

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

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

2009

OMB No 1545-0052

For	cater	idar year 2009, or tax year beginnir	ig .		_	, and e	ending					
G	G Check all that apply Initial return Amended return			Initial return of a fo	•	charity		ınal returi	n			
_			return		Address change			Name change				
	e the							A Employer ide	ntificatio	n number		
	label	CARTAN TRACTER	ד <i>וווו</i> ם איז	ידטאז	TPIICT.			13-725	8430)		
Ull	herwi print						Room/suite	 				
O	r type							B Telephone number 212-223-6300				
	Spe	E DIVINOUD DI			<u></u>		I	1		pending, check here		
inst	tructio	GREENWICH, CT	06831					D 1. Foreign org		-		
H (Check			xempt n	rivate foundation			2. Foreign organ	izations m	eeting the 85% test, omputation		
	_	ction 4947(a)(1) nonexempt charitat			axable private founda	ation		i			. —	
I F	_	arket value of all assets at end of year	1			Acc	rual	under section	oation sta 507(b)(1	atus was terminated)(A), check here		
(f	rom l	Part II, col. (c), line 16)		ther (sp					, .,	60-month terminate	IOD	
	\$	48,974		ımn (d)	must be on cash l	basis.))(B), check here		
P	art l	Analysis of Revenue and Expense (The total of amounts in columns (b), (c), necessanty equal the amounts in column	S and (d) may not (a))		a) Revenue and penses per books		nvestment ome	(c) Adjusted Income		(d) Disbursement for chantable pur (cash basis or	rposes	
	1	Contributions, gifts, grants, etc., rec			60,000.			N/A		1		
	2	Check X If the foundation is not require										
	3	Interest on savings and temporary cash investments		<u> </u>	168.		168.		., .	STATEMEN	<u>T 1</u>	
Revenue	4	Dividends and interest from securiti	es									
	5a	Gross rents										
	b	Net rental income or (loss)								TENER I	<u> </u>	
	6a	Net gain or (loss) from sale of assets not o	n line 10				•••••			KELEIAEI	4.3	
	b	Gross sales price for all assets on line 6a			,						8	
	7	Capital gain net income (from Part IV, line	2)			,	0.		246	OCT 0 1 201		
ш	8	Net short-term capital gain			,,	1,4,'	1		(7)		Y.	
	9	Income modifications Gross sales less returns		ļ						TOPIEN !	17	
	10a	and allowances					+ +	<u> </u>	<u> </u>	JGUEN, L	<i>3</i> {	
	1	Less Cost of goods sold								ļ		
	1	Gross profit or (loss)								 		
	11	Other income		<u> </u>	60 160		168.	 				
	12	Total. Add lines 1 through 11		 	60,168.		0.			<u> </u>	0.	
	13	Compensation of officers, directors, truste	es, etc		0.	-	<u> </u>					
	15	Other employee salaries and wages Pension plans, employee benefits								 		
es	1	Legal fees										
enses	1	Accounting fees										
Exp	ן ר	Other professional fees								+		
è E	17	Interest										
Operating and Administrative	18	***********	TMT 2		22.		0.				0.	
istr	19	Depreciation and depletion	-							-		
Ë	20	Occupancy										
Ad	21	Travel, conferences, and meetings										
Pue	22	Printing and publications										
ĝ	23	Other expenses										
ratii	24	Total operating and administrative										
be.		expenses. Add lines 13 through 23			22.		0.				0.	
O	25	Contributions, gifts, grants paid			32,750.					32,	750.	
	26	Total expenses and disbursements						ļ				
		Add lines 24 and 25		ļ	32,772.		0.			32,	<u>750.</u>	
	27	Subtract line 26 from line 12			0.5.00.0							
	1	Excess of revenue over expenses and disb		<u> </u>	27,396.					ļ.,,		
	· •	Net investment income (if negative, er		ļ		·-··	168.			<u></u>		
92:#	01	Adjusted net income (if negative, enter		<u> </u>				N/A		1 255 ==		
9236 02 0	2-10	LHA For Privacy Act and Paperw	ork Reduction	Act Not	lice, see the instruct	ions.				Form 990-PF	- (2009)	

