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OMB No 1545-0052

2009

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

For	cale	ndar year 2009, or tax year beginning 0)1-01-2009 , ar	ıd en	ding 12-31-	-2009	
G	Che		al return of a former pul		•	al return	
_		A mended return Address	change Nan	ne cha		dentification numb	er
Us	e the I	THE WALSH FAMILY FOUNDATION			14-6230947		
Ot	label. herwi:	se,				umber (see page 10	of the instructions)
	print	Number and street (or P O box number if mail is not del 3859 PEMBROOKE LANE	· 1	oom/ ute	· ·	, , ,	or the instructions,
	or type e Spec	:. 			(607) 729-067	0	
	t ruct ic	City or town, state, and ZIP code	<u> </u>		C If exemption	n application is pendir	ig, check here 🕨 🦵
		VESTAL, NY 13850			D 1. Foreign o	organizations, check h	ere 🕨 🔽
_		ype of organization				organizations meeting are and attach comput	
		14947(a)(1) nonexempt charitable trust				oundation status was	
		(set value of all assets at end		crual		on 507(b)(1)(A), chec	
			') nust be on cash basıs.)			lation is in a 60-mont	. —
Pa	rt I	Analysis of Revenue and Expenses (Th		Τ	under section	on 507(b)(1)(B), ched	(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))	expenses per	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	47,92	5			
	2	Check ► ┌─ if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investmen	ts 1	5			
Φ	4	Dividends and interest from securities	3,09	7			
	5a	Gross rents					
	ь	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10					
를	ь	Gross sales price for all assets on line 6a	_				
Revenue	7	Capital gain net income (from Part IV, line 2)	•		0		
~	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	Ь	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	. 51,03	<u> </u>	0		
	13	Compensation of officers, directors, trustees, etc					
å	14	Other employee salaries and wages					
Š L	15	Pension plans, employee benefits		+			
Expenses	16a	Legal fees (attach schedule)		2			
	b	Other professional fees (attach schedule)					
Ě	17	Interest					
tra 1	18	Taxes (attach schedule) (see page 14 of the instructions)	28	6			
Administrative	19	Depreciation (attach schedule) and depletion					
튜	20	Occupancy					
4	21	Travel, conferences, and meetings					
and	22	Printing and publications		+			
Ę	23	Other expenses (attach schedule)		1			
ati	24	Total operating and administrative expenses.					
Operating		Add lines 13 through 23	. 38	8	0		0
ō	25	Contributions, gifts, grants paid					0
	26	Total expenses and disbursements. Add lines 24 and 25	11,48	8	0		0
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursement	s 39,54	Э			
	ь	Net investment income (If negative, enter -0-)			0		
	c c	Adjusted net income (If negative, enter -0-)					

Cat No 11289X

Pa	rt II	Balance Sheets should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book		(c) Fair Market Value
	1	Cash—non-interest-bearing	9,499	(-)	1,297	+ ` <i>'</i> — — — —
	2	Savings and temporary cash investments	6,943		6,772	6,772
	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 (attach schedule) (see page 15 of the				
		instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts				
sets	8	Inventories for sale or use				
ŭ,	9	Prepaid expenses and deferred charges				
⋖	_	Investments—U S and state government obligations (attach schedule)				
		Investments—corporate stock (attach schedule)	110,873	4 €	158,798	168,584
	_	· · · · · · · · · · · · · · · · · · ·	110,073	229	150,750	100,504
		Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
		Investments—mortgage loans				_
		Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	15	Other assets (describe 🟲)				
	16	Total assets (to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	127,315		166,867	176,653
	17	Accounts payable and accrued expenses				
	18	Grants payable				
ů.	19	Deferred revenue				
☱	20	Loans from officers, directors, trustees, and other disqualified persons				
I ab	21	Mortgages and other notes payable (attach schedule)				
コ	22	Other liabilities (describe 🟲)				
	23	Total liabilities (add lines 17 through 22)			0	
		Foundations that follow SFAS 117, check here				
yn A		and complete lines 24 through 26 and lines 30 and 31.				
or Fund Balances	24	Unrestricted	127 215		166.067	
<u>8</u>	25	Temporarily restricted	127,315		166,867	-
ă	26	Permanently restricted				-
ጀ		Foundations that do not follow SFAS 117, check here				
E		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
왍	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
Assets	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see page 17 of the				
Š		ınstructions)	127,315		166,867	
	31	Total liabilities and net assets/fund balances (see page 17 of				
		the instructions)	127,315		166,867	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances				
1		Total net assets or fund balances at beginning of year—Part II, column (a	a), line 30 (must a	gree		
		with end-of-year figure reported on prior year's return)			1	127,315
2		Enter amount from Part I, line 27a			2	39,549
3		Other increases not included in line 2 (itemize)			3	3
4		Add lines 1, 2, and 3			4	166,867
5		Decreases not included in line 2 (itemize)			5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	rt II, column (b), l	ne 30	6	166,867

