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Form	9	9	0	-	P	F
VIIII	•	_	•			

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

OMB No 1545-0052 2009

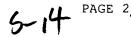
							mav i	Treated as a Private Foundation be able to use a copy of this return to satisfy state reporting requirements.						2009		
_			year 2009								, and en				, 20	_
-			hat apply:			return		Initia	l return	of a former p	oublic ch	arity			Final return	_
					Amer	nded retu	urn _		Addre	ess change			Name ch	ange	_	
_			Name of fo	oundat	tion	-							A Emplo	yer identi	fication number	_
	Use t	he IRS											1			
	lal	bel.	KLINGER	NSTE	IN FU	סמע								13	-6077 <u>89</u> 4	_
		rwise,	Number ar	nd stre	et (or P (D box nun	nber ıf	mail is not delivere	ed to stree	et address)	Room/s	suite	B Telepho	ne number (se	se page 10 of the instructions)	
	•	rint	C/O LEI	ΕP.	KLIN	NGENST	EIN	1			l					
•		type. pecific	31 OXF	ORD	ROAD									(2	12) 476-9000	
		ctions.	City or tow	n, stat	te, and Z	IP code							C if exempendin	nption applic g, check her	cation is	
					_								D 1 Fore	eign organiza	ations, check here . 🕨	
_		<u>-</u>	SCARSDA												ations meeting the	_
H	_Che	eck type	e of organiz	zation:	: [X]:	Section	501(c)(3) exempt p							here and attach	لــ
7			1947(a)(1) n							rivate founda			E If priva	te foundate	on status was terminated	_
ı			et value of a			uq 177	_	unting method		Cash Acc	crual		under	section 507(b)(1)(A), check here . 🕨 📗	L
	•	•	m Part II, c					ther (specify)			-		F If the f	oundation is	s in a 60-month termination	_
	· - <u>- </u>	▶ \$			539.		 -	column (d) mu	St De OI	n casn basis.) T			under	section 507(t	(1)(B), check here	┙
L	art ²		sis of Rev					(a) Revenue		(b) Net inve	estment	، ا	c) Adjuste	ed net	(d) Disbursements for charitable	
		may n	ot necessari	ly equ	al the an	nounts in		expenses p books	per	incom	ne	1	incom		purposes	
_			n (a) (see pa					50010				+-			(cash basis only)	_
	1		tions, gifts, grant	s, etc , re e found	eceived (att	tach schedul ot required	e). Ito		-			+		_	 	
	2	Check J								 		┼				_
	3		on savings ar					7.4	,097	1 7	4,097	_			ATCH 1	_
	4	_	nds and inte				٠ . ا	-	,	1		1			Arch 1	_
			rents tal income or (1		1			 	_
~	l		or (loss) from					-62	,639			╁┈┈				_
Revenue	Ъ	Gross s	ales pnce for a	ili Ili	Di assets i	141,1	24.		·	<u> </u>						_
ž	7		on line 6a I gain net <u>inc</u>	come (t	- 100				1	-			
ž	ĺя́Г		of tempth	`	<u>'</u> i											_
	9	Income	modificatio				[,						_
	10 4		les less return wances	_	\o	1										_
	ļ	ricess. ch	\$1000 go Bus Bo	w2010												
	4	Gross	profit or (loss	s) (atta	ch sollec	ule)						<u> </u>				
	11	Other	nconne (atte	gh sph	equie)				,078.		2,078				ATCH 2	
_	12	Total-	Vod Ines-1	produ	h 11	<u></u>		-20	,620.	4	2,019.	<u> </u>			·	
	13		sation of offic						0.			ļ				
Ś	14		employee sa		-											
Jse	15		n plans, emp									-				
and Administrative Expenses	16a		ees (attach s					<u> </u>	,035.		4,518.	-			4,51	
Ω̈	Þ		nting fees (a						,033.		4,510.	-			4,5	
άĶ	ء ا	•	orofessional	•		•	Г		-							_
tra	17		l				لدند	3	,997.		3,997.					
nis	18	•	ittach schedule		•		· F	<u>_</u>	, , , , .		3,337.					—
Ξ	19	•	iation (attac		•	•										—
ğ	20		ancy									 	·		 	
2	21		conferences													—
ğ			g and publica expenses (at						465.		95.	 			37	70
Operating	23 24		expenses (at perating an				- 1					 				<u> </u>
er	-4		perating an es 13 throug				- 1	13	,497		8,610.	İ			4,88	37
ö	25		utions, gifts.				- [,835.	 			· · · · -		523,83	_
	26 _		enses and disbu	-	•				,332.	1	8,610.				528,72	
_	27		t line 26 fro			<u> </u>	~	 								_
			revenue over e			ursements		-557	,952.		i					
			estment inc				0-)			3.	3,409.					_
			ed net incom		_									-0-		_