Page 2

) art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
	an	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	21,370.	48,766.	48,766.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		•	
		disqualified persons			
	7	Other notes and loans receivable			······································
		Less allowance for doubtful accounts	1		
s	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	1	Investments - U S and state government obligations			
	1	Investments - corporate stock STMT 3	468.	468.	208.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	''	Less, accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
	' -	Less. accumulated depreciation		1	
	15	Other assets (describe			
	'3	Other assets (describe			
	1.5	Total access /to be completed by all filers)	21,838.	49,234.	48,974.
_		Total assets (to be completed by all filers) Accounts payable and accrued expenses	21,030.	47,234.	40,574.
	1				
	18	Grants payable			
Liabilities	19	Deferred revenue			,
Ε	20	Loans from officers, directors, trustees, and other disqualified persons			
Ę.	21	Mortgages and other notes payable			
	22	Other liabilities (describe			
		Tabel Meditalise / add horse 47 March 1990		_	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
S	١	and complete lines 24 through 26 and lines 30 and 31.			
Net Assets or Fund Balances	1	Unrestricted			
ala	25	Temporarily restricted			
о О	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
P.		and complete lines 27 through 31.		_	
ţş	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	21,838.	49,234.	
ž	30	Total net assets or fund balances	21,838.	49,234.	
	31	Total fiabilities and net assets/fund balances	21,838.	49,234.	·
P	art	Analysis of Changes in Net Assets or Fund B	alances		
				- · · · · · · · · · · · · · · ·	
		net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	21,838. 27,396.
		amount from Part I, line 27a		2	27,396.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	49,234.
5	Decre	ases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	49,234.
				-	Form 000 PE (2000)

Page 3

(a) List and describe the	Losses for Tax on In ne kind(s) of property sold (e g use, or common stock, 200 shs	, real estate,	t income	` F	' - Purc		(c) Date ac	quired	(d) Date sold (mo , day, yr)
1a				╁╌) - Don	ation			
b NONE			-	+					
C				Ť					
d									
е									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(ħ) Gair (e) plus (n or (loss) f) minus (
a									
b		-							
C					-				
<u>d</u>					-				
Complete only for assets showing gai	n in column (h) and owned by t	ha foundatio	n on 12/31/60) Coupe (Col	(h) gain	minue
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) as of 12/31/69 over col (j), if any) Gains (Col (k), but not Losses (fr	t less thar	1 -0-) or			
a			(),						
b									· · -
C									
d									
e		-			İ				
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 2									
3 Net short-term capital gain or (loss) as	•								
If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8									
	r Section 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome		
If section 4940(d)(2) applies, leave this pa Was the foundation liable for the section 4 If "Yes," the foundation does not qualify un 1 Enter the appropriate amount in each of	942 tax on the distributable amoder section 4940(e). Do not cor	mplete this pa	art						Yes X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying dist	(b) Adjusted qualifying distributions		(c) incha		use assets	(cc	Distrib	(d) ution ratio ded by col (c))
2008		3,978.				9,221			.893480
2007		3,965.				0,060			.913003
2006		5,500.				8,588			.451723
2005		0,787.				6,994			.655126
2004	14	4,263.			2	3,987	<u>•</u>		.594614
2 Total of line 1, column (d)							2		3.507946
3 Average distribution ratio for the 5-year the foundation has been in existence if		n line 2 by 5,	or by the number	or ye	ars		3		.701589
4 Enter the net value of noncharitable-use	assets for 2009 from Part X, II	ne 5					4	 	205.
5 Multiply line 4 by line 3							5		144.
6 Enter 1% of net investment income (1%	of Part I, line 27b)						6		2.
7 Add lines 5 and 6							7		146.
8 Enter qualifying distributions from Part							8	 -	32,750.
If line 8 is equal to or greater than line 7 See the Part VI instructions	, check the box in Part VI, line 1	1b, and comp	elete that part usin	g a 1'	% tax r	ate			