Form 990-PF (2009)					Page 3		
Part IV Capital Gains	and Losses for Tax on Inve	estment Income		T	Т		
` '	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co) (b) How acquire P—Purchase D—Donation						
1a							
(e) Gross sales price	(f) Depreciation allow (or allowable)		t or other basıs opense of sale		n or (loss)		
	(or allowable)	pius ex	kpense or sale	(e) plus (f) mınus (g)		
b				+			
d				1			
Complete only for posite	a have a same a saluma (h) and sum	ad by the foundation	n on 12/21/60	(1) Common (Com	1 (1-)		
Complete only for assets showing gain in column (h) and (i) F M V as of 12/31/69 (j) A djusted ba as of 12/31/6		(k) Ex	cess of col (1)	col (k), but not	l (h) gain minus : less than -0-) or rom col (h))		
a							
b							
С							
d							
e							
2 Capital gain net inc	ome or (net capital loss)	If gaın, also enter If (loss), enter -0					
Not short torm son	tal gain or (loss) as defined in cost.	one 1222/E) and /6	,	2			
·	tal gaın or (loss) as defined in secti			$ \cdot $			
If gain, also enter ir If (loss), enter - 0 - i	ı Part I, line 8, column (c) (see page n Part I, line 8		instructions)	} 3			
Part V Qualification	Under Section 4940(e) for	Reduced Tax or	ı Net Investme	nt Income			
(For optional use by domestic	private foundations subject to the s	section 4940(a) tax	on net investment	ıncome)			
If section 4940(d)(2) applies	lanua thua mant blank						
	he section 4942 tax on the distribunet qualify under section 4940(e) D			eriod?	┌ Yes ┌ No		
	ount in each column for each year, s	see page 18 ortne i	nstructions before				
(a) Base penod years Calendar	(b)	(c))	(d) Distributio			
year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncha	mtable-use assets	(col (b) divide			
2008					0 000000		
2007							
2006							
2005							
	mn (d)		—	2	0 000000		
	n ratio for the 5-year base period—d the foundation has been in existence			3	0 000000		
the number of years	the foundation has been in existent	e ii less tilali 5 yea	'				
4 Enter the net value	of noncharitable-use assets for 200	9 from Part X, line !	5	4			
5 Multiply line 4 by lin	ne 3			5			
6 Enter 1% of net inv	estment income (1% of Part I, line 2	27b) 		6			
7 Add lines 5 and 6.	· · · · · · · · · · · · · · · · · · ·	,		7	0		
	ributions from Part XII, line 4 or greater than line 7, check the box		L	8 part using a 1% ta	x rate See		
the Part VI instruct		. ,		-			

