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Form 990-PF

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

OMB No 1545-0052

2009

Treated as a Private Foundation Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning , 2009, and ending Initial return Initial Return of a former public charity G Check all that apply: Final return Amended return Address change Name change Employer identification number Use the RAYMOND & BEVERLY SACKLER FUND IRS label 13-4085037 Otherwise, FOR THE ARTS & SCIENCES B Telephone number (see the instructions) print CHADBOURNE & PARKE 30 ROCKEFELLER #3223 212-408-5520 or type. NEW YORK, NY 10112-0129 See Specific If exemption application is pending, check here Instructions 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation Check type of organization 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year Accounting method: X Cash under section 507(b)(1)(A), check here ... (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 2,945,368. (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here Analysis of Revenue and Part I (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income income for charitable columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ourposes (cash basis only) (see the instructions)) Contributions, gifts, grants, etc, received (att sch) 625,000 1 Ck ► if the foundn is not reg to att Sch B 3 Interest on savings and temporary cash investments Dividends and interest from securities 58,836 58,836 9 5 a Gross rents b Net rental income or ('oss). -11,096 62 Net gain/(loss) from sale of assets not on line 10 h Gross sales price for all assets on line 6a 85,569 22,563. Capital gain net income (from Part IV, lirie 2). 8 Net short-term capital gain Income modification 10 & Gross sates ESCEIVED Less Cost of တ Gross profit/(1655) (attrsch) က် Other income (attach schedule Total. AOD THESE INCUSH 1 672,740 0 Compensation of officers, directors, trustees, etc. 0 Other employee salaries and wages . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) ADMINISTRAT b Accounting fees (attach sch) 22,084. c Other prof fees (attach sch) SEE ST 1 22,084. Interest 3,223 Taxes (attach schedule)(see instr.).. SEE STM 2 223 Depreciation (attach 19 sch) and depletion 20 Occupancy. . . Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) SEE STATEMENT 48 48 Total operating and administrative 24 29,355 expenses. Add lines 13 through 23 25,355 Contributions, gifts, grants paid PART . XV 1,030,586. 1,030,586. Total expenses and disbursements. 25<u>, 355</u> 0

1,059,941

-387,201

BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Add lines 24 and 25

Subtract line 26 from line 12: a Excess of revenue over expenses

and disbursements . . .

b Net investment income (if negative enter -0-)

C Adjusted net income (if negative, enter -0-)

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56,044.

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Ö.

1,030,586.



Page 2

Par	1	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
			(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest	l-bearing	579,845.	170,233.	170,233.
	1 2	2 Savings and tempor	ary cash investments	90,410.	4,410.	4,410.
	3	Accounts receivable				İ
		Less allowance for	doubtful accounts ►		<u></u>	·
	4	Pledges receivable	·			
		Less allowance for	doubtful accounts ►			
	5		•			
	6	Receivables due from office disqualified persons (attack	cers, directors, trustees, and other checkles (see the instructions)			
_	7	Other notes and loans rec	eivable (attach sch)			_
A S		Less allowance for	doubtful accounts ►			
Š	8	Inventories for sale of	or use		<u> </u>	
A S E T	9	Prepaid expenses ar	nd deferred charges			
S	10	a Investments – U.S. obligations (attach s	and state government chedule)			
	1	b Investments — corporate :	stock (attach schedule) .	2,005,535.	2,113,946.	2,770,725.
		c Investments — corporate 1	bonds (attach schedule) .			
	11	Investments — land, equipment basis	buildings, and			
		Less: accumulated deprect (attach schedule)	ation			
	12	Investments - morto	page loans			
	1	Investments - other	}			· · · · · · · · · · · · · · · · · · ·
	1	Land, buildings, and e	· .			
		Less accumulated depreci- (attach schedule)	ation		ı	
		Other assets (describ	be becompleted by all filers —			
-,-	_	see instructions. Also	o, see page 1, item I)	2,675,790.	2,288,589.	2,945,368.
L	17		d accrued expenses.			
A B	19					
ĭ	20	-	ors, trustees, & other disqualified persons.			
L	21	Mortgages and other notes	· · · · · · · · · · · · · · · · · · ·			
T	22	• •	· · · · · · · · · · · · · · · · · · ·			
E		Other habitues (desert	/			
	23	Total liabilities (add		0.	0.	
		Foundations that foll and complete lines 2	low SFAS 117, check here 4 through 26 and lines 30 and 31.			
NF	24	Unrestricted				
EU	25	Temporarily restricted	i [
D	26					
A B A L A		Foundations that do and complete lines 2	not follow SFAS 117, check here 🕒 🗓 7 through 31.			
ĔĹ	27		rincipal, or current funds	2,675,790.	2,288,589.	
SN	28	Paid-in or capital surplus, o	or land, building, and equipment fund			
O E	29	Retained earnings, accumul	lated income, endowment, or other funds			
R Ş	30		ind balances (see the instructions) .	2,675,790.	2,288,589.	
	31	(see the instructions)	et assets/fund balances	2,675,790.	2,288,589.	
Part	111	Analysis of Chang	ges in Net Assets or Fund Balance			
			lances at beginning of year - Part II, colur		ree with	
•	end-	of-year figure reported	on prior year's return).	(2), 00 (11103) ag	1	2,675,790.
2	Ente	r amount from Part I, i	ine 27a .		2	-387,201.
		increases not included in line	e 2 (itemize)		3	
		lines 1, 2, and 3	•		4	2,288,589.
		ases not included in line 2 (it			5	
6	Total	net assets or fund bal	ances at end of year (line 4 minus line 5)	 Part II, column (b), lir 	ne 30 . 6	2,288,589.