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 9E1410 2 000 48 68 22 7601 10/21/2010 9:00:50 AM

JSA ** ATCH 3

Form 990-PF (2009)

33095-70-KLF



Ē	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
4			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ng	85,502.	97,262.	97,262
			cash investments	239,196.	144,849.	144,849
	3	Accounts receivable ▶				
		Less: allowance for doul	btful accounts ▶			
		Less: allowance for doul	btful accounts ▶			
	5					
	_		fficers, directors, trustees, and other	· · · · · · · · · · · · · · · · · · ·		
	"		ch schedule) (see page 16 of the instructions)			
	_	•	eceivable (attach schedule)			
				į		
	ł		otful accounts -	· · · - · · · · · · · · · · · · · · · ·		
ţ	8					
Assets	9		· · · · · · · · · · · · · · · · · · ·			
ä			e government obligations (attach schedule) .			
	11 °	Investments - land, buildings				
		Less: accumulated deprecia (attach schedule)	tion ▶			
į	12	Investments - mortgage I	loans			
	13	Investments - other (atta	loans	3,269,026.	2,793,661.	2,743,428
	14	Land, buildings, and				
		Less accumulated deprecial	tion			
	15	Other assets (describe	>)			
			pleted by all filers - see the			
		•	age 1, item I)	3,593,724.	3,035,772.	2,985,539
			ccrued expenses			
	1					
(A)	_		.			
tie	20					
bili	20		rs, trustees, and other disqualified persons			,
Liabilities	21		tes payable (attach schedule)			
	22	Other liabilities (describe	▶)			
	22	Takal Nahilistan (add line)	47 th sough 22)			
-			s 17 through 22)			,
ĺ			ow SFAS 117, check here			,
ın		and complete lines 2	24 through 26 and lines 30 and 31.			•
8	24	Unrestricted				
폡	25	Temporarily restricted .				
B	26	Permanently restricted .				
밈		Unrestricted	not follow SFAS 117,			
리		check here and comp	olete lines 27 through 31. ▶ X			
히	27	Capital stock, trust princ	ipal, or current funds			
쐸	28	Paid-in or capital surplus, or	land, bldg , and equipment fund			
SS	29	Retained earnings, accumul	lated income, endowment, or other funds	3,593,724.	3,035,772.	•
₹	30	Total net assets or fund	balances (see page 17 of the			
흿		instructions)		3,593,724.	3,035,772.	
_	31	Total liabilities and net	assets/fund balances (see page 17			
				3,593,724.	3,035,772.	
Р			nges in Net Assets or Fund B			
			ances at beginning of year - Part II, o		agree with	
•						3,593,724.
,			on prior year's return)			-557,952.
		amount from Part I, III		• • • • • • • • • • • • • • • • • • • •		331, 332.
			d in line 2 (itemize)			2 025 770
		ines 1, 2, and 3		· · · · · · · · · · · · · · · · · · ·		3,035,772.
		eases not included in l			5	2 025 775
<u> </u>	Total	net assets or fund bal	ances at end of year (line 4 minus line	e 5) - Part II, column (b), I	line 30 6	3,035,772.

G	Part IV Capital Gains	s and Losses for Tax on Inv	vestment Income			
	* *	d describe the kind(s) of property sold		(b) How acquired P-Purchase	(c) Date acquired	(d) Date sold (mo., day, yr.)
_	CDC DADE TH COUR	rick warehouse; or common stock, 200	shs. MLC Co.)	D-Donation	(mo , day, yr)	(, 52), 31.9
1:	b			 		
				 		· · · · · · · · · · · · · · · · · · ·
	<u>v. </u>					
_	-			1		
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
	a					
_1	b		· · · · · · · · · · · · · · · · · · ·			
	<u>c</u>					
_	d			ļ .		
_	e		10/04/00	<u> </u>		
_	Complete only for assets s	7 17	Gains (Col. (h) g			
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	COI.	(k), but not less t Losses (from co	
	a					
	<u> </u>					
_				<u> </u>		
_	<u>. </u>					
_	9		gain, also enter in Part I, line 7	 	· - ··	
	Capital gain net income or	(net capital loss) {	(loss), enter -0- in Part I, line 7	2		-62,639.
3		or (loss) as defined in sections 12				
	_	line 8, column (c) (see pages 13				
r		line 8	uced Tax on Net Investment Inc	i 3		
W			outable amount of any year in the b	ase period	l? [Yes X No
_	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		; see page 18 of the instructions be	efore maki	no any entries.	
	(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution raticol (b) divided by	
_	2008	622,067.	4,523,512.			0.137519
_	2007	257,854.	4,101,909.			0.062862
	2006	557,806.	3,871,657.		(0.144074
	2005	642,127.	4,031,820.			0.159265
_	2004	579,804.	4,395,139.		(.131919
2	Total of line 1, column (d)			2	(0.635639
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 found	dation has been in existence if less	than 5 years	3	().127128
4	Enter the net value of non	charitable-use assets for 2009 fro	m Part X, line 5	4	2,9	48,817.
5	Multiply line 4 by line 3			5	3	374,877.
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		334.
7	Add lines 5 and 6			7	3	75,211.
8	Enter qualifying distribution If line 8 is equal to or gre	eater than line 7, check the box in	n Part VI, line 1b, and complete the	8 nat part u	sing a 1% tax	28,722.
	Part VI instructions on page	e 18.				