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Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	tructio	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here T and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0		
	here Fand enter 1% 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-)			0		
3	Add lines 1 and 2					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0		
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
b	Exempt foreign organizations—tax withheld at source 6b					
c	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d					
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 9					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10					
11	Enter the amount of line 10 to be Credited to 2010 estimated tax • 0 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		Yes	No		
	ıt participate or intervene in any political campaign?	. 1a		No		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of					
	the instructions for definition)?	. 1b		No		
	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.					
С	c Did the foundation file Form 1120-POL for this year?					
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation \$ (2) On foundation managers \$					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
_	on foundation managers 🕨 \$	_				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. <u> </u>		No		
_	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	_		NI -		
4-	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. 3		No		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		N-		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No		
6	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
0	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	Yes			
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	Yes			
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	<u> </u>				
	Instructions) NY					
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	Yes			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)					
	or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on					
	page 27)? If "Yes," complete Part XIV	. 9		No		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No		

Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ▶JAMES JOAN WALSH Telephone no ▶(607	729-	0670	
	Located at ►VESTAL PKWY EAST VESTAL NY ZIP+4 ►13850	•		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			►
	and enter the amount of tax-exempt interest received or accrued during the year			
Pai	t VIII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(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)			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	F		
с	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		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	<u> </u>		110
2	operating foundation defined in section $4942(1)(3)$ or $4942(1)(5)$)			
_	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d			
а	and 6e, Part XIII) for tax year(s) beginning before 2009? Yes V No			
	If "Yes," list the years > 20, 20, 20			
Ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	٠		
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b		<u> </u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
Ь	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation			1
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			1
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			1
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			1
	If the foundation had excess business holdings in 2009.)	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			1
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		No

Form	990-PF (2009)									Pa	age 6
Par	t VII-B Statements Rega	rdi	ng Activities for	Wh	ich Form 4720	May	Be Required (conti	nued)		
5a	During the year did the foundatio	n pay	or incur any amoun	t to							
	(1) Carry on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 494	45(e)))? 	No			
	(2) Influence the outcome of any	spec	ific public election (see	section 4955), or to	carr	у				
	on, directly or indirectly, any	vote	r registration drive?.				⊤ Yes ▽	No			
	(3) Provide a grant to an individu	al fo	r travel, study, or oth	ers	ımılar purposes?		☐ Yes 🔽	No			
	(4) Provide a grant to an organiza	ation	other than a charita	ble, e	etc , organization de	s c rıb	ed				
	ın section 509(a)(1), (2), or ((3), o	r section 4940(d)(2)? (s	ee page 22 of the in	struc	tions) 🗆 Yes 🔽	No			
	(5) Provide for any purpose other	r thar	religious, charitable	e, sc	ientific, literary, or						
	educational purposes, or for t	he pi	revention of cruelty t	o ch	ıldren or anımals?.		T Yes 🔽	No			
b	If any answer is "Yes" to 5a(1)-(5), d	ıd any of the transac	tions	s fail to qualify under	the	exceptions described in				
	Regulations section 53 4945 or	ınac	urrent notice regard	ıng d	lisaster assistance ((see	page 22 of the instructio	ns)?	5b		
	Organizations relying on a currer	nt not	ice regarding disast	eras	sistance check here	e	▶↑	-			
c	If the answer is "Yes" to question	5a(4	4), does the foundati	on c	laım exemptıon from	the					
	tax because it maintained expend	diture	responsibility for th	ne gr	ant?		T Yes T	No			
	If "Yes," attach the statement requ	ured l	by Regulations section	n 53.	4945-5(d).						
6a	Did the foundation, during the year	ar, re	ceive any funds, dire	ctly	or indirectly, to pay						
	premiums on a personal benefit o	ontra	act?				Yes . ✓	No			
ь	Did the foundation, during the year	ar, pa	y premiums, directly	orı	ndırectly, on a perso	nal b	penefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, v	vas t	he foundation a party	/ to a	a prohibited tax shel	tertr	ansaction? Tyes F	No			
ь	If yes, did the foundation receive	any	proceeds or have an	y ne	t income attributable	e to t	he transaction?		7b		
	Information Abou	t Of	ficers, Directors	s, Tı	rustees, Founda	tion	n Managers, Highly	Paid	l Emp	loyee	es,
Par	t VIII and Contractors								-		
1	List all officers, directors, trustee	s, fo	undation managers a	nd t	heir compensation (see p	age 22 of the instruction	ıs).			
	(a) Name and address	(b)	(b) Title, and average hours per week devoted to position		c) Compensation		(d) Contributions to mployee benefit plans	(e) Expense account, other allowances			unt,
	(a) Name and address	l de			If not paid, enter -0-)	ı	deferred compensation				S
JAMES	S WALSH		ECTOR		0		0				
3859	P PEMBROOKE LANE	2 00	0								
VES	TAL,NY 13850										
JOAN	WALSH	-	ECTOR		0		0				0
	P PEMBROOKE LANE	2 00	0								
	TAL, NY 13850										
2	Compensation of five highest-paid If none, enter "NONE."	d emp	oloyees (ot her t han t	t hos	e included on line 1–	-see	page 23 of the instructio	ns).			
<i>t</i> = \$	Name and address of the control of		(b) Title, and aver	age			(d) Contributions to	/->			
(a)	Name and address of each emplo paid more than \$50,000	yee	hours per week		(c) Compensatio	n	employee benefit plans and deferred		Expens ther all		
	para mere man 400,000		devoted to positi	on			compensation			oa	
NON	E										
			_								
			_								
			-								
			-								
			<u> </u>								
Toto	I number of other employees hald a	NIAT	E PO 000								0