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company) (b) How a P - Pur Do					(d) Date sold (month, day, year)
1a SEE STATEMENT 4				-	
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b					
d	 				
e Canada and for accept show			 -		
(i) Fair Market Value	ving gain in column (h) and owned t	(k) Excess of column ((I) Gains (Coli gain minus column (I	
as of 12/31/69	as of 12/31/69	over column (j), if any	,,	than -0-) or Losses (fr	
<u>a</u>	 				
b	ļ				·
<u>c</u>					
	 	· 			
2 Capital gain net income or (ne	et capital loss) If gain, also	enter in Part I, line 7 er -0- in Part I, line 7			
•	(loss) as defined in sections 1222(5)		_2		22,563.
	e 8, column (c) (see the instructions	s) If (loss), enter -0-	3		0.
	r Section 4940(e) for Reduced	Tay on Net Investmen		<u> </u>	
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable a alify under section 4940(e) Do not co	omplete this part.		Yes	X No
	in each column for each year; see the		any entrie	····	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset	ts (co	(d) Distribution lumn (b) divided	
2008	516,877.	3,002,	420.		0.172153
2007	502,500.	3,763,	256.		0.133528
2006	453,400.	3,717,	547.		0.121962
2005	587,000.	3,974,			0.147690
2004	672,590.	4,156,	743.		0.161807
2 Total of line 1, column (d)			. 2		0.737140
3 Average distribution ratio for the number of years the foundation	ne 5-year base period -divide the tot n has been in existence if less than	tal on line 2 by 5, or by the 5 years	. 3		0.147428
4 Enter the net value of nonchar	itable-use assets for 2009 from Part	X, line 5	4	2	,639,918.
5 Multiply line 4 by line 3			5		389,198.
6 Enter 1% of net investment inc	come (1% of Part I, line 27b) .		. 6		560.
7 Add lines 5 and 6			7		389,758.
8 Enter qualifying distributions fr	om Part XII, line 4		8	1	,030,586.
If line 8 is equal to or greater t Part VI instructions	han line 7, check the box in Part VI,	line 1b, and complete that p	art using a		
BAA		•		Form	990-PF (2009)

