

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



990-PF

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

2009

OMB No 1545-0052

| | or ocotion toti (a)(1) itolicxempt onaritable ridet |
|---------------------------|---|
| | Treated as a Private Foundation |
| epartment of the Treasury | |
| ternal Revenue Service | Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements |
| | |

| Fo | or ca | lendar | year 2009, | or t | ax year beg | inning | | | , 2009 | , and end | ling | | , 20 |
|-----------------------------|-----------|-----------------|--|--------|------------------------------------|---------------|--|-------------------|----------------|---|--|--|----------------------------------|
| _ | | | hat apply | Ī | Initial retu | | | Initial return | of a former p | oublic cha | irity | | Final return |
| | | | | | Amended | return | | Addre | ss change | | 1 | Name change | |
| _ | | | Name of fou | ında | tion | | | | | | | A Employer identifi | cation number |
| ι | Jse ti | he IRS | | | | | | | | | | | |
| | lat | oel. | JOHN W. | HE | ENRY FAMI | LY FO | UNDATI | ON, INC. | | | | 20- | -1555835 |
| | Othe | wise, | Number and | stre | et (or PO box | number if | mail is not d | elivered to stree | t address) | Room/s | uite | B Telephone number (se | e page 10 of the instructions) |
| | | int | | | | | | | | į | | | |
| | | ype. pecific | 301 YAM | ATC | ROAD | | | | | 2200 | | (61 | 7) 638-3266 |
| | | ctions. | City or town | , sta | ite, and ZIP co | de | · | | | | | C If exemption application pending, check here | |
| | | | | | | | | | | | | D 1. Foreign organiza | ▶ |
| | | | BOCA RA | OT | N, FL 334 | 131 | | | | | | 2 Foreign organiza | |
| H | Che | ck type | e of organiza | ition | X Sect | on 501(| c)(3) exei | mpt private | foundation | | | 85% test, check in computation • | nere and attach |
| 1 | s | ection 4 | 1947(a)(1) no | nex | empt charitabl | | | | rivate founda | tion | | E if private foundatio | n status was terminated |
| 1 | Fair | marke | t value of all | ass | sets at end | J Acco | unting me | ethod 🔼 C | ash Acc | crual | | | o)(1)(A), check here . |
| | | | m Part II, coi | | | | ther (spec | | | | | F If the foundation is | in a 60-month termination |
| _ | 16) | ▶ \$ | 9,2 | 69, | 153. | (Part I, | column (c | d) must be or | n cash basis) | | | under section 507(b |)(1)(B), check here |
| F | art | | | | and Expens | | (a) Rev | venue and | (b) Net inve | estment | ١, | c) Adjusted net | (d) Disbursements for charitable |
| | | | | | nns (b), (c), an ual the amount | | expe | nses per | Incon | | ۱ ۱ | income | purposes |
| | | | | | of the instruc | | b. | ooks | | | | | (cash basis only) |
| | 1 | Contribut | tions, gifts, grants, | | received (attach sc | | | 2,950 | | | | | |
| | 2 | Check] | X if the tattach | Sch | dation is not req B | uired to | | F1 601 | | | ļ | | |
| | 3 | Interest | on savings and | tem | porary cash inve | stments | | 51,691 | | 1,691. | | | |
| | 4 | Divider | nds and intere | est fr | rom securities | | | | | | | | |
| | 5 a | Gross r | ents | | | | | | | | ļ | | |
| | b | Net rent | tal income or (lo | ss) _ | | | | | | | - | | |
| en | 6 a b | | n or (loss) from ales price for all | | of assets not on | | | 0 | | _ | - | | |
| Revenue | | assets o | n line 6a | | 4,500 | | | | | | <u> </u> | | |
| Re | 7 | | - | | (from Part IV, | | | | | | | | |
| | 8 | | | | ain | | | . | | | <u> </u> | | |
| | 9 10 a | | e modification: iles less returns | | l. 4 | | , | <u>.</u> | | | - | | |
| | | and allo | wances • • • • | ·61 | | | | | | | | | |
| 2010 | | | ost of goods sold | th. | 1414.4 100 | <u>4 2019</u> | | | | • | | | |
| R | | | | , | ach schedule) | | | 57 | - | | - | | ATCH 1 |
| e | 11 | | ncome (attacl | | | | <u>. </u> | 54,698 | | 1,691. | | | AICH I |
| ≽ | 12 | | | | gh "11" ♀ .=-4 = : | | | 0.700 | <u> </u> | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| MA | 13 | | | | rectors, trustees | | | | | | | | |
| Æ | 14 15 | | n plans, empl | | and wages . | | | | - | | | | |
| | | | | - | ule) ATCH | | | 2,718 | | 0. | | 0. | 2,718 |
| 嫑 | | | | | schedule) ATC | | | 3,000 | - | 0. | | 0. | 3,000 |
| 8€ | | | | | (attach schedu | | | | · - | | | | |
| ≨ | 17 | | | | (allacii scriedu | | | | | | | | |
| Str | 18 | | | | page 14 of the ins | | | | | | | | |
| Ë | 19 | - | • | • | nedule) and de | | _ | | <u> </u> | | | | |
| and Administrative Expenses | 20 | | | | | , I.O. (1011) | | | | | | | |
| Ā | 21 | • | • | | I meetings | | | | | | | | |
| au | 22 | | | | 3 | | | | | | | - | |
| Бū | 23 | | | | schedule) AT | | | 3,458 | | 1,954. | | | 1,504 |
| Operating | 24 | | | | ministrative ex | | | | | | | | |
| per | - • | | | | | | | 9,176 | 1 | 1,954. | | 0. | 7,222 |
| 0 | 25 | | _ | | nts paid | | 1, | 373,600 | | | | | 1,373,600 |
| | 26 | | | | ents. Add lines 2 | | 1, | 382,776 | | 1,954. | | 0. | 1,380,822 |
| | 27 | | ct line 26 fror | | | | | | | | | | |
| | | Excess o | f revenue over ex | pens | es and disbursem | ents | 1, | 328,078 | | | | | |
| | | | | | (if negative, ei | | | | 4 | 19,737. | | | |
| | | | | | negative, ente | | | | | | | -0- | |

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 9E1410 1 000 70854I 2776 V 09-6

| Part II | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year | Beginning of year | End of | year | | | | |
|-------------|----------------|--|-------------------------------|--|-----------------------|--|--|--|--|
| <u>"</u> | 21 ()) | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value | | | | |
| | 1 | Cash - non-interest-bearing | | | | | | | |
| | 2 | Savings and temporary cash investments | 6,097,227. | 9,269,153. | 9,269,153. | | | | |
| | 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 16 of the instructions) | | | | | | | |
| | 7 | Other notes and loans receivable (attach schedule) | | - | | | | | |
| | • | Less allowance for doubtful accounts | | | | | | | |
| | 8 | Inventories for sale or use | | | | | | | |
| ssets | 9 | Prepaid expenses and deferred charges | | | | | | | |
| SS | _ | | 4,500,004. | 0.1 | 0. | | | | |
| Ř | | Investments - U S and state government obligations (attach schedule) | | | | | | | |
| | | Investments - corporate stock (attach schedule) | | · | | | | | |
| | 11 ° | Investments - corporate bonds (attach schedule) | | | | | | | |
| | | (attach schedule) | | | | | | | |
| | | Investments - mortgage loans | | | | | | | |
| | 13 14 | Investments - other (attach schedule) Land, buildings, and equipment basis | | | | | | | |
| | | equipment basis Less accumulated depreciation (attach schedule) | | | | | | | |
| | 15 | Other assets (describe | | | | | | | |
| | 16 | Total assets (to be completed by all filers - see the | | | | | | | |
| | | instructions Also, see page 1, item l) | 10,597,231. | 9,269,153. | 9,269,153. | | | | |
| | 17 | Accounts payable and accrued expenses | | | | | | | |
| | 18 | Grants payable | | | | | | | |
| 8 | 19 | Deferred revenue | | | | | | | |
| ij | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | | | | |
| Liabilities | 21 | Mortgages and other notes payable (attach schedule) | | | | | | | |
| Ξ | 22 | Other liabilities (describe | | | | | | | |
| | | | | | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | | | | | | | |
| | | Foundations that follow SFAS 117, check here ▶ | | | | | | | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | | | | | |
| S | 2.4 | Unrestricted | | | | | | | |
| nce | 24 | | | | | | | | |
| ala | 25 | Temporarily restricted | | ··· | | | | | |
| 18 | 24 25 26 | Permanently restricted | | · · · · · · · · · · · · · · · · · · | | | | | |
| un | | Foundations that do not follow SFAS 117, | | | | | | | |
| Ē | | check here and complete lines 27 through 31. ▶ 🗓 | | | | | | | |
| 0 | 27 | Capital stock, trust principal, or current funds | | | | | | | |
| ssets | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | 10,597,231. | 9,269,153. | | | | | |
| 188 | 29 | Retained earnings, accumulated income, endowment, or other funds | 10,597,231. | 9,209,155. | | | | | |
| Net As | 30 | Total net assets or fund balances (see page 17 of the | 10 507 001 | 0.060.150 | | | | | |
| ž | | instructions) | 10,597,231. | 9,269,153. | | | | | |
| | 31 | Total liabilities and net assets/fund balances (see page 17 | | | | | | | |
| | _ | of the instructions) | 10,597,231. | 9,269,153. | | | | | |
| | | Analysis of Changes in Net Assets or Fund | | , . | | | | | |
| 1 | | net assets or fund balances at beginning of year - Part II | | | | | | | |
| | | of-year figure reported on prior year's return) | | | 10,597,231. | | | | |
| 2 | Ente | r amount from Part I, line 27a | | 2 | -1,328,078. | | | | |
| 3 | Othe | | | | | | | | |
| | | | | | 9,269,153. | | | | |
| | | | | | | | | | |
| 6 | Tota | net assets or fund balances at end of year (line 4 minus | line 5) - Part II. column (b) | | 9,269,153. | | | | |
| <u>~</u> | | the second of the second of your time 4 minus | 3) (5) | | | | | | |

| Part IV Capital Gains | and Losses for Tax on Inve | estment Income | T - 78-5 1 (-) | | | |
|---|--|---|-----------------------------------|---|---------------------------------------|--|
| | describe the kind(s) of property sold (e | | (b) How acquired P-Purchase | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | |
| | 2-story brick warehouse, or common stock, 200 shs MLC Co) | | | | | |
| 1a SEE PART IV SCHE | DULE | | | | | |
| <u>b</u> | | | ļ | | | |
| C | | | | ļ | | |
| _d | | | | | | |
| <u>e</u> | | | | | | |
| (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) min | | |
| a b | | | | | | |
| c | - | | | | · · · · · · · · · · · · · · · · · · · | |
| d | | | | | | |
| e | | | | | | |
| | nowing gain in column (h) and own | ned by the foundation on 12/31/69 | (1) | Gains (Col (h) g | ain minus | |
| (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 | | (k), but not less Losses (from co | than -0-) or | |
| 2 | | | ļ | | | |
| b | | | | | | |
| C | | | | | | |
| d | | | | | | |
| e | | | | | | |
| | , , , , , , , (If | gain, also enter in Part I, line 7 | | | | |
| 2 Capital gain net income or | | (loss), enter -0- in Part I, line 7 | 2 | | 0. | |
| | or (loss) as defined in sections 12 | | | | | |
| If gain, also enter in Part I, | line 8, column (c) (see pages 13 a | and 17 of the instructions) | | | | |
| | ine 8 | | 3 | | | |
| Part V Qualification Un | ider Section 4940(e) for Redu | iced Tax on Net Investment Inc | come | | | |
| If section 4940(d)(2) applies, Was the foundation liable for | | utable amount of any year in the b | ase peno | d? [| Yes X No | |
| | not qualify under section 4940(e) | | | | | |
| | ount in each column for each year | see page 18 of the instructions be | efore mak | | | |
| (a) Base penod years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of nonchantable-use assets | | Distribution r (col (b) divided by | atio | |
| 2008 | 3,142,073. | 11,501,887. | ļ | (coi (b) divided b | 0.273179 | |
| 2007 | 1,878,411. | 13,602,197. | | | 0.138096 | |
| 2007 | 945,765. | 14,822,560. | | | 0.063806 | |
| 2005 | 360,671. | 14,831,962. | | | 0.024317 | |
| 2004 | 0. | 581,713. | | | 0.000000 | |
| | | · · · · · · · · · · · · · · · · · · · | | | | |
| 2 Total of line 1, column (d) | | | 2 | | 0.499398 | |
| 3 Average distribution ratio | for the 5-year base period - divide | the total on line 2 by 5, or by the | | | | |
| _ | dation has been in existence if less | | 3 | | 0.099880 | |
| • | | | | | | |
| 4 Enter the net value of non | charitable-use assets for 2009 fro | m Part X, line 5 | 4 | 12, | 337,415. | |
| | | | | | | |
| 5 Multiply line 4 by line 3 | | | 5 | 1, | 232,261. | |
| • | | | | | | |
| 6 Enter 1% of net investmen | nt income (1% of Part I, line 27b) | | 6 | | 497. | |
| | | | _ | 1 | 232 750 | |
| 7 Add lines 5 and 6 | | | 7 | 1, | 232,758. | |
| Entor qualifiuma distribution | ne from Part XII line 4 | | 8 | 1. | 380,822. | |
| 8 Enter qualifying distribution of line 8 is equal to or green Part VI instructions on page | eater than line 7, check the box i | n Part VI, line 1b, and complete t | that part | using a 1% ta | x rate See the | |

| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4940(a), or 4940(a | ne ins | tructio | ons) |
|----------|--|----------|---------|----------------|
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | | | |
| | Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 4 | 97. |
| | here X and 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-) 2 | | | 97. |
| 3 | Add lines 1 and 2 | | 4 | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 | | | 97. |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | | | |
| 6 | Credits/Payments 2009 estimated tax payments and 2008 overnayment credited to 2009 6a 3, 608. | | | |
| а | 2003 estimated tax payments and 2000 overpayment dictated to 2000 | | | |
| b | Exempt foreign organizations-tax withheld at source | | | |
| C | Tax paid with application for extension of time to lile (Form 6666) | | | |
| | Backup withholding erroneously withheld | | 3.6 | 08. |
| 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 | | 3.1 | 11. |
| 10 11 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | 0. |
| | t VII-A Statements Regarding Activities | | | <u> </u> |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No |
| ıa | participate or intervene in any political campaign? | 1a | | - X |
| h | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 | <u> </u> | | |
| | of the instructions for definition)? | 1 b | | Х |
| | 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 | | | |
| • | Did the foundation file Form 1120-POL for this year? | 1 c | | Х |
| 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 ▶\$ 0. | | | |
| 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? | 2 | | Х |
| | If "Yes," attach a detailed description of the activities | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | | | |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | X |
| 4 a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X |
| ь | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | <u>X</u> |
| | 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 law remain in the governing instrument? | 6 | 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_ | Х | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) $ ightharpoonup$ $ ightharp$ | | | |
| 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 | 8 b | Х | <u></u> |
| 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 | | <u> </u> |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | 10 | | Х |

| orm | 990-PF (2009) 20-1333033 | | | Page 5 |
|-----|--|-------|-----|-------------|
| Par | rt 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 | | Х |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before | | | |
| | August 17, 2008? | 12 | | Х |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | | Х | |
| | Website address N/A | | | |
| 14 | The books are in care of ► MARY JO DEVINE Telephone no ►561-912 | -08 | 31 | |
| • | The books are in care of ► MARY JO DEVINE Telephone no ► 561-912 Located at ►301 YAMATO ROAD, SUITE 2200 BOCA RATON, FL ZIP+4 ► 33431 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | $\cdot []$ |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X 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? Yes X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)? | 1 b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | 1 | |
| С | District and the second of the set described of a sheather asserted asta that | | 1 | |
| | were not corrected before the first day of the tax year beginning in 2009? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| а | At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and | 1 | | |
| | 6e, Part XIII) for tax year(s) beginning before 2009? | | | |
| | If "Yes," list the years | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | | | |
| | to all years listed, answer "No" and attach statement - see page 20 of the instructions) | 2b | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | D | | | |
| 3 a | Did the foundation hold more than a 2% direct or indirect interest in any business | | | |
| | 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 | | | |
| | foundation had excess business holdings in 2009) | 3 b | | <u> </u> |
| 4 a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4 a | - | X |
| Ь | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | ٠,, |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? | l 4 b | 1 | l X |

| 5 During the year did the foundation pay or incur any amount to (1)-Carry on prograpada, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc. organization described in section 509(4)(1), (2) or (3), or section 496(0)(2)? (see page 22 of the instructions). (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes. or for the prevention of cruely to children or animals? (6) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes. or for the prevention of cruely to children or animals? (7) Froude for any purpose other than religious, charitable, scentific, literary, or educational purposes. or for the prevention of cruely to children or animals? (8) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes. or for the prevention of cruely to children or animals? (9) International purposes of the transactions that is a section 53 4945 or in a current notice regarding diseaster assistance check here. (a) International composition of the foundation of the transaction for the tax because it maintained expenditure responsibility of the grant? (b) International purposes of the condition of the scene and the foundation of the scene and provided transaction? (c) International purposes of the previous purposes of the provided transaction? (d) Compositional provided transactions of heavy the condition of the transaction? (e) Note that the foundation of the law year, was the foundation of maintained expenditure and provided transactions. (e) Composition of the transactions of the instructions. (e) Composition of the instructions. (e) Composition of the instructions. (a) | | t VII-B Statements Regarding Activities fo | r Which Form 4 | 720 May Be Regu | ired (continued) | | 1 090 0 |
|--|-----|---|----------------------------|--------------------------|---------------------------|--------------|----------------|
| (1) -Carry on propaganda, or otherwise attempt to influence legislation (section 495(e))? Yes No (2) Influence the outcome of any specific public election (see scion 495), or lo carry on, directly or indirectly, any vater registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Ves No (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide a grant to an individual for travel, study, or other similar purposes? (6) Provide of or any purpose of their than a clonical, etc. organization described in section 509(a)(1), (2), or (3), or section 4940(6)(2)? (see page 22 of the instructions). (6) Provide for any purpose of their than actions, charitable, scentific, letterary, or decisional purposes, or for the prevention of cruelty to children or animals? (7) If any purposes or for the prevention of cruelty to children or animals? (8) If any answer is "Yes" to question 5a(4), does the foundation dain exemption from the tax because it maintained expenditure responsibility for the grant? (9) If the answer is "Yes" to question 5a(4), does the foundation dain exemption from the tax because it maintained expenditure responsibility for the grant? (9) If "Yes, "Alter the statement required by Regulations section 53 4945-5(d) (9) If "Yes, "Alter the statement required by Regulations section 53 4945-5(d) (9) If "Yes, "Alter the statement required by Regulations section 53 4945-5(d) (9) If "Yes, "Alter the statement required by Regulations section 53 4945-5(d) (1) If the foundation, during the year, pay premiums, directly or indirectly, to pay premiums (1) If yes, did the foundation during the year, pay premiums, directly or indirectly, to pay premiums (1) If yes, did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums (1) If yes, did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums (1) If yes, did the foundation the year is the foundation and year is the year is | | | | , so may so may | | | - 1 |
| (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter (registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(q)(1), (2) or (3), or section 4960(q)(2)? (see page 22 of the instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes or for the prevention of cruelty to children or animals? (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes or for the prevention of cruelty to children or animals? (7) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes or for the prevention of cruelty to children or animals? (8) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes or for the prevention of cruelty to children or animals? (9) Provide for any purpose other than the control of cruelty or indirectly, or animals of the exceptions described in Regulations section 53 4945 or in a current notice regarding dissater assistance check here. (8) If "Yes" of an inanimaned expenditure responsibility for the grant? (9) If "Yes," attach the statement required by Regulations section 53 4945 5(d) (9) If the animalization of the statement required by Regulations section 53 4945 5(d) (1) If the animalization and benefit contract? (1) If the animalization of the foundation creates any purpose and purpose or have any perimone and purpose of the instructions? (1) If "Yes" to 80, the Form 8877. (1) If "Yes" to 80, the Form 8877. (2) If the animalization of the purpose of the instructions of the foundation creates any proceeds or have any net income attributable to the transaction? (1) If the animalization of the purpose of the purpose of the instructions. (1) If the animalization | 5 a | | | 4045(0))2 | Vos X No | | |
| directly or indirectly, any woter registration drive? (3) Provide a grant to an individual for travel, study or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc. organization described in section 509(a)(1), (2), or (3), or section 4940(a)(2)? (see page 22 of the instructions). (5) Provide for any purposes other than religious, charitable, scendific, literary, or deutational purposes, or for the prevention of cruelly to children or animals? b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? C if the answer is "Yes" to question 53(4), does the foundation diam exemption from the lax because it maintained expenditure responsibility for the grant? A lary time work is the statement required by Regulations section 53 4945-5(d) 5a Did the foundation, during the year, repay premiums, directly or indirectly, to pay premiums on a personal benefit contract? A lary time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No b if yes, did the foundation receive any proceeds or have any net income attributable to the transaction? (a) Name and address (b) Title, and awarge (c) Compensation (see page