Part VIII Information About Officers, Directors, Translation About Officers, Directors, D	rustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional serv	vices (see page 23 of the instructions). If none, ϵ	nter "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	1	
	1	
	†	
	-	
	4	
$\underline{\textbf{Total}} \ \text{number of others receiving over $50,000 for professional serv}$	ices	0
Part IX-A Summary of Direct Charitable Activities		
		Г
List the foundation's four largest direct charitable activities during the tax year. Inclu- organizations and other beneficiaries served, conferences convened, research paper		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investment	nts (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation of	during the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See page 24 of the instruc	ctions	
3	CCIONS	
<u> </u>		1
		-
-		l

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	A verage monthly fair market value of securities	1a	a
b	A verage of monthly cash balances	1b	0
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	O
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	O
6	Minimum investment return. Enter 5% of line 5	6	O
Par	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(
	foundations and certain foreign organizations check here F and do not complete t		art.)
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2009 from Part VI, line 5		
Ь	Income tax for 2009 (This does not include the tax from Part VI) 2b	-	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	0
Par	Qualifying Distributions (see page 25 of the instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	0
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts 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)	3Ь	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6			
0	Adjusted qualifying distributions. Subtract line 5 from line 4	6	

For	m 990-PF (2009)				Page 9
Р	art XIII Undistributed Income (see page 2	26 of the instruc	ctions)		
		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part XI, line 7				0
2	Undistributed income, if any, as of the end of 2008				
а	Enter amount for 2008 only				
ь	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
ь	From 2005				
c	From 2006				
d	From 2007				
e	From 2008				
f	Total of lines 3a through e				
4	Qualifying distributions for 2009 from Part				
	XII, line 4 🕨 \$				
а	Applied to 2008, but not more than line 2a				
Ь	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
	Applied to 2009 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
Ь	Prior years' undistributed income Subtract				
	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable				
-	amount—see page 27 of the instructions				
e	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount—see page 27				
	of the instructions				
f	Undistributed income for 2009 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2010				0
7	A mounts 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 instructions)				
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the				
_	Instructions)		+		+
9	Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9		+		
	Excess from 2005				
	Excess from 2006				
	Excess from 2007				
	Excess from 2008				
	Excess from 2009				