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Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he in	struct	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of ruling letter if necessary - see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check			334
	here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%			
	of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			334
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-			334
6	Credits/Payments:			
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 2,500.			
b	Exempt foreign organizations-tax withheld at source 6b 0.			
С	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		2,	500.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2,	166.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 2,166. Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		,	1
	of the instructions for definition)?	1b		X
	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.	İ		
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		,	1
	(1) On the foundation. ▶\$0. (2) On foundation managers. ▶\$0.			
е	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		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			۱
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Х	Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
	If "Yes," attach the statement required by General Instruction T.	ľ		· .
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		x	
_	conflict with the state law remain in the governing instrument?	6	$\frac{\hat{x}}{x}$	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	7		
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			•
	instructions) ► NY,	- 1	l	
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		x	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	^	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	İ		
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	_	ĺ	х
	27)? If "Yes," complete Part XIV	9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			Х
	names and addresses	10		

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enterprise at any time during the year?

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

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

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

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

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Part VIII	Information About Officers, Directors, Trustees, Foundation Mar and Contractors (continued)	nagers, Highly Paid Emplo	yees,	<u> </u>
3 Five high	est-paid independent contractors for professional services (see page 23	of the instructions). If none,	enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service		pensation
NONE				
				<u>.</u>
Total number	er of others receiving over \$50,000 for professional services	<u> </u>	▶	NONE
Part IX-A	Summary of Direct Charitable Activities			
	dation's four largest direct charitable activities during the tax year. Include relevant statistical inforons and other beneficianes served, conferences convened, research papers produced, etc.	mation such as the number	Ехфе	nses
1 NONE				
2				
3				
4				
Part IX-B	Summary of Program-Related Investments (see page 23 of the inst	ructions)		
	two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2.	Amo	unt
1 NONE				
2			· 	
, -	pram-related investments. See page 24 of the instructions.			
3 NONE				
Total. Add li	nes 1 through 3			· - · · · ·

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundations	s,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	2,832,863.
b	Average of monthly cash balances	1b	160,860.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	2,993,723.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,993,723.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	44,906.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,948,817.
6	Minimum investment return. Enter 5% of line 5	6	147,441.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) prival foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	147,441.
2a	Tax on investment income for 2009 from Part VI, line 5 2a 334.		
b			
С		2c	334.
3	Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1	3	147,107.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	147,107.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	147,107.
Pa	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	Ì	
а		1a	528,722.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc,		_
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the:	_	
a	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	528,722.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	224
_	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	334.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	528,388.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating will qualifies for the section 4940(e) reduction of tax in those years.	nether the found	Iation

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For	n 990-PF`(2009)		13-60	77894	Page 9
Pa	art XIII Undistributed Income (see page	e 26 of the instruction	ons)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				147,107.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			0.	
ь	07 06 05		0.		
3	Excess distributions carryover, if any, to 2009:				
а	From 2004 246,871.				
þ	From 2005 643,775.				
C	From 2006 560, 483.				
d	From 2007 257, 854.				
е	From 2008 622,067.				
f	Total of lines 3a through e	2,331,050.			
4	Qualifying distributions for 2009 from Part XII,		ŀ		
	line 4: ▶ \$ 528,722.				
а	Applied to 2008, but not more than line 2a			0.	
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)		0.		
c	Treated as distributions out of corpus (Election	500 000	_		
	required - see page 26 of the instructions)	528,722.	ATCH 7		
đ	Applied to 2009 distributable amount				
e	3	0.			1.5 1.5
5	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same	147,107.			147,107.
6	amount must be shown in column (a), the same amount must be shown in column (a).) Enter the net total of each column as indicated below:		·		•
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,712,665.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed			,	
d	Subtract line 6c from line 6b. Taxable amount - see page 27 of the instructions	; ,	0.		, ,
е	Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see page 27 of the instructions			0.	, <u>, , , , , , , , , , , , , , , , , , </u>
f	Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be		,		
	distributed in 2010		·		<u> </u>
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the	į			
	instructions)	0.			
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	99,764.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	2,612,901.			
10	Analysis of line 9:				
	Excess from 2005 643,775.				
	Excess from 2006 560, 483.		1		
c	Excess from 2007 257, 854.	ļ	1		
đ	Excess from 2008 622, 067.			Į.	
e	Excess from 2009 528,722.				