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instr	actions	<u></u>	
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.			
Date of ruling or determination letter. (attach copy of letter if necessary - see instr.)			F.C.0
b Domestic foundations that meet the section 4940(e) requirements in Part V,			<u>560.</u>
check here X and enter 1% of Part I, line 27b			
c All other damestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			0
foundations only. Others enter -0-) 3 Add lines 1 and 2			0.
			<u>560.</u> 0.
			560.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5 6 Credits/Payments			<u> </u>
a 2009 estimated tax pmts and 2008 overpayment credited to 2009			
c Tax paid with application for extension of time to file (Form 8868).			
7 Total credits and payments. Add lines 6a through 6d		6	712.
8 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached		υ,	112.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			152.
11 Enter the amount of line 10 to be Credited to 2010 estimated tax 6, 152. Refunded		0,	0.
Part VII-A Statements Regarding Activities			<u> </u>
		Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	165	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		<u>x</u>
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
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers $. \blacktriangleright$ \$ 0	<u>.</u>		1
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers . ▶ \$ 0.			
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		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	A A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
If 'Yes,' attach the statement required by General Instruction T.	1-3-1		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1		
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	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)			
DE			
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	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)? If 'Yes,' complete Part XIV	9		<u>X</u> _
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.	10		Х
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Form 990-PF (2009) RAYMOND & BEVERLY SACKLER FUND	13-4085	037	<u> </u>	age 5
Part VII-A Statements Regarding Activities Continued				
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		χ_
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address ► NONE	on application?	. 13	Х	
14 The books are in care of CHADBOURNE & PARKE Located at 30 ROCKEFELLER PLZA STE 3223 NY NY Telephol	ne no ► 212-	408-5	520	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		.N/A	- - -	
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)			ì	
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	X Yes No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	- I		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No			
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 the instruct	ions)?	1 b		х
Organizations relying on a current notice regarding disaster assistance check here	▶ 🗌			
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?	Yes X No			
If 'Yes,' list the years ► 20, 20, 20		1 1	İ	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 494 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement — see the instructions.)		2 b	N	'A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years 20, 20, 20, 20	here.			 -
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X 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 approve 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)	ed	3b	N/	<u>A</u>
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		<u>X</u>
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
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Part VII-B Statements Regarding Activ		m 4/20 Way Be Rec	uirea (continuea)		
 5a During the year did the foundation pay or inc (1) Carry on propaganda, or otherwise attention 		(h 404E(-))2	□v [v	7	
(2) Influence the outcome of any specific pu		(∐ Yes X	No	
on, directly or indirectly, any voter regist (3) Provide a grant to an individual for trave	ration drive?	,	<u> </u>	No No	
(4) Provide a grant to an organization other in section 509(a)(1), (2), or (3), or section	•	•	∐ Yes X	, NO	
in section 509(a)(1), (2), or (3), or section (5) Provide for any purpose other than religion			Yes X	No	
educational purposes, or for the preventi	on of cruelty to children	or animals?] No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or (see instructions)?	f the transactions fail to in a current notice regal	qualify under the exception of the control of the c	otions e 	5ь	N/A
Organizations relying on a current notice reg	arding disaster assistar	ice check here	► [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respoin If 'Yes,' attach the statement required by Reg	nsibility for the grant? .		. N/A Yes] No	
6a Did the foundation, during the year, receive a on a personal benefit contract?			Yes X]No	
b Did the foundation, during the year, pay pren If 'Yes' to 6b, file Form 8870.	niums, directly or indire	ctly, on a personal bene	fit contract? .	6b	X
7a At any time during the tax year, was the foun	dation a party to a prof	nibited tax shelter transa	ection? Yes X	No	
b If yes, did the foundation receive any proceed	is or have any net inco	me attributable to the tra	ansaction?	7b	N/A
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid	mployees,	,
and Contractors	·····				
1 List all officers, directors, trustees, foundation	on managers and their	compensation (see inst	ructions).		<u> </u>
(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 other allow	
RAYMOND R SACKLER, MD	VICE PRES/DI	0.	0.		0.
ONE STAMFORD FORUM	1.00			1	
STAMFORD, CT 06901-3516					
BEVERLY SACKLER	CHAIR/SEC/TR	0.	0.		0.
ONE STAMFORD FORUM	0	- 1	- •	ĺ	•
STAMFORD, CT 06901-3516					
RICHARD S SACKLER, MD	VICE PRES/DI	0.	0.		0.
ONE STAMFORD FORUM	0	1	٠.		٥.
STAMFORD, CT 06901-3516	•				
JONATHAN D SACKLER	PRES/CEO/DIR	0.	0.		
ONE STAMFORD FORUM	1	0.	0.		0.
	1.00				
STAMFORD, CT 06901-3516		landad an Una 1 - an 1	-4		
2 Compensation of five highest-paid employee					
(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 a other allow	account, ances
NONE					
					
					<u> </u>
otal number of other employees paid over \$50,000					0
BAA	TEEA0306L 07	7/06/09		Form 990-P	F (2009)

Form 990-PF (2009) RAYMOND & BEVERLY SACKLER FUND Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	1085037 Page 2 d Employees,
3 Five highest-paid independent contractors for professional services — (see instructions). 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	<u> </u>
Part IX-A Summary of Direct Charitable Activities	<u>-</u>
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 NONE	-
2	-
3	_
	-
4	-
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 N/A	Amount —
2	_
	-
All other program-related investments. See instructions 3	-
otal. Add lines 1 through 3	0.
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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

BAA

6 Adjusted qualifying distributions. Subtract line 5 from line 4

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				131,436.
2 Undistributed income, if any, as of the end of 2009:				131,430.
a Enter amount for 2008 only.			0.	
b Total for prior years 20 , 20 , 20		0.	·	
3 Excess distributions carryover, if any, to 2009				
a From 2004 478, 084.				
b From 2005 393, 973.				
c From 2006 271, 718.				
d From 2007 320, 701.				
e From 2008 . 370, 408.				
f Total of lines 3a through e	1,834,884.	1		
4 Qualifying distributions for 2009 from Part				
XII, line 4: ► \$ 1,030,586.				
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				131,436.
e Remaining amount distributed out of corpus	899,150.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	2,734,034.		}	
· · · · · · · · · · · · · · · · · · ·	2,734,034.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed 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 instructions			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)	_			
(see instructions) .	0.			·
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions).	478,084.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	2,255,950.			
10 Analysis of line 9				
a Excess from 2005 393, 973.				
b Excess from 2006 271, 718.				
c Excess from 2007 320, 701.				
d Excess from 2008 370, 408.				
e Excess from 2009 899, 150.				000 PE (2000)

