS	VARIOUS
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 525,000.		508,376.	16,624.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			16,624.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	16,624.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	3,190,077.	14,022,109.	.227503
2007	1,259,798.	16,534,526.	.076192
2006	1,044,426.	14,786,019.	.070636
2005	1,049,151.	13,077,839.	.080224
2004	1,520,777.	13,221,765.	.115021

2 Total of line 1, column (d)	2	.569576
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.113915
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	11,918,821.
5 Multiply line 4 by line 3	5	1,357,732.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	3,734.
7 Add lines 5 and 6	7	1,361,466.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions.	8	989,034.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	7,469.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	7,469.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	7,469.
6	Credits/Payments:		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	17,080.
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	17,080.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	9,611.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> 7,472. Refunded <input type="checkbox"/>	11	2,139.

Part VII-A Statements Regarding Activities

	Yes	No
1a		X
1b		X
1c		X
2		X
3		X
4a		X
4b		
5		X
6	X	
7	X	
8a		
8b	X	
9		X
10	X	

N/A

STMT 7

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14	The books are in care of ► GUIDO GOLDMAN Telephone no. ► (212) 688-4010 Located at ► 499 PARK AVE., 26TH FL NY NY ZIP+4 ► 10022			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year 15 N/A			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ►		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons 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.) N/A	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	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?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? Yes No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No
 Organizations relying on a current notice regarding disaster assistance check here N/A

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
 If "Yes," attach the statement required by Regulations section 53.4945-5(d) N/A

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No

5b		
6b		X
7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 8		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶ 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	
Total. Add lines 1 through 3 ▶	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	7,872,102.
b	Average of monthly cash balances	1b	150,047.
c	Fair market value of all other assets	1c	4,078,177.
d	Total (add lines 1a, b, and c)	1d	12,100,326.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	12,100,326.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	181,505.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,918,821.
6	Minimum investment return. Enter 5% of line 5	6	595,941.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	595,941.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	7,469.
2b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	7,469.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	588,472.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	588,472.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	588,472.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	989,034.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	989,034.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	989,034.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				588,472.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004	865,013.			
b From 2005	399,648.			
c From 2006	315,231.			
d From 2007	460,393.			
e From 2008	2,501,066.			
f Total of lines 3a through e	4,541,351.			
4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$	989,034.			
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				588,472.
e Remaining amount distributed out of corpus	400,562.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	4,941,913.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	865,013.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	4,076,900.			
10 Analysis of line 9:				
a Excess from 2005	399,648.			
b Excess from 2006	315,231.			
c Excess from 2007	460,393.			
d Excess from 2008	2,501,066.			
e Excess from 2009	400,562.			

Part XV Supplementary information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> SEE SCHEDULE ATTACHED				987,700.
Total				987,700.
b <i>Approved for future payment</i> SEE SCHEDULE ATTACHED				1,706,300.
Total				1,706,300.

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

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

OMB No 1545-0047

2009

Name of the organization

THE CANARY CHARITABLE FOUNDATION

Employer identification number

13-4005475

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

-
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions
for Form 990, 990-EZ, or 990-PF.

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

Name of organization THE CANARY CHARITABLE FOUNDATION	Employer identification number 13-4005475
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	<u>THE CONIFER TRUST</u> <u>C/O FSC, 499 PARK AVE 26TH FLOOR</u> <u>NEW YORK, NY 10022</u>	\$ <u>1,806,342.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	<u>THE TREMIL TRUST</u> <u>C/O FSC, 499 PARK AVE 26TH FLOOR</u> <u>NEW YORK, NY 10022</u>	\$ <u>554,514.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	<u>THE WHITEHORSE TRUST</u> <u>C/O FSC, 499 PARK AVE 26TH FLOOR</u> <u>NEW YORK, NY 10022</u>	\$ <u>74,144.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
NORTHERN TRUST	247,200.	0.	247,200.
TOTAL TO FM 990-PF, PART I, LN 4	247,200.	0.	247,200.