Check here $\triangleright [X]$ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

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, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

JSA 9E1490 1 000 Part XV * Supplementary Information (continued)

3 Grants and Contributions Paid Duri	ing the Year or Appr	roved for i	Future Payment	
Recipient	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
Name and address (home or business)	or substantial contributor	recipient	COMINGGOT	
a Paid during the year				
ATTACHMENT 9				
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		t		
	İ			
Total			▶ 3a	523,835.
b Approved for future payment				
İ				
		ł		
		1		
Total	<u> </u>		▶ 3b	NONE
Total	· · · · · · · · · · · · · · · · · · ·	· · · · · · ·		Form 990-PF (2009)

er gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded by	section 512, 513, or 514	(e) Related or exempt function income
December 1	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions.)
Program service revenue:				 	the instructions.)
ab			 		
			- 		· · · · · · · · · · · · · · · · · · ·
e f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities			14	74,097.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income			18	-32,097.	
Gain or (loss) from sales of assets other than inventory	1 1		18	-62,639.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue: a					
b ROYALTY INCOME			15	19.	
c					
d					
e					
	1 1		1 1		
				-20,620.	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 ret XVI-B Relationship of Activities ne No. Explain below how each activities	to verify calculates to the Acco	tions.) omplishment of E	xempt Purpo	ses (e) of Part XVI-A cont	ributed importantly
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 art XVI-B Relationship of Activities	to verify calculates to the Acco	tions.) omplishment of E	xempt Purpo	ses (e) of Part XVI-A cont	ributed importantly
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 art XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	to verify calculates to the Acco	tions.) omplishment of E	xempt Purpo	ses (e) of Part XVI-A cont	ributed importantly
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 art XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	to verify calculates to the Acco	tions.) omplishment of E	xempt Purpo	ses (e) of Part XVI-A cont	ributed importantly
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 art XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	to verify calculates to the Acco	tions.) omplishment of E	xempt Purpo	ses (e) of Part XVI-A cont	ributed importantly
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 art XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	to verify calculates to the Acco	tions.) omplishment of E	xempt Purpo	ses (e) of Part XVI-A cont	ributed importantly
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 art XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	to verify calculates to the Acco	tions.) omplishment of E	xempt Purpo	ses (e) of Part XVI-A cont	ributed importantly
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 rt XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	to verify calculate to the Account t	itions.) complishment of E income is reporte exempt purposes (i	xempt Purpo	ses (e) of Part XVI-A cont	ributed importantly
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 art XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	to verify calculate to the Account t	itions.) complishment of E income is reporte exempt purposes (i	xempt Purpo	ses (e) of Part XVI-A cont	ributed importantly

-	990-PF					13 0077034			age i
Pa	rt XVI	Information Exempt Orga		nsfers To and Trar	nsactions	s and Relationships With	None	hari	tabl
1	์ เก se	ction 501(c) of the C	code (other than se	ection 501(c)(3) organization	tions) or in	any other organization described section 527, relating to political		Yes	No
а	<u>o</u> rgan Trans	izations? fers from the reporting t	foundation to a nonc	hantable exempt organization	n of:			ļ	
	(1) C	ash					. 1a(1)	ļ	X
	(2) 0	ther assets					. 1a(2)	ļ	X
b		transactions:					1	1	,
									X
									$\frac{1}{x}$
									$\frac{\lambda}{X}$
									X
									X
_									Х
ď						. Column (b) should always sho		fair ı	marke
						n. If the foundation received les			
	value	in any transaction o	r sharing arrangem	ent, show in column (c	l) the value	e of the goods, other assets, or	servic	es red	ceived
_			·	<u> </u>		······································			
(a)	TIUE DO	(b) Amount involved	(c) Name of nonc	haritable exempt organization		escription of transfers, transactions, and sh	anng ama	ngeme	nts
	_	N/A			N/A				
								-	
,									
				· · · · · · · · · · · · · · · · · · ·					
									