Form 990-PF (2009) RAYMOND & BEVERL	13-4085037						
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A							
1 a if the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling							
b Check box to indicate whether the founda		erating foundation d		4942(j)(3) or	4942(j)(5)		
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	·	Prior 3 years				
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total		
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 of exempt activities							
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 							
3 Complete 3a, b, or c for the alternative test relied upon:							
a 'Assets' alternative test — enter:		1					
(1) Value of all assets		<u> </u>					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)							
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed							
c '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)							
(3) Largest amount of support from an exempt organization							
(4) Gross investment income							
Part XV Supplementary Information (assets at any time during the	(Complete this e year — see in:	part only if the o	organization had	1 \$5,000 or more	in		
a List any managers of the foundation who had close of any tax year (but only if they have SEE STATEMENT 5	ave contributed mo	ore than 2% of the to than \$5,000). (See s	otal contributions red section 507(d)(2))	ceived by the founda	ation before the		
b List any managers of the foundation who o a partnership or other entity) of which the NONE	wn 10% or more of foundation has a 10	the stock of a corp % or greater interes	oration (or an equal st.	ly large portion of th	e ownership of		
2 Information Regarding Contribution, Gran	t. Gift. Loan, Schol	arship, etc. Program	ns:	-			
Check here X if the foundation only m requests for funds If the foundation makes	akes contributions	to preselected chari	table organizations	and does not accept	unsolicited conditions.		
complete items 2a, b, c, and d			 		·		
a The name, address, and telephone number	of the person to w	hom applications st	nould be addressed				
b The form in which applications should be so	b The form in which applications should be submitted and information and materials they should include.						
c Any submission deadlines:			 				
d Any restrictions or limitations on awards, su	uch as by geograph	ical areas, charitabl	e fields, kinds of ins	stitutions, or other fa	ctors		

TEEA0310L 07/06/09

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Form **990-PF** (2009)

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount				
substantial contributor	recipient						
SUbstantial contributor							
	,						
. ,	7	► 3a	1,030,586.				
		. ► 3b					
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	144	If recipient is an individual show any relationship to any foundation manager or substantial contributor Foundation recipient Foundation status of recipient Foundation contribution Purpose of grant or contribution				

Part	XVI-A	Analysis	of Income-	Producina	Activities
			01 111001110	oauoing	7400141000

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
a			 		
b					
c			 		
d			 		
e					
_ † 			 -		
g Fees and contracts from government agencies.			 		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments	ļ		 	50.000	
4 Dividends and interest from securities .			14	58,836.	
5 Net rental income or (loss) from real estate.			 		
a Debt-financed property					
b Not debt-financed property			 		
6 Net rental income or (loss) from personal property			-		
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	-11,096.	
9 Net income or (loss) from special events			<u> </u>		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.			ļ		
a					
b			ļl.		
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				47,740.	
13 Total. Add line 12, columns (b), (d), and (e)				13 _	47,740.
				13 _	47,740.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c	alculations.)				47,740.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
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13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
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13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
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13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	
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13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	alculations.) Accomplis	hment of Exempt	Purpose	S	

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Form 990-PF (2009) RAYMOND & BEVERLY SACKLER FUND 13-4085037 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) X (2) Other assets . . . 1 a (2) **b** Other transactions: Х (1) Sales of assets to a noncharitable exempt organization..... 1 b (1) (2) Purchases of assets from a noncharitable exempt organization. 1 b (2) Х X (3) Rental of facilities, equipment, or other assets 1 b (3) $\bar{\mathbf{x}}$ (4) Reimbursement arrangements 1b(4) X (5) Loans or loan guarantees . . 1 b (5) 1 b (6) X (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees...... d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no. (d) Description of transfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?..... b If 'Yes,' complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxgaye) or fiduciary) is based on all information of which preparer has any knowledge. ୪ PRESIDENT Signatur of officer or truster Date Trile Preparer's Identifying number (See Signature in the instrs) Date Check if Preparer's Paid signature N/A employed > Preparer's Use Firm's name (or yours if self-employed), address, and ZIP code NORTH BAY ASSOCIATES ► N/A EJN 14000 QUAIL SPRINGS PKWY, **SUITE 2200** Only

Phone no ► 405-936-6240

Form 990-PF (2009)