FORM 990-PF OTHER INCOME STATEMENT 2

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
PASSED THROUGH FROM PINE GROVE INSTITUTIONAL PARTNERS	0.	106,303.	
PASSED THROUGH FROM PINE GROVE INSTITUTIONAL PARTNERS	296,395.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	296,395.	106,303.	

FORM 990-PF ACCOUNTING FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	250.	0.		250.
TO FORM 990-PF, PG 1, LN 16B	250.	0.		250.

FORM 990-PF TAXES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	4,196.	4,196.		0.
TO FORM 990-PF, PG 1, LN 18	4,196.	4,196.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CUSTODY FEES	3,958.	3,958.		0.
MESSENGER SERVICES	599.	0.		599.
FILING FEES	485.	0.		485.
TOTAL TO FORM 990-PF, PG 1, LN 23	5,042.	3,958.		1,084.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN PINE GROVE INSTITUTIONAL PARTNERS LP	COST	4,344,852.	4,466,224.
107,448 SHARES VANGUARD TOTAL STOCK MARKET	COST	2,980,723.	2,847,373.
322,729 SHARES VANGUARD BD INDEX FDS TOTAL	COST	3,191,816.	3,340,250.
197,127 SHARES MFO VANGUARD TOTAL INTL STK IND	COST	2,293,556.	2,840,602.
TOTAL TO FORM 990-PF, PART II, LINE 13		12,810,947.	13,494,449.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT 7

NAME OF CONTRIBUTOR	ADDRESS
THE CONIFER TRUST	C/O FIRST SPRING CORP 499 PARK AVE 26TH FL NEW YORK, NY 10022
THE TREMIL TRUST	C/O FIRST SPRING CORP 499 PARK AVE 26TH FL NEW YORK, NY 10022
THE WHITEHORSE TRUST	C/O FIRST SPRING CORP 499 PARK AVE 26TH FL NEW YORK, NY 10022

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 8

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CHARLES DE GUNZBURG C/O FSC 499 PARK AVE, 26TH FL NEW YORK, NY 10022	PRES/DIR 1.00	0.	0.	0.
GUIDO GOLDMAN C/O FSC 499 PARK AVE, 26TH FL NEW YORK, NY 10022	VP/DIR 1.00	0.	0.	0.
SUSAN SHEHAN C/O FSC 499 PARK AVE, 26TH FL NEW YORK, NY 10022	SEC/TRES 1.00	0.	0.	0.
NATHALIE DE GUNZBURG C/O FSC 499 PARK AVE, 26TH FL NEW YORK, NY 10022	DIR 1.00	0.	0.	0.
LEONARD M. NELSON C/O BSSN 100 MIDDLE ST, POB 9729 PORTLAND, ME 04104	DIR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

04-21-10 14:20
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First Spring Corporation
 REALIZED GAIN/LOSS REPORT
 FROM 01-01-09 TO 12-31-09
 Canary Charitable Foundation
 ENTITY: CANARY