ron	1 990-PF (2009) CAPLAN FAMILY FOUNDATION TRUST		<u>-7258</u>			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see	instru	uctio	ns)
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 letter if necessary-see instructions)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔀 and enter 1%	1				2.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<u> </u>			0.
3	Add lines 1 and 2	3	<u> </u>			2.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				2.
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
b	Exempt foreign organizations - tax withheld at source 6b	7				
	Tax paid with application for extension of time to file (Form 8868) 6c	7				
	Backup withholding erroneously withheld 6d	7				
	Total credits and payments Add lines 6a through 6d	7	1			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	İ			2.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶	11			-	
	rt 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 participate or intervel	ne in		T	Yes	No
	any political campaign?			1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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 publish					1
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ▶ \$ 0 • (2) On foundation managers ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-				
	managers ► \$ 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 incorporation	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
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					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	te law		1		
	remain in the governing instrument?			6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	Х	
	If "Yes," complete Part II, col. (c), and Part XV				,,	
	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE					
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	
	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		Х
	Did any nersons become substantial contributors during the tay year? If type that a schedule lighter their pages and addresses			10		X

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,

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

Form 4720, to determine if the foundation had excess business holdings in 2009)

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 990-PF (2009)

X

X

3b

4a

Yes X No

N/A

during the year?

Form 990-PF (2009) CAPLAN FAMILY FOUNDATION			13-7258	<u>430</u>	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to			į		1
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es 🗓 No 📙		
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indir				
any voter registration drive?		Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	s?	Y ₁	es 🗓 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y ₁	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or	for	1		
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	nder the exceptions described	ın Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	nned			
expenditure responsibility for the grant?	Ŋ	1/A 🔲 Ye	es 🔲 No 📗		
If "Yes," attach the statement required by Regulations section 53.494	15-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		. TY	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		Į.	6b	X
If "Yes" to 6b, file Form 8870.			[
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	es X No		
b If yes, did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, Foundation Ma	anagers, Highly	У		
1 List all officers, directors, trustees, foundation managers and their	· componentian				
List difference is, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	10) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acc	ount, other
GORDON CAPLAN	to position PRESIDENT	enter -0-)	compensation	aı	llowances
20 BRYNWOOD LANE	FKESIDENI			1	
GREENWICH, CT 06831	0.00	0.	0.		0.
AMY CAPLAN	VICE PRESIDEN		<u> </u>	:	
20 BRYNWOOD LANE	TIOD TREBUBER	`			
GREENWICH, CT 06831	0.00	0.	0.	_	0.
				'	
	1				
				1	
	1		•	1	
	1				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."	·		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(a) Company	(d) Contributions to employee benefit plans	(e)	Expense ount, other
(b) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred compensation		lowances
NONE					
				<u>L</u>	
			··· = - =		
				ļ	
				<u> </u>	
T	<u> </u>		<u>:</u>		
Total number of other employees paid over \$50,000			>		0

Form 990-PF (2009) CAPLAN FAMILY FOUNDATION TRUST	13-7258	430 Page 7
Part VIII . Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	ce	(c) Compensation
NONE		
	<u> </u>	
	ĺ	
	ĺ	
Total number of others receiving over \$50,000 for professional services		(
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2	=	
3		
	_	
4		

Part IX-B | Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

N/A

All other program-related investments See instructions

Total. Add lines 1 through 3

Form **990-PF** (2009)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	n foundations, see	instructions.)
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	208.
	Average of monthly cash balances	1b	
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	208.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	208.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	205.
6	Minimum investment return. Enter 5% of line 5	6	10.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation foreign organizations check here and do not complete this part.)	ons and certain	
1	Minimum investment return from Part X, line 6	1	10.
2a	Tax on investment income for 2009 from Part VI, line 5	2.	
b	Income tax for 2009 (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	2c	2.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	8.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	8.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	32,750. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	32,750.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	,	
	income Enter 1% of Part I, line 27b	5	2.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	32,748.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	ation qualifies for the	section

Form **990-PF** (2009)

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				8.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years			, , , , , , , , , , , , , , , , , ,	
		0.	, ,	
3 Excess distributions carryover, if any, to 2009				1000
a From 2004 13,088.				
b From 2005 28,523.				
c From 2006 31,680.				
d From 2007 60,532.				
e From 2008 41,561.				
f Total of lines 3a through e	175,384.		***************************************	
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 32,750.			_	
a Applied to 2008, but not more than line 2a	- Androities		0.	· · · · · · · · · · · · · · · · · · ·
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		nn i dalamahin a
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				8.
e Remaining amount distributed out of corpus	32,742.		 	
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	208,126.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must	`			_
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	10.000			
not applied on line 5 or line 7	13,088.			
9 Excess distributions carryover to 2010.	105 000			
Subtract lines 7 and 8 from line 6a	195,038.			
O Analysis of line 9				
a Excess from 2005 28,523.				
b Excess from 2006 31,680.				
c Excess from 2007 60,532.				
d Excess from 2008 41,561.				
e Excess from 2009 32,742.				