P	art XIV Private Operating Four	ndations (see p	age 27 of the ins	structions and Pa	rt VII-A, question	9)
1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2		•			
h	Check box to indicate whether the organiz	•	_		on F 4942(1)(3) o	or Г 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years	7) 4542(1)(5)	
	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					
c	Q ualifying distributions from Part XII,					
4	line 4 for each year listed					
u	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					
а	"Assets" alternative test—enter (1) Value of all assets					
	(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					
Pa	rt XV Supplementary Information				on had \$5,000	or more in
1	assets at any time during Information Regarding Foundation Manage		page 27 of the	instructions.)		
a	List any managers of the foundation who ha		ore than 2% of the	total contributions r	eceived by the foun	dation
	before the close of any tax year (but only I	f they have contrib	uted more than \$5	,000) (See section	507(d)(2))	
	See Additional Data Table					
ь	List any managers of the foundation who over	wn 10% or more of	the stock of a corr	oration (or an equa	lly large portion of t	 he
_	ownership of a partnership or other entity)				,g. p	
	NA	Cift Laam Sahal	anabin ata Duanna			
2	Information Regarding Contribution, Grant					
	Check here I if the foundation only ma unsolicited requests for funds If the found					
	under other conditions, complete items 2a		, , ,	3	,	J
а	The name, address, and telephone numbe	r of the person to v	vhom applications s	should be addressed	I	
	JAMES JOAN WALSH					
	3859 PEMBROOK LANE VESTAL, NY 13850					
	(607) 729-0670					
b	The form in which applications should be s	submitted and infor	mation and materia	als they should incl		
	REQUEST SHOULD INDICATE THE TYP	E OF ORANIZATI	ON & THE USE OF	FANY PROCEEDS		
c	Any submission deadlines					
	NONE					
d	Any restrictions or limitations on awards,	such as by geogra	phical areas, chari	table fields, kinds of	f institutions, or oth	er
	factors					
	NONE					

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year See Additional Data Table 11,100 **b** Approved for future payment

Form 990-	PF (2009) I-A Analysis of Income-Produc	rina Activitie	<u> </u>			Page 1 2
	Enter gross amounts unless otherwise indicated		Isiness income	Excluded by section		(e) Related or exemp function income
_	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See page 28 of the instructions)
b						
d						
f	and contracts from government agencies					
2 Membe	ership dues and assessments on savings and temporary cash investments	900001	15			
4 Dividei	nds and interest from securities		3,097	<u> </u>		
	ntal income or (loss) from real estate -financed property					
b Not d	lebt-financed property					
	tal income or (loss) from personal property					
	(loss) from sales of assets other than inventory come or (loss) from special events					
	profit or (loss) from sales of inventory.					
	revenue a					
12 Subtot	al Add columns (b), (d), and (e).		3,112			
	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions on page 2			1	L3	3,112
Line No.	Explain below how each activity for wh the accomplishment of the organizatio page 28 of the instructions)	ich income is rej	ported ın column (e) of Part XVI-A co	ontributed import	