OKLAHOMA CITY, OK 73134

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 RAYMOND & BEVERLY	SACKLER FUND		Employer identification number
FOR THE ARTS & SC			13-4085037
Organization type (check one)			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) or	•	
	4947(a)(1) nonexempt charitable	trust not treated as a	private foundation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation	on	
7 31111 333 7 7	4947(a)(1) nonexempt charitable		ate foundation
	501(c)(3) taxable private foundation		ate louridation
		-,,	
Check if your organization is covered by the Go Note: Only a section 501(c)(7), (8), or (10) organization	neral Rule or a Special Rule noization can check boxes for both the	General Rule and a S	pecial Rule. See instructions
General Rule —	000 05 that are and the state of		
For an organization filing Form 990, 990-E2 contributor (Complete Parts I and II)	, or 990-PF that received, during the y	ear, \$5,000 or more (in money or property) from any one
Special Rules —			
For a section 501(c)(3) organization filing F	orm 990 or 990-F7, that met the 33-1/3	R% support test of the	regulations under sections
509(a)(1)/170(b)(1)(A)(vi) and received from any amount on (i) Form 990, Part VIII, line 1h o	one contributor, during the year, a contribu	ition of the greater of (1)	\$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) organiz	ition filing Form 990 or 990-EZ, that re	ceived from any one of	contributor, during the year,
aggregate contributions of more than \$1,00 prevention of cruelty to children or animals.) for use <i>exclusively</i> for religious, chari Complete Parts I. II. and III	itable, scientific, litera	ry, or educational purposes, or the
For a section 501(c)(7), (8), or (10) organiz	, , , , , , , , , , , , , , , , , , ,	ceived from any one (contributor, during the year
contributions for use exclusively for religious	s charitable etc ourposes but these i	contributions did not a	sogregate to more than \$1,000. If
this box is checked, enter here the total corpurpose. Do not complete any of the parts in	tributions that were received during thin inless the General Rule applies to this	e year for an <i>exclusiv</i> e organization because	aly religious, charitable, etc, at received nonexclusively
religious, charitable, etc, contributions of \$5	• •	. ,	► \$
Caution: An organization that is not covered by	the General Rule and/or the Special R	ules does not file Sch	redule B (Form 990, 990-F7, or
990-PF) but it must answer 'No' on Part IV, line 990-PF, to certify that it does not meet the filing	2 of their Form 990, or check the box	on line H of its Form	990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Reduction	n Act Notice, see the instructions	Schedule	B (Form 990, 990-EZ, or 990 PF) (2009)
for Form 990, 990EZ, or 990-PF.			

Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
	ND & BEVERLY SACKLER FUND	1	085037
Part I	Contributors (see instructions.)	· · · · · · · · · · · · · · · · · · ·	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	RAYMOND R SACKLER MD	125 000	Person X Payroll
	ONE STAMFORD FORUM STAMFORD, CT 06901,	\$125,000.	(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	PLP ASSOCIATES HOLDING, INC 20 ROCKEFELLER PLAZA	\$500,000.	Person X Payroll Noncash
	NEW YORK, NY 10112,		(Complete Part II if there is a noncash contribution)
(a) Number	(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) Number	(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) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(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)
BAA	TEEA0702L 06/23/09	Schedule B (Form 990,	990-EZ, or 990-PF) (2009)

	3 (Form 990, 990-EZ, or 990-PF) (2009)		Page	1			of Part II
Name of organ						ntification nur	mber
	O & BEVERLY SACKLER FUND				13-408	5037	
Part II	Noncash Property (see instructions.)						
(a) No. from Part I	(b) Description of noncash property given		FMV (o (see in	(c) r es stru	stimate) ictions)	Date re	i) ceived
	N/A						
		$\frac{1}{2}$				1	
		\$					
		L		_			
(a) No. from Part I	(b) Description of noncash property given		FMV (o (see in:	(c) r es stru	stimate) ctions)	Date re	i) ceived
		-					
		1					
]\$_					
_		-				ļ	
(a) No. from Part I	(b) Description of noncash property given		FMV (o (see in:	(c) r es stru	timate) ctions)	(d Date re) ceived
_			-				_
		1					
,		\$_		_	_		
		L	_				
(a) No. from Part I	(b) Description of noncash property given		FMV (or	(c) r es stru	timate) ctions)	(d Date red) ceived
		\$_					
							
(a) No. from Part I	(b) Description of noncash property given		FMV (or (see ins	(c) r est itrud	timate) ctions)	(d) Date red) ceived
Ì							
]		\$_					
(a) No. from Part I	(b) Description of noncash property given		FMV (or	(c)	imate)	(d) Date red) ceived
rarti			(266 IU2		.uons)		
-							
Ţ		\$_					