	_							_	
	_								
22	ls the	foundation directly or	undirectly affiliated	with or related to one of	or more tax	-exempt organizations described in			
24		•	•	c)(3)) or in section 527?	JI 111010 10X	roxempt organizations described in	Ye	s X	No
b		s," complete the following	-						•
		(a) Name of organization	n	(b) Type of organization)	(c) Description of relation	ship		
				- 					
		 							
1	Under/	nenalties of ARTINO 1 deci	anenthat I have∧examını	ed this return including accor	nnanving sch	edules and statements, and to the best	of my kr	owledo	le and
	peter.	it is true, correct, and com	plete Declaration of pro-	eparer (other than taxpayer or	fiduciary) is t	pased on all information of which prepare	r has an	y know	ledge.
		deat MC	liven to		1 10/2	7/10 - President	_		
و	Sign	nature of officer or trustee			Date	Title /			
Sign Here		///	0 1 1	Date	1	Preparer's	identify	ng	
<u> </u>	دي- حي-	Preparer's	-\ d \/-	H 7/1/1	√ //	Check if self-employed Inumber (S			
š	Paid eparer se Onl	signature	XMM	N-DP C	126/1	U			
- }	Paid Preparer's Use Only	Firm's name for yours f	HECHT AN			EIN ▶ 13-2891	505		
	ر ۵	self-employed), add(ess							
		and ZIP code	NEW YORK	, NY	10	0017 Phone no. 212 8	19-80	000	

Form 990-PF (2009)

FORM 990-PF - PART IV

CAPITAL GA Kind of Property Gross sale Depreciation				cription		br	Date	Date sold
		Cost or	FMV	Adj. basıs	Excess of	D	acquired Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adı basıs	\coprod	or (loss)	
		BRISTOL MYE				P	VAR	03/20/2009
500		PROPERTY TY			- 110 02220			03/20/2003
533.							533.	
		THRU COLUMB				Р	VAR	VAR
140,591.		PROPERTY TY	PE: SECURI	ries			140,591.	·
		THRU COLUMB	TNE EXMIT	LIC				173 m
		203,763.	INE FAMILI	TIC		H	VAR -203,763.	VAF
OTAL GAIN(L	oss)		• • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • •		-62,639.	
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KLINGENSTEIN FUND

NET INVESTMENT INCOME	39,699. 34,398.	74,097.
REVENUE AND EXPENSES PER BOOKS	39,699. 34,398.	74,097.
		TOTAL
DESCRIPTION	INTEREST INCOME DIVIDEND INCOME	

FORM 990PF, PART I - OTHER INCOME

INCOME: FAMILY LLC
N-UBIT MBINE
DESCRIPTION PORTFOLIO - NO THROUGH COLU ROYALTY INCOME

	NET	INVESTMENT	INCOME
REVENUE	AND	EXPENSES	PER BOOKS

-32,097. 19.	-32,078.
-32,097. 19.	-32,078.

TOTALS

PAGE 18

ATTACHMENT 3

TAXES ı FORM 990PF, PART I

KLINGENSTEIN FUND

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT INCOME

3,997.

FOREIGN TAXES PAID

DESCRIPTION

3,997.

3,997.

TOTALS

3,997.

PAGE 19

OTHER EXPENSES ı PART I FORM 990PF,

Ö ^{II}	
NET INVESTMENT INCOME 95.	95.
REVENUE AND EXPENSES PER BOOKS 250. 120.	465.
	TOTALS
DESCRIPTION NY STATE FILING FEE PUBLIC INSPECTION AD INVESTMENT ADVISORY FEES	

CHARITABLE
PURPOSES
250.
120.

370.

INVESTMENTS	
II - OTHER	
PART 1	
990PF,	
FORM	

DESCRIPTION	

PARTNERSHIP INVESTMENT: COLUMBINE FAMILY LLC

TOTALS

	ENDING	FMV
EN		
A.I.T.ACHMEN.I		
AIL	ENDING	BOOK VALUE
	END	BOOK

2,793,661.

2,743,428.

2,793,661.

2,743,428.