Form 99	0-PF (2	.009)							Рa	ge 1 3		
Part	XVII	Information Re Noncharitable		nsfers To and Trans Inizations	actions	and Relat	ionships With					
1 Did t	he organiz			ne following with any other orga	anızatıon desc	rıbed ın section			Yes	No		
501(c) of the (Code (other than section 5	501(c)(3) organizati	ons) or in section 527, relating	to political org	anızatıons?						
a Tran	nsfers fr	om the reporting foun	dation to a nonc	harıtable exempt organıza	ition of							
(1)	Cash.							1a(1)		No		
(2)	Othera	ssets						1a(2)		No		
b 0 th	er trans	actions										
(1)	Sales o	fassets to a nonchar	ritable exempt o	rganızatıon				. 1b(1)		No		
(2)	Purcha	ses of assets from a r	noncharıtable ex	empt organization				. 1b(2)		No		
(3)	Rental	of facilities, equipmer	nt, or other asse	ts				. 1b(3)		No		
(4)	Reımbu	rsement arrangement	ts					. 1b(4)		No		
(5)	Loans	or loan guarantees.						. 1b(5)		No		
(6)	Performa	ance of services or m	iembership or fui	ndraising solicitations				. 1b(6)		No		
c Sha	rıng of fa	acılıtıes, equipment, n	maılıng lısts, oth	er assets, or paid employe	ees			. 1c		No		
of th	ne goods	, other assets, or ser	vices given by t	ete the following schedule he reporting foundation I in column (d) the value of	f the founda	ition receive	d less than fair ma	rket value				
(a) Line	No	(b) Amount involved	(c) Name of nonch	narıtable exempt organization	(d) Desc	cription of trans	fers, transactions, and	sharing arra	ingemer	nts		
-												
	-											
des	cribed in 'es," cor		e Code (other th	nth, or related to, one or mean section 501(c)(3)) or (b) Type of organizat	ın section 5				∍s F	, _{No}		
-												
	the be based		nd belief, it is tri	have examined this return ie, correct, and complete as any knowledge	Declaratio		=		•			
	Sig	nature of officer or tr	ustee		Date		Title					
Sign Here	er's aly	Preparer's WILLI Signature	IAM M FARRELI	_ CPA	Dat 20	e 10-05-05	Check if self- employed ▶	Signat ure				
	Paid Preparer's Use Only	Firm's name (or you	ırs RIVER	SIDE TAX INC			EIN ►					
	م ے	ıf self-employed), address, and ZIP co	ode 3604	KDALE RD			-					
		,	30 0 1				Phone no (607)	729-116	5			
			JOHNS	50 N CITY, NY 13790								

Form 990, 990-EZ, or 990-PF)	Schedule of Contributors		
Department of the Treasury nternal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF.		2009
Name of organization THE WALSH FAMILY FOUNDAT	ION	Employer id	entification number
Organization type (che	ok ana)	14-623094	17
organization type (one	sk one)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private for	oundation	
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private found	ation	
	501(c)(3) taxable private foundation		
property) fromar Special Rules	y one contributor Complete Parts I and II		
under sections 50	(c)(3) organization filing Form 990 or 990-EZ, that met the 33 ¹ /3% support to 19(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, durin 000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 99	g the year, a contribu	
during the year, a	(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received froggregate contributions of more than \$1,000 for use <i>exclusively</i> for religious, or educational purposes, or the prevention of cruelty to children or animals	s, charitable,	e Parts I and II

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491125000030

Name of organization
THE WALSH FAMILY FOUNDATION

Employer identification number

14-6230947

Part I	Contributors (see Instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JAMES JOAN WALSH 3859 PEMBROOKE LANE VESTAL, NY 13850	- \$ 47,925 -	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_		- - - -	Person Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- \$	Person F Payroll F Noncash F (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_		\$	Person

Name of organization
THE WALSH FAMILY FOUNDATION

Employer identification number

14-6230947

Part II	Noncash Property (see Instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	2500 SHS CORNING	\$	2009-12-22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization THE WALSH FAMILY FOUNDATION Employer identification number

14-6230947

For organizations completing Part III, enter the	e ar. (Complete columns (a) through (e e total of <i>exclusively</i> religious, charita	e) and the following line entry) ble, etc,
contributions of \$1,000 or less for the year (b) Purpose of gift	(Enter this information once See instance) (c) Use of gift	tructions) ► \$ (d) Description of how gift is held
	(e)	
Transferee's name, address, and	——————————————————————————————————————	onship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gift d ZIP 4 Relatio	onship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gift d ZIP 4 Relatio	onship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and (b) Purpose of gift (b) Purpose of gift (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift (b) Purpose of gift (b) Purpose of gift	Purpose of gift (e) Transfer of gift (b) Purpose of gift (c) Use of gift Transferee's name, address, and ZIP 4 (e) Transfer of gift (e) Transfer of gift (e) Transfer of gift Transfer of gift (e) Transfer of gift (e) Transfer of gift Relation (f) Use of gift Transfer of gift Transferee's name, address, and ZIP 4 (h) Transfer of gift (h) Transfer of gift