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

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Schedule I	3 (Form 990, 990-EZ, or 990-PF) (2009)		F	Page 1	of 1 Employer identificati	of Part III
RAYMONI	& BEVERLY SACKLER FUND				13-4085037	
Part III	Exclusively religious, charitable, e organizations aggregating more t	etc, individual contribution han \$1,000 for the year.(Co	ns to section	on 501(c)(a) through (
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of exclusively religious, ch. (Enter this information once –	naritable, etc, see instruction	ns).	► \$	N/A
(a)	(b)	(c)			(d)	
No. from Part i	Purpose of gift	Use of gift	ļ	Desci	ription of how gift	is held
_ raiti	N/A		· -		-	
	11/12	 				
		 				
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relat	ionship of t	ransferor to trans	feree
					······································	
			<u>-</u>			
(a)	(b)	(c)			(d)	
No. from Part I	Purpose of gift	Use of gift		Descr	iption of how gift	is held
raiti						
			-			
				· · · · · · · · · · · · · · · · · · ·		
		(e)				
		Transfer of gift				_
	Transferee's name, addres	s, and ZIP + 4	Relati	onship of t	ransferor to trans	ieree
Ì						
(a)	(b)	(c)			(d)	
No. from	Purpose of gift	Use of gift	ļ.	Descr	iption of how gift	is held
Part I						
}						
	Transferee's name, addres	Relati	onship of tr	ransferor to transf	eree	
}						
}				- , 		
}						
(a)	(b)	(c)			(d)	
No. from	Purpose of gift	Use of gift		Descri	ption of how gift	s held
Part I						
						
-		** <u>***********************************</u>				
		(e)			_	
	Two claves and and and	Transfer of gift	Deleti	amahin ad tu	anderer te transf	0.500
-	Transferee's name, address), and £IF T 4	Relatio	onsinp of tr	ansferor to transf	
-					_ _	
-						
-						
			Calvad	D (F 1	200 000 57 00	20.000

2009	FEDERAL STATEMENTS RAYMOND & BEVERLY SACKLER FUND	PAGE
CLIENT ARTSFUND	FOR THE ARTS & SCIENCES	13-40850 02:08
STATEMENT 1 FORM 990-PF, PART I, LINE 160 OTHER PROFESSIONAL FEES		02 00
MANAGERIAL FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTE PER BOOKS INCOME NET INCO \$ 22,084. \$ 22,084.	
PRINAGENTAL FEED	TOTAL \$ 22,084. \$ 22,084. \$	0. \$ 0
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES		
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTE	(D) D CHARITABLE
	PER BOOKS INCOME NET INCO	
FOREIGN TAXES US TAXES .	. \$ 3,223. \$ 3,223. 4,000.	
	TOTAL \$ 7,223. \$ 3,223. \$	0. \$ 0
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES		5 .
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTE	
FILING FEES	<u>PER BOOKS INCOME NET INCO</u> . \$ 25. \$ 25.	ME PURPOSES
FOREIGN FEES	TOTAL \$\frac{23.}{\\$ 48.} \$\frac{23.}{\$\$ 48.}	0. \$ 0
STATEMENT 4		
FORM 990-PF. PART IV. LINE 1	OR TAX ON INVESTMENT INCOME	
ITEM (A) DES	(B) HOW (C) DATE OF THE COLUMN (C) DATE OF TH	RED SOLD
1 300 SH ALTRIA GROUP	NC PURCHASED 4/03/	2007 8/20/200
2 425 SH BROWN FORMAN (3 694 SH CADBURY PLC 4 320 SH CADBURY PLC	PURCHASED 2/18/ PURCHASED 2/19/	2004 12/29/200
5 906 SH CADBURY PLC 6 80 SH CADBURY PLC	PURCHASED 6/08/ PURCHASED 6/15/	2004 12/29/200