SELECTION: WITH CLASS # 'PARTS'
 SORT OPTION. BY GL ENTITY, DESCR, DESCR

INVESTMENT DESCRIPTION	DIS DATE	ACQ DATE	QUANTITY	SALE PROCEEDS	COST BASIS	SHORT TERM	LONG TERM
921937868 MFO VANGUARD BD INDEX FDS TOTAL	03-02-09	10-27-06	6,131	61,493.81	61,125.97		367.84
921937868 MFO VANGUARD BD INDEX FDS TOTAL	03-02-09	12-31-08	669	6,705.55	6,805.80	-100.25	
		01-30-09	678	6,800.64	6,827.79	-27.15	
921937868 MFO VANGUARD BD INDEX FDS TOTAL	06-29-09	10-27-06	3,955	40,260.15	39,429.66		830.49
921937868 MFO VANGUARD BD INDEX FDS TOTAL	06-29-09	05-29-09	1,282	13,046.58	13,008.11	38.47	
		04-30-09	1,292	13,153.57	13,050.24	103.33	
		03-31-09	839	8,539.70	8,472.59	67.11	
921937868 MFO VANGUARD BD INDEX FDS TOTAL	10-29-09	10-27-06	6,014	62,605.31	59,959.18		2,646.13
921937868 MFO VANGUARD BD INDEX FDS TOTAL	10-29-09	09-30-09	1,155	12,021.99	12,056.58	-34.59	
		08-31-09	1,203	12,519.79	12,447.67	72.12	
		07-31-09	1,235	12,852.91	12,692.39	160.52	
921937868 MFO VANGUARD BD INDEX FDS TOTAL	12-17-09	10-27-06	19,763	207,318.07	197,041.08		10,276.99
		03-20-06	722	7,569.30	7,194.08		375.22
		12-27-00	932	9,778.08	9,284.04		494.04
		08-31-07	1,702	17,856.71	16,937.47		919.24
		08-31-06	845	8,869.04	8,404.03		465.01
921937868 MFO VANGUARD BD INDEX FDS TOTAL	12-17-09	11-30-09	1,092	11,456.03	11,532.50	-76.47	
		10-30-09	1,159	12,152.77	12,106.41	46.36	
TOTAL MFO VANGUARD BD INDEX FDS TOTAL BD M				525,000.00	508,375.59	249.45	16,374.96
TOTAL CANARY				525,000.00	508,375.59	249.45	16,374.96

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

Recipient Name and Address	Relationship to Substantial Contributor and Foundation Status Of Recipient	Purpose of Grant or Contribution	Amount
1) ArtsConnection 520 8th Avenue Suite 321 New York, NY 10018	None 501 (C) (3)	General Support	1,000 00
2) The Jewish Museum 1109 Fifth Avenue New York, NY 10128	None 501 (C) (3)	General Support	137,500 00
3) New Museum of Contemporary Art 235 Bowery New York, NY 10002	None 501 (C) (3)	General Support	20,000 00
4) Intrepid Museum Foundation One Intrepid Square West 46th Street New York NY 10036	None 501 (C) (3)	General Support	50,000 00
5) Lycee Francais de New York 505 East 75th Street New York, NY 10021	None 501 (C) (3)	General Support	20,000 00
6) City Year Inc 606 S Olive Street 2nd Floor Los Angeles, CA 90014	None 501 (C) (3)	General Support	5,000 00
7) UJA Federation of New York 130 East 59th Street New York, NY 10022	None 501 (C) (3)	General Support	100,000 00
8) Musician's on Call 1133 Broadway Suite 630 New York, NY 10010	None 501 (C) (3)	General Support	500 00
9) New York University School of Medicine 726 Broadway, 2nd FL New York, NY 10003-9580	None 501 (C) (3)	General Support	2,500 00
10) DIA Art Foundation 535 W 22nd St New York, NY 10011	None 501 (C) (3)	General Support	475,000 00
11) Publicolor 149 Madison Avenue Suite 1201 New York, NY 10016	None 501 (C) (3)	General Support	2,000 00
12) The Rockefeller University 1230 York Avenue New York, NY 10021	None 501 (C) (3)	General Support	700 00
13) The Intrepid Fallen Heroes Fund One Intrepid Square West 46th Street New York NY 10036	None 501 (C) (3)	General Support	25,000 00
14) VisionSpring 322 8th Avenue New York, NY 10001	None 501 (C) (3)	General Support	50,000 00
15) AmFar 120 Wall Street, 13th Floor New York, NY 10005	None 501 (C) (3)	General Support	10,000 00