		DATION TRUS			258430 Pa
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	•	• •	. ▶ ∟		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 0000	Prior 3 years	(4) 0000	
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed	·				
b 85% of line 2a				<u> </u>	
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				_	•
e 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				-	+
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter				1	1
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			ĺ		İ
(4) Gross investment income					
Part XV Supplementary Infor	mation (Comple	to this part only	if the foundation	had \$5,000 or m	oro in accets
at any time during the	mation (Comple se vear-see the i	netructions)	ii the foundation	i nau \$5,000 or m	ore in assets
		ilati dottoria.j			
Information Regarding Foundation	_	h 00/ -44h - 4-4-14			
a List any managers of the foundation who year (but only if they have contributed me	nave contributed more to are than \$5,000). (See se	nan 2% of the total cont ection 507(d)(2))	ributions received by the	toundation before the cit	ose of any tax
ONE		, on on (0)(2) /			
b List any managers of the foundation who	own 10% or more of the	a stock of a porporation (or an equally lorge ports	on of the ownership of a	
other entity) of which the foundation has	a 10% or greater interes	e stock of a corporation (t	or an equally large porti	on of the ownership of a p	armership or
ONE					
Information Regarding Contribution	on Cront Citt Loon	Cabalasahin ata Da			
Check here ► X If the foundation on				set accept upoplicated roo	wasta far funda 16
the foundation makes gifts, grants, etc. (s	ee instructions) to indivi	duals or organizations ii	organizations and does i	not accept unsolicited requirements	desis ior ionos ii
a The name, address, and telephone numb				5111ploto Romo 24, 0, 0, 411	
a The name, address, and telephone numb	er of the person to whom	rapplications should be	addressed		
b The form in which applications should be	submitted and informati	on and materials they sh	ould include		
c Any submission deadlines					
					

3 Grants and Contributions Paid During the Yo		e Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
CORNELL UNIVERSITY	NOT RELATED	PUBLIC	GENERAL PURPOSE	
FORDHAM UNIVERSITY SCHOLL OF LAW	NOT RELATED	PUBLIC	GENERAL PURPOSE	
GREENWICH ACADEMY 200 NORTH MAPLE AVE GREENWICH, CT 06830	NOT RELATED	PUBLIC	GENERAL PURPOSE	
GREENWICH COUNTRY DAY OLD CHURCH ROAD GREENWICH, CT 06830	NOT RELATED	PUBLIC	GENERAL PURPOSE	30,000
ALZHEIMER FOUNDATION 322 8TH AVENUE NEW YORK, NY 10001	NOT RELATED	PUBLIC	GENERAL PURPOSE	250
ROUND HILL NURSERY SCHOOL 166 ROUND HILL ROAD GREENWICH, CT 06831	NOT RELATED	PUBLIC	GENERAL PURPOSE	2,500
Total			> 3a	32,750
b Approved for future payment				
NONE				
NONE				

Fórm 990-PF (2009) CAPLAN FAMILY	FOUNDATIO	ON TRUST		13-7	258430 Page 12
Part XVI-A Analysis of Income-Produ	ıcing Activitie	es			
Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income	Exclud	ed by section 512, 513, or 514	(e)
• • • • • • • • • • • • • • • • • • • •	(a)	(b)	Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion code	Amount	function income
a			1 - 1		
b			1		•
c) I		1 1		
d					
e	t I				
1			- -		
g Fees and contracts from government agencies	·	· . · · · · · · · · · · · · · · · · · ·	- -		 _
2 Membership dues and assessments			- -		
3 Interest on savings and temporary cash			 		
Investments			14	168.	
4 Dividends and interest from securities	 		 	100.	
5 Net rental income or (loss) from real estate	 		 -		
a Debt-financed property			1		
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 9 Net income or (loss) from special events			+ +		
10 Gross profit or (loss) from sales of inventory			++		
11 Other revenue	+		++		
a			+ +		
D		· ·	+ +		
4			- -		
d			+		
12 Cubtotal Add columns (b) (d) and (a)	+	0.	 -	168.	0.
12 Subtotal Add columns (b), (d), and (e)			<u> </u>		1.60
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)				13	
				D	
Part XVI-B Relationship of Activities	to the Accom	iplishment of E	xempt	Purposes	
Line No Explain below how each activity for which inco			A contribu	ted importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other than	by providing funds	for such purposes)			
					