8

10

11

12 13

275 SH WELLS FARGO 75 SH WELLS FARGO

783 SH EW SCRIPPS CO

25 SH HASBRO 850 SH PERNOD RICARD SA RIGHTS 800 SH PERNOD RICARD SA RIGHTS 65 SH PHILLIP MORRIS CRA SCZK

PURCHASED

DONATED

DONATED **PURCHASED**

PURCHASED

DONATED

DONATED **PURCHASED** 12/29/2009 12/29/2009 7/01/2009 4/23/2009 4/24/2009 1/28/2009

11/02/2009

11/02/2009

6/15/2005 10/29/2001

11/01/2002 4/02/2008 7/17/2008

5/22/2001

9/17/2001 8/04/2009

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~	u		-

FEDERAL STATEMENTS

PAGE 2

CLIENT ARTSFUND

RAYMOND & BEVERLY SACKLER FUND FOR THE ARTS & SCIENCES

13-4085037

7/22/10

02 08PM

STATEMENT 4 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
1	5,248.	AUDONED	6,439.	-1,191.	14/31/03	77/37/03	-111 - (a)	
2			10 043					
2	20,519.		10,043.	10,476.				10,476.
3	8,725.		6,539.	2,186.				2,186.
4	4,023.		3,094.	929.				929.
5	11,386.		8,821.	2,565.				2,565.
6	1,011.		891.	120.				120.
7	1,680.		3,593.	-1,913.				-1,913.
8	680.		284.	396.				396.
9	3,029.		2,970.	59.				59.
10	2,762.		2,983.	-221.				-221.
11	16,978.		9,309.	7,669.				7,669.
12	7,486.		6,056.	1,430.				1,430.
13	2,042.		1,984.	58.				58.
							TOTAL	\$ 22,563.

STATEMENT 5 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

RAYMOND R SACKLER, MD BEVERLY SACKLER RICHARD S SACKLER, MD JONATHAN D SACKLER

STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
METROPOLITAN OPERA ASSOCIATION LINCOLN CENTER NEW YORK, NY 10023	N/A	PUBLIC	UNRESTRICTED GIFT	\$ 66,667.
NEW YORK CITY BALLET 20 LINCOLN CENTER NEW YORK, NY 10023	N/A	PUBLIC	CREATION OF NEW BALLETS	25,000.
UNIVERSITY OF CONNECTICUT FOUN 2390 ALUMNI DRIVE UNTI 3168 STORRS, CT 06269	N/A	PUBLIC	SUPPORT OF DISTINGUISHED LECTURE SERIES	8,719.

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7/22/10

FEDERAL STATEMENTS

PAGE 3

CLIENT ARTSFUND

RAYMOND & BEVERLY SACKLER FUND FOR THE ARTS & SCIENCES

13-4085037

02:08PM

STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AM	OUNT
RESEARCH AMERICA 1101 KING STREET STE 520 ALEXANDRIA, VA 22314	N/A	PUBLIC	LEADERSHIP CAMPAIGN	\$	25,000.
BOSTON UNIVERSITY SCHOOL OF MEDICINE 715 ALBANY ST., ROOM K-701 BOSTON, MA 02118	N/A	PUBLIC	CANCER RESEARCH		10,000.
MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10021	N/A	PUBLIC	LECTURE SERIES		22,459.
AMERICAN FRIENDS BRITISH MUSEU 6 WEST 48TH STREET, 10TH FLOOR NEW YORK, NY 10036	N/A	PUBLIC	PROGRAM SUPPORT		5,000.
UNIVERSITY OF CONNECTICUT HEALTH CENTER 263 FARMINGTON AVE. FARMINGTON, CT 06030	N/A	PUBLIC	GENETICS RESEARCH	1	87,500.
MOUNT SINAI SCHOOL OF MEDICINE ONE GUSTAVE L. LEVY PLACE, BOX 1049 NEW YORK, NY 10029	N/A	PUBLIC	MEDICAL RESEARCH SUPPORT		10,000.
MT. SINAI SCHOOL OF MEDICINE ONE GUSTAVE L. LEVY PLACE, BOX 1049 NEW YORK, NY 10029	N/A	PUBLIC	ESTABLISH THE DR. BARRY STIMMEL RESAISSANCE SCHOILAR AWARD ENDOWMENT FUND.	:	15,000.
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK, NY 10028	N/A	PUBLIC	SUPPORT OF THE ARTS	2	25,000.
HARVARD UNIVERSITY 124 MOUNT AUBURN STREET CAMBRIDGE, MA 02138	N/A	PUBLIC	SUPPORT FOR THE HARVARD-SMITHSON IAN CENTER FOR ASTROPHYSICS	36	50,000.
CARING FOR CARCINOID FOUNDATION 198 TREMONT ST., BOX 456 BOSTON, MA 02116	N/A	PUBLIC	CANCER RESEARCH	26	55,000.

2009	FEDERAL STA		_	PAGE 4
CLIENT ARTSFUND	FOR THE ARTS	13-4085037		
7/22/10				02:08PN
STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE Y	EAR			
NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
SACKLER SCHOOL OF MEDICINE 17 EAST 62ND STREET NEW YORK, NY 10021	N/A	PUBLIC	EDUCATIONAL MATERIALS	\$ 5,241
			ም ለጥ እ ፕ	6 1 020 FOC
			TOTAL	\$ 1,030,386
STATEMENT 7 FORM 990-PF, PART XV, LINE 3B RECIPIENT APPROVED FOR FUT	URE PAYMENT		TOTAL	\$ 1,030,366
FORM 990-PF, PART XV, LINE 3B	URE PAYMENT DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	\$ 1,030,586
FORM 990-PF, PART XV, LINE 3B RECIPIENT APPROVED FOR FUT	DONEE	ATION	PURPOSE OF	
NAME AND ADDRESS UNIVERISTY OF CONNECTICUT HEALTH CENTER 263 FARMINGTON AVE.	DONEE RELATIONSHIP	ATION STATUS	PURPOSE OF GRANT	AMOUNT

TOTAL \$ 607,100.