PAGE 20

FORM 990PF, PART VIII

ATTACHMENT 6

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES		.0	· o	Ö	0.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	·	.0	0.	0.
COMPENSATION	.0	Ö	·o	.0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	VICE PRESIDENT 1.00	TREASURER 1.00	SECRETARY 1.00	GRAND TOTALS
NAME AND ADDRESS	LEE P. KLINGENSTEIN 31 OXFORD ROAD SCARSDALE, NY 10583	PAUL H. KLINGENSTEIN 19 SEVENTH AVENUE SAN FRANCISCO, CA 94118	ALAN L. KLINGENSTEIN 924 WEST END ST., APT. 45 NEW YORK, NY 10025	JOANNE K. ZIESING 55 WELLESLEY DRIVE NEW CANAAN, CT 06840	

PAGE 21

9

FORM 990PF, PART XIII - DISTRIBUTION FROM CORPUS ELECTION

THE KLINGENSTEIN FOUNDATION HEREBY ELECTS TO TREAT \$528,722 OF THE QUALIFYING DISTRIBUTIONS OF THE FOUNDATION FOR THE YEAR ENDED DECEMBER 31, 2009 AS HAVING BEEN MADE OUT OF CORPUS IN ACCORDANCE WITH REGULATION 53.4942(A)-3(D)(2).

FOUNDATION MANAGER

DATE

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

LEE KLINGENSTEIN PAUL KLINGENSTEIN ALAN KLINGENSTEIN JOANNE ZIESING

KLINGENSTEIN FUND EIN #13-6077894 DECEMBER 31, 2009

FORM 990-PF

PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ALL CONTRIBUTIONS MADE WERE FOR UNRESTRICTED CHARITABLE PURPOSES

CASH DONATED TO THE FOLLOWING	AMOUNT
COND CEDEET VAN IA	500
92ND STREET YMHA ACKERMAN INSTITUTE FOR THE FAMILY	500
ACLU	1,000 500
AMERICAN CANCER SOCIETY	500
AMERICAN CIVIL LIBERTIES UNION	700
AMERICAN JEWISH COMMITTEE	1,250
AMERICAN RED CROSS	1,250
AMERICARES	2,500
ANTI-DEFAMATION LEAGUE	1,000
ASPCA	1,000
BALTIMORE CHESAPEAKE BAY OUTWARD BOUND	1,000
BANK STREET COLLEGE OF EDUCATION	1,000
BERKSHIRE NATURAL RESOUCES COUNCIL	200
BLYTHEDALE CHILDREN'S HOSPITAL	5,000
BRAVO VAIL VALLEY MUSIC FESTIVAL	1,500
BUFFALO SEMINARY	250
CATHEDRAL SCHOOL	5,750
CENTRAL PARK CONSERVANCY	1,000
CENTRAL SYNAGOGUE	500
CHAPEL HAVEN	1,000
CITY HARVEST	1,000
CITY MEALS ON WHEELS	250
COALITION FOR A LIVABLE WEST SIDE	250
COLUMBIA UNIVERSITY SCHOOL OF LAW	250
COMMON CAUSE	500
CONGREGATION EMANU-EL OF WESTCHESTER	3,179
CORNELL JGSM	100
CORNELL LAW - PUBLIC INTEREST LAW	100
CORNELL LAW SCHOOL	4,100
DAMON RUNYON CANCER RESEARCH FUND	1,926
EAGLE VALLEY LAND TRUST	100
ELEPHANT VOICES	100
ELIZABETH MASCIA CHILD CARE CENTER	150
ELMWOOD FRANKLIN SCHOOL	100
EXPEDITIONARY LEARNING SCHOOLS	317,500
FACING HISTORY AND OURSELVES	100
FANNIE AND JOHN HERTZ FOUNDATION	10,000
FOOD BANK FOR NYC	500
FRESH AIR FUND	500
FRIENDS OF LAKE GARFIELD	500
GOUCHER COLLEGE	500
GRAND STREET SETTLEMENT	1,625

. . .