			·		
					
	····			···-	
					
					
					···
		- .			

Fo	<u>im 990-</u>	PF (2009) CAPLA	AN FAMILY FOUND	DATION TRUST	13-725	58430	Pa	ige 13
F	art X			o and Transactions a	ind Relationships With Nonch	aritable	9	
		Exempt Organ	nizations					
1	Did t	he organization directly or ind	rectly engage in any of the follo	wing with any other organizatio	on described in section 501(c) of		Yes	No
	the C	Code (other than section 501(c	c)(3) organizations) or in section	527, relating to political organ	izations?			
			lation to a noncharitable exempt					
		Cash				1a(1)		Х
	(2)	Other assets				1a(2)		Х
	b Othe	r transactions				1		
	(1)	Sales of assets to a noncharita	able exempt organization			1b(1)	Ì	Х
			oncharitable exempt organization	1		1b(2)		Х
		Rental of facilities, equipment,	· -			1b(3)		Х
	(4)	Reimbursement arrangements	.			16(4)		Х
		Loans or loan guarantees				1b(5)		Х
		-	embership or fundraising solicita	ations		1b(6)		Х
			ailing lists, other assets, or paid			16		Х
					vays show the fair market value of the goods		ets.	
					e in any transaction or sharing arrangement,		,	
			other assets, or services receive		,	,		
(a)	Line no	(b) Amount involved	(c) Name of noncharita	ible exempt organization	(d) Description of transfers, transactions, an	d shanng an	rangeme	nts
	-		N/A	7				
				·				
					,			
	_							
28	ls the	foundation directly or indirec	tly affiliated with, or related to, o	ne or more tax-exempt organiz	ations described			
			r than section 501(c)(3)) or in se		[Yes	X] No
_t		s," complete the following sch						-
_		(a) Name of org	janization	(b) Type of organization	(c) Description of relation	ship		
_		N/A						
					5/11/5-2- · · · · · · · · · · · · · · · · · ·			
	Under p	enalties of perjury I declare that I h	ave examined this return, including ac	companying schedules and stateme	ents, and to the best of my knowledge and belief, it is	s true, correc	ct,	
	ano con	npieter Decraration of preparer (othe	er than taxpayer or fiduciary) is based	on all information of which preparer f	has any knowledge	. /\.	- 1	
اء	\ _			19/27/10	1 CUSTER 14 CU	uol	at	
ē	81	gnature of officer or trustee		Date	Title			
Sign Here	un -	Preparer's		Da		rer's identify	ing num	ber
Sig	aid arer's Only		SHUFRIN	9	1/24/10 self- employed ► □ Po	300 2	85	32
	Paid Preparer' Use Only		RIN & ASSOCIAT	ES LLC	EIN ►			
	Pre Us		PARK AVENUE					
		address, and ZIP code NEW	YORK NY 10022		Phone no 212-	-223-6	630)

212-223-6300 Form **990-PF** (2009)

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CA	SH I	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
JP MORGAN					1	68.
TOTAL TO FORM 990-PF, PART I	168.					
FORM 990-PF		STATEMENT 2				
DESCRIPTION	(A) EXPENSES PER BOOKS		ST-		CHARITA	
INTERNAL REVENUE	22.		0.		·····	0.
TO FORM 990-PF, PG 1, LN 18	22.		0.			0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	3
DESCRIPTION			во	OK VALUE	FAIR MARKE VALUE	Т
STOCKS				468.	2	08.
TOTAL TO FORM 990-PF, PART II	t, LINE 10B			468.	2	08.