RAYMOND & BEVERLY SACKLER FUND FOR THE ARTS & SCIENCES

13-4085037

Form **990-W**

(Worksheet)

FOR FORM 990-PF PURPOSES

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations (and on Investment Income for Private Foundations)

2010

OMB No. 1545-0976

Depa Interr	rtment of the Treasury nal Revenue Service	(Keep fo		r records. Do not send	to the Internal Revenue			
1	Unrelated business ta	axable income exp	pected	In the tax year			1	
2	Tax on the amount o	n line 1. See ınstr	ruction	ns for tax computation .			2	
3	Alternative minimum	tax (see instruction	ons)				3	
4	Total. Add lines 2 and	13					4	
5	Estimated tax credits	(see instructions))				5	
6	Subtract line 5 from li	ne 4					6	
7	Other taxes (see instr	ructions)			,		7	
8	Total Add lines 6 and						8	
	Credit for federal tax p	•		•	1 .		9	
102	is not required to mak see instructions	ne 8. Note. If less se estimated tax p	ayme	\$500, the organization nts Private foundations	5.	6,152.		
t	Enter the tax shown o the tax year was for le from line 10a on line i	ess than 12 month	(see is, ski	instructions). Caution. Ip this line and enter the	If zero or e amount			
c	2010 Estimated Tax. E enter the amount from	Enter the smaller line 10a on line	of line 10c	e 10a or line 10b. If the	organization is required	to skip line 10b,	10 c	6,152.
				(a)	(b)	(c)		(d)
11	Installment due dates (see instructions)		11	5/17/10	6/15/10	9/15/10		12/15/10
	Required installments of line 10c in columns unless the organization annualized income installment method, or organization ' (see installment method).	(a) through (d) n uses the tallment seasonal us a 'large	12	1,538.	1,538.	1,5	30	1,538.
	2009 Overpayment. (see instructions)		13	1,538.	1,538.	1,5		1,538.
	Payment due. (Subtraction 12)	ct line 13 from	14	0	0	2/0	0	1,330.

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 990-W (2010)

Form 8868

(Hev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

	filing for an Automatic 3-Month Extension, complete only Part I and check this bo	
● If you are Do not com	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II plete Part II unless you have already been granted an automatic 3-month extension on a	(on page 2 of this form). previously filed Form 8868.
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies need	eded).
	on required to file Form 990-T and requesting an automatic 6-month extension—chec	
	porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form ncome tax returns.	7004 to request an extension of
one of the i electronically returns, or a	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month at eturns noted below (6 months for a corporation required to file Form 990-T). Howey if (1) you want the additional (not automatic) 3-month extension or (2) you file Form composite or consolidated Form 990-T. Instead, you must submit the fully completed at one details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file	ever, you cannot file Form 8868 is 990-BL, 6069, or 8870, group nd signed page 2 (Part II) of Form
Type or	Name of Exempt Organization	Employer Identification number
print	Raymond & Beverly Sackler Fund for the Arts & Sciences	13 4085037
File by the due date for filing your	Number, street, and room or suite no. If a P O box, see instructions 17 East 62 Street	
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. New York, NY 10021	
Check type	of return to be filed (file a separate application for each return):	
☐ Form 990		☐ Form 4720
☐ Form 990	<u> </u>	☐ Form 5227
☐ Form 990		☐ Form 6069
X Form 990		☐ Form 8870
Telephone If the organ If this is for	are in the care of ► Chadbourne and Parke, LLP No. ► (212)408-5520 FAX No ► (212) 408-164 nization does not have an office or place of business in the United States, check this or a Group Return, enter the organization's four digit Group Exemption Number (GEN) group, check this box. If it is for part of the group, check this box anames and EINs of all members the extension will cover.	4
	st an automatic 3-month (6 months for a corporation required to file For	000 D autonom of time
until <u>A</u> for the d ► IX c	organization's return for: alendar year 20 09 or	named above. The extension is
▶ ⊔ t	ax year beginning, 20, and ending	, 20
2 If this te	x year is for less than 12 months, check reason: I Initial return Final return	Change In accounting period
	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax nonrefundable credits. See instructions	, 3a \$ 0
	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated ta is made. Include any prior year overpayment allowed as a credit.	3b \$ 0
deposit	Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymen See instructions	
Caution. If your payment in	u are going to make an electronic fund withdrawal with this Form 8868, see Form 845 astructions.	