Additional Data

Software ID: 09000048

Software Version: US02CV000TY2009

EIN: 14-6230947

Name: THE WALSH FAMILY FOUNDATION

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

JAMES JOAN WALSH

3859 PEMBROOK LANE

VESTAL NY 13850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HUMANE SOCIETYNA BINGHAMTON,NY 13901		NON PROFIT	HEALTH CARE	300
AMERICAN DIABETIESNA BINGHAMTON,NY 13901		NON PROFIT	HEALTH CARE	200
DISCOVERY CENTERNA BINGHAMTON,NY 13901		NON PROFIT	YOUTH PROGRAMS	2,500
BROOME COUNTY YMCABROOME COUNTY BINGHAMTON,NY 13901		NON PROFIT	YOUTH PROGRAMS	100
VESTAL SCHOOL FOUNDATIONNA VESTAL,NY 13850		NON PROFIT	YOUTH PROGRAMS	250
CHILD FUND CCANA BINGHAMTON,NY 13901		NON PROFIT	HEALTH CARE	500
BEST FRIENDS SANCNA BINGHAMTON,NY 13901		NON PROFIT	HEALTH CARE	150
SALVATION ARMYNA BINGHAMTON,NY 13901		NON PROFIT	NEEDED FAMILIES	100
VESTAL PBANA VESTAL,NY 13850		NON PROFIT	HEALTH CARE	50
AMERICAN HEARTNA BINGHAMTON,NY 13901		NON- PROFITNA	HEALTH CARE	100
UNITED WAYNA VESTAL,NY 13850		NON- PROFITNA	HEALTH CARE	5,000
UHS FOUNDATIONNA JOHNSON CITY, NY 13790		NON- PROFITNA	HEALTH CARE	250
MSKCCNA BINGHAMTON,NY 13901		NON- PROFITNA	EDUCATIONAL	100
MEAL ON WHEELSNA VESTAL,NY 13850		NON- PROFITNA	HEALTH CARE	100
AM LUNGNA BINGHAMTON,NY 13901		NON- PROFITNA	HEALTH CARE	200
Total				11,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SUSAN KAMER CANCERNA BINGHAMTON,NY 13901		NON- PROFITNA	HEALTH CARE	150
SO TIER FOOD BANKNA BINGHAMTON,NY 13901		NON- PROFITNA	HEALTH CARE	300
RED CROSSNA BINGHAMTON,NY 13901		NON- PROFITNA	HEALTH CARE	150
VOL OF AMERICANA JOHNSON CITY, NY 13790		NON- PROFITNA	HEALTH CARE	100
DANIELLE HOUSENA BINGHAMTON,NY 13901		NANON- PROFIT	HEALTH CARE	500
Total				11,100

TY 2009 Investments Corporate Stock Schedule

Name: THE WALSH FAMILY FOUNDATION

EIN: 14-6230947

Name of Stock	End of Year Book Value	End of Year Fair Market Value
1025 SHS Trans Canada Corp	40,928	35,229
125 SHS COCA COLA	5,179	7,125
100 SHS COLGATE	4,905	8,215
245 SHS IBM	23,393	32,071
2900 SHS CHINA UNICAM	36,468	38,019
2500 SHS CORNING	47,925	47,925



TY 2009 Other Increases Schedule

Name: THE WALSH FAMILY FOUNDATION

EIN: 14-6230947

Description	Amount
Rounding	3

TY 2009 Taxes Schedule

Name: THE WALSH FAMILY FOUNDATION

EIN: 14-6230947

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX	286			