(Rev. 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

If you are	e filing for an Automatic 3-Month Extension, complete only Part I and check this bo e filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II explete Part II unless you have already been granted an automatic 3-month extension on a	(on page 2	of this form).
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies need	eded).	
A corporat Part I only	on required to file Form 990-T and requesting an automatic 6-month extension—check	k this box	and complete
All other co	orporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form income tax returns.	7004 to re	quest an extension of
one of the electronical returns, or a	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au returns noted below (6 months for a corporation required to file Form 990-T). However, if (1) you want the additional (not automatic) 3-month extension or (2) you file Form a composite or consolidated Form 990-T. Instead, you must submit the fully completed an nore details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file:	ever, you cass s 990-BL, and signed p	annot file Form 8868 6069, or 8870, group age 2 (Part II) of Form
Type or print	Name of Exempt Organization	Employer	identification number
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions.		
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
Check type Form 99 Form 99 Form 99 Form 99	90-BL	0	Form 4720 Form 5227 Form 6069 Form 8870
• The book	s are in the care of ▶		
If the orgaIf this is for the who	FAX No. ► () anization 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). le group, check this box ► □ . If it is for part of the group, check this box	box .	▶ □
1 I requuntil for the	riest an automatic 3-month (6 months for a corporation required to file For	named abo	ove. The extension is
	tax year beginning, 20, and ending		
			The accounting period
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax by nonrefundable credits. See instructions.	·	\$
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated ta nts made. Include any prior year overpayment allowed as a credit.	х	
c Balano deposi	⇒ Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required the with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymer n). See instructions.	1,	
	you are going to make an electronic fund withdrawal with this Form 8868, see Form 84 instructions.		

Form 8868 (Re		onal (Not Automatic) 3	-Month Extension	complete	only Part II	and chack this	Page 2
Note. Only o	complete Part II if yo	ou have already been gran natic 3-Month Extension	nted an automatic	-month exter	nsion on a pre		
Part II	Additional (Not	Automatic) 3-Month	Extension of Ti	ne. Only file	e the origina	l (no copies n	eeded).
Type or				Employer identification number			
print	CAPLAN FAMI	LY FOUNDATION				13	7258430
File by the extended due date for	Number, street, ar 20 BRYNWOOI	nd room or suite no. If a P.O DLN	O. box, see instructi	ons.		For IRS use on	ly
filing the return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. GREENWICH, CT 06831						
Check type	of return to be fi	led (File a separate appl	ication for each re	turn):		<u> </u>	<u> </u>
☐ Form 99		Form 990-PF		·	orm 1041-A	☐ Fo	rm 6069
☐ Form 99	0-BL 🗍	Form 990-T (sec. 401(a	a) or 408(a) trust)		orm 4720	=	m 8870
☐ Form 99		Form 990-T (trust othe		= '	orm 5227		0070
STOP! Do no		if you were not already				n a previously	filed Form 8868.
		>					11.02 1 01.11 00001
•						hav	▶ □
		nave an office or place o					—
		enter the organization's s box ▶ 🔲 . If					
		f all members the extens		e group, cir	CK UIIS DOX.	• 🗀 aı	no allach a
							
		month extension of time					
		or other tax year beginni					
		than 12 months, check					
7 State in	n detail why you no	eed the extension					
8a If this a	application is for F	orm 990-BL, 990-PF, 99	90-T, 4720, or 60	69, enter the	tentative tax	ζ,	
less an	y nonrefundable ci	edits. See instructions.				8a \$_	
b If this a	pplication is for Fe	orm 990-PF, 990-T, 472	0, or 6069, enter	any refundal	le credits an	d	
estimat	estimated tax payments made. Include any prior year overpayment allowed as a credit and any				y		
amount	paid previously w	ith Form 8868.				8b \$	
		Bb from line 8a. Include yo					
			ature and Verifi				
		t I have examined this form, in at I am authorized to prepare the	cluding accompanying		statements, and t	to the best of my k	nowledge and belief,
		-		•			
			,			-	
•		_		0 01			dolin
Signature		1/2	Title ►	CAM		Date ►	8/13/10
Signatur 9			· · · · · · · · · · · · · · · · · · ·		•	For	m 8868 (Rev 4-200