KLINGENSTEIN FUND EIN #13-6077894 DECEMBER 31, 2009

FORM 990-PF

PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ALL CONTRIBUTIONS MADE WERE FOR UNRESTRICTED CHARITABLE PURPOSES

CASH DONATED TO THE FOLLOWING	AMOUNT
HAVERFORD SCHOOL	1,000
HEIFER PROJECT INTERNATIONAL	250
HORIZONS STUDENT ENRICHMENT PROGRAM	5,600
HOSPITAL FOR SPECIAL SURGERY	1,000
IDEAL SCHOOL OF MANHATTAN	100
JOHNS HOPKINS HOSPITAL	100
LEAGUE OF WOMEN VOTERS	300
LONG HOUSE	250
LWV NYS EDUCATION FUND	150
MAKE-A-WISH FOUNDATION	200
MANHATTAN INSTITUTE	1,000
MEALS ON WHEELS	500
MERCY CORPS	1,000
MONTEREY FIRE COMPANY	130
MONTEREY NEWS	100
MT. SINAI HOSPITAL	200
NARAL PRO-CHOICE AMERICA	500
NATIONAL BOARD OF REVIEW	1,200
NATIONAL PUBLIC RADIO FOUNDATION	1,000
NATURE CONSERVANCY	200
NEUBERGER/MUSEUM OF ART	1,000
NEW ORLEANS AREA HABITAT FOR HUMANITY	250
NEW YORK CARES	20
NEW YORK HISTORICAL SOCIETY	2,000
NEW YORK PHILHARMONIC	6,500
NORTH CAROLINA OUTWARD BOUND SCHOOL	1,000
NY PARKS & CONSERVATION ASSOC	250
NY TIMES NEEDIEST CASES FUND	1,000
NYC OUTWARD BOUND CENTER ORB'S INTERNATIONAL	1,000
OUTWARD BOUND	100
PHILADELPHIA OUTWARD BOUND CENTER	6,000 1,000
PLANNED PARENTHOOD	1,000
PMC - THE JIMMY FUND	1,230
POLICE ATHLETIC LEAGUE	250
PRINCETON UNIVERSITY	20,375
RED CROSS	250
RIVERSIDE PARK FUND	1,000
ROSEWELL PARK CANCER INSTITUTE	100
SCAN NY	500
SCARSDALE POLICE BENEVOLENT ASSOC	100
SCARSDALE VOLUNTEER AMBULANCE CORP	100

KLINGENSTEIN FUND EIN #13-6077894 DECEMBER 31, 2009

FORM 990-PF

PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ALL CONTRIBUTIONS MADE WERE FOR UNRESTRICTED CHARITABLE PURPOSES

CASH DONATED TO THE FOLLOWING	AMOUNT
SEARCH FOR COMMON GROUND	100
SIERRA CLUB	500
SOUTHERN POVERTY LAW CENTER	100
ST JUDE CHILDREN'S RESEARCH HOSPITAL	250
SUMMER SEARCH NYC	6,000
TAFT SCHOOL	26,000
TAFT SCHOOL ANNUAL FUND	500
TAFT SCHOOL ALUMNI FUND	4,000
THE ACTORS FUND	350
THE ALLAN ROSENFIELD SCHOLARS FUND	100
THE DOE FUND	250
THE HERTZBERG PALLIATIVE CARE INSTITUTE	100
THE LARK PLAY DEVELOPMENT CENTER	1,000
THE METROPOLITAN MUSEUM OF ART	500
THE SUMMER CAMP	100
THIRTEN/WNET	100
THOMPSON ISLAND OUTWARD BOUND	1,000
THOMPSON ISLAND O/B EDUCATION CENTER	1,000
TRANSPORTATION ALTERNATIVES	1,000
TREATMENT ACTION GROUP	500
U C BERKELEY FOUNDATION	350
UJA - FEDERATION OF NY	10,000
UNIFORMED FIREFIGHTERS ASSOC	100
UNITED NEGRO COLLEGE FUND	100
UNITED WAY OF SCARSDALE EDGEMONT US ENGLISH FOUNDATION	1,500
USO	200
	700
VAIL VALLEY INSTITUTE VAIL VALLEY MEDICAL CTR FOUNDATION	5,000
VISTING NURSE SERVICE OF NEW YORK	250
VOLUNTEERS OF AMERICA	650 500
WESTCHESTER COALITION FOR LEGAL ABORTION	500 50
WESTCHESTER COMMUNITY COLLEGE	550 550
WHITE PLAINS HOSPITAL MEDICAL CENTER	
WNYC RADIO	10,700 20,580
WORLD WIDLIFE FUND	20,560 100
YALE LAW SCHOOL	500
	550
TOTAL CASH CONTRIBUTED	523,835

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Internal Revenue S		► File a separate application for each return.	l		
	If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box				
• If you are f	filing for a	n Additional (Not Automatic) 3-Month Extension, complete only Part II (on paginless you have already been granted an automatic 3-month extension on a previous			
Part I Auto	matic 3	Month Extension of Time. Only submit original (no copies needed).			
		to file Form 990-T and requesting an automatic 6-month extension - check this b	ox and co	mplete	
Part I only	•	, ,		▶ □	
All other corn	orations	(including 1120-C filers), partnerships, REMICs, and trusts must use Form 70	104 to re	aquest an extension o	
time to file inco			707 10 70	iquosi air exterisioir oi	
one of the re- electronically in returns, or a co	turns not if (1) you composite	Generally, you can electronically file Form 8868 if you want a 3-month autoed below (6 months for a corporation required to file Form 990-T). However, want the additional (not automatic) 3-month extension or (2) you file Forms or consolidated From 990-T. Instead, you must submit the fully completed and on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Constant.	er, you c 990-BL, (signed p	annot file Form 8868 6069, or 8870, group age 2 (Part II) of Form	
Type or	Name of	Exempt Organization	Employe	r Identification number	
print	KL	INGENSTEIN FUND	13-0	6077894	
File by the	Number	street, and room or suite no. If a P.O. box, see instructions. C/O. LEE P. KLING	GENSTE:	IN	
due date for	31	OXFORD ROAD			
filing your return See	1	n or post office, state, and ZIP code. For a foreign address, see instructions.			
instructions		ARSDALE, NY 10583			
Form 990 Form 990 X Form 990	0)-BL)-EZ)-PF	Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) Form 1041-A Form	m 4720 m 5227 m 6069 m 8870		
		care of ► LEE P. KLINGENSTEIN 212 476-9000 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 					
	•	eck this box · ▶ ☐ . If it is for part of the group, check this box · · ▶ ☐ and nembers the extension will cover.	d attach	a list with the	
unu		utomatic 3-month (6 months for a corporation required to file Form $\frac{08/15}{0.000}$, to file the exempt organization return for the organization n's return for	named a	extension of time bove. The extension is	
► X ►		year 2009 or beginning, and ending		·	
2 If this tax	year is fo	or less than 12 months, check reason Initial return Final return	Change	in accounting period	
•	•	is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, led	ess any	3a \$ 300	
		s for Form 990-PF or 990-T, enter any refundable credits and estimated tax pa	vments	3a 4 300	
	-	prior year overpayment allowed as a credit	,	3b \$ 2500	
		tract line 3b from line 3a Include your payment with this form, or, if required,	deposit		
with FT	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See				
instructio				3c \$ NONE	
Caution. If you for payment in:	-	to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO	and Form	1 8879-EO	
		neguesk Paduction Act Notice and Instructions		Form 8868 (Pay 4-2000)	

•				
Form 8868 (Rev 4-2009)	Page 2			
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box				
Note. Only complete Part II if you have already been granted an automatic 3-month ex				
if you are filing for an Automatic 3-Month Extension, complete only Part I (on page				
Part II Additional (Not Automatic) 3-Month Extension of Time. Only	· · · · · · · · · · · · · · · · · · ·			
Name of Exempt Organization Type or VI INCENIONE IN EVIND	Employer Identification number			
print KLINGENSIEIN FUND	13-6077894			
Number, street, and room or suite no. If a P O box, see instructions.	For IRS use only			
c/O LEE P. KLINGENSTEIN 31 Oxford CAD				
filing the City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
Instructions SCARSDALE, NY 10583	是是 这种的 的是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个			
Check type of return to be filed (File a separate application for each return):				
Form 990 X Form 990-PF	Form 1041-A Form 6069			
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust)	Form 4720 Form 8870			
Form 990-EZ Form 990-T (trust other than above)	Form 5227			
STOPI Do not complete Part II if you were not already granted an automatic 3-more	nth extension on a previously filed Form 8868.			
The books are in the care of LEE P. KLINGENSTEIN				
Telephone No. ▶ 212 476-9000 FAX No. ▶				
If the organization does not have an office or place of business in the United States, of				
If this is for a Group Return, enter the organization's four digit Group Exemption Numb	· · · · · · · · · · · · · · · · · · ·			
for the whole group, check this box > If it is for part of the group, check this	s box ▶ [] and attach a			
list with the names and EINs of all members the extension is for 1 I request an additional 3-month extension of time until 11/15/2010				
For calendar year 2009, or other tax year beginning	_ and ending			
ALL TUROPHARTON MEGRACIA	Final return Change in accounting period			
7 State in detail why you need the extension ALL INFORMATION NECESSAR AND ACCURATE RETURN IS NOT YET AVAILABLE.	TO TIBE A CONTINUE			
AND ACCORAGE RESORT TO NOT THE AVAILABLE.				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the	tentative tay less any			
nonrefundable credits. See instructions	8a \$ 300			
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 \$ 100			
c Balance Due. Subtract line 8b from line 8a Include your payment with this form,				
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S	/ 1/ A			
Signature and Verification				
Under penalties of perjury, I declare that I have pamined 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 >	1 Date ► 1/W/(/			
The Partition	Form 8868 (Rev 4-2009)			
HECHT AND COMBANY, P.C.				
622 THIRD AVENUE				

NEW YORK, NY 10017