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

<u>Recipient Name and Address</u>	<u>Relationship to Substantial Contributor and Foundation Status Of Recipient</u>	<u>Purpose of Grant or Contribution</u>	<u>Amount</u>
16) American Jewish Committee 165 East 56th Street New York, NY 10021	None 501 (C) (3)	General Support	10,000 00
17) ArtsConnection 520 Eighth Avenue Suite 321 New York, NY 10018	None 501 (C) (3)	General Support	- 1,000 00
18) The French Institute Alliance Francaise 22 East 60th Street New York, NY 10022	None 501 (C) (3)	General Support	1,000 00
19) Temple Israel of the City of New York 112 East 72nd Street New York, NY 10021	None 501 (C) (3)	General Support	5,000 00
20) Trisha Brown Dance Company 625 W 55th Street New York, NY 10019	None 501 (C) (3)	General Support	4,000 00
21) The Frick Collection 1 E 70th Street New York, NY 10021	None 501 (C) (3)	General Support	1,000 00
22) University of Miami PO Box 248073 Coral Gables, FL 33124-2932	None 501 (C) (3)	General Support	3,000 00
23) Casita Mana, Inc 17-19 Marble Avenue Pleasantville, NY 10570	None 501 (C) (3)	General Support	3,000 00
24) NBCC Fund 1101 17th Street NW Washington DC 20036	None 501 (C) (3)	General Support	25,000 00
25) Combined Jewish Philanthropies 126 High Street Boston, MA 02110	None 501 (C) (3)	General Support	5 000 00
26) The Dalton School 108 E 89th Street New York, NY 10128	None 501 (C) (3)	General Support	30,000 00
27) Carolina Crown 227-A Main Street Fort Mill, SC 29715	None 501 (C) (3)	General Support	500 00
Total Contributions Paid			<u>987,700 00</u>

FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

<u>Recipient Name and Address</u>	<u>Relationship to Substantial Contributor and Foundation Status Of Recipient</u>	<u>Purpose of Grant or Contribution</u>	<u>Amount</u>
1) New Museum of Contemporary Art 556 W 22nd Street New York, NY 10011	None 501 (C) (3)	General Support	10,000 00
2) The Jewish Museum 1109 Fifth Avenue New York, NY 10128	None 501 (C) (3)	General Support	300,000 00
3) DIA Art Foundation 535 W 22nd St New York, NY 10011	None 501 (C) (3)	General Support	550,000 00
4) UJA Federation 130 E 59th Street New York, NY 10022	None 501 (C) (3)	General Support	100,000 00
5) Schepens Eye Institute 20 Staniford Street Boston, MA 02114	None 501 (C) (3)	General Support	498,800 00
6) Dalton School 108 E 89th Street New York, NY 10128	None 501 (C) (3)	General Support	15,000 00
7) Lycee Francais de New York 505 East 75th Street New York, NY 10021	None 501 (C) (3)	General Support	32,500 00
8) VisionSpring 322 8th Avenue New York, NY 10001	None 501 (C) (3)	General Support	200,000 00
		Total Contributions Paid	<u>1,706,300 00</u>

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization THE CANARY CHARITABLE FOUNDATION	Employer identification number 1 3 : 4 0 0 5 4 7 5
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions C/O FIRST SPRING CORPORATION, 499 PARK AVENUE 26TH FLOOR	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions NEW YORK NY 10022	

Check type of return to be filed (file a separate application for each return)

- | | | |
|---|--|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ **THE CANARY CHARITABLE FOUNDATION**

Telephone No ▶ () 212-688-4010 FAX No ▶ ()

- 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 for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/16/2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶ calendar year 20 09 or

▶ tax year beginning _____ /, 20____, and ending _____ /, 20_____

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a \$17,080
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b \$6,080
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c \$11,000

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization THE CANARY CHARITABLE FOUNDATION	Employer Identification number 1 3 4 0 0 5 4 7 5
	Number, street, and room or suite no. If a P O box, see instructions C/O FIRST SPRING CORPORATION, 499 PARK AVENUE 26TH FLOOR	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions NEW YORK NY 10022	

- Check type of return to be filed** (File a separate application for each return)
- | | | | |
|--------------------------------------|--|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990 | <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 5227 | |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **THE CANARY CHARITABLE FOUNDATION**
 Telephone No **212-688-4010** FAX No _____
- 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 for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

- I request an additional 3-month extension of time until 11/15/2010
- For calendar year 2009, or other tax year beginning _____, 20____, and ending _____, 20____.
- If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period
- State in detail why you need the extension
Awaiting third party information necessary for filing a complete and accurate return

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a \$ 17,080
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$ 17,080
c Balance 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 \$ 0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature _____ Title _____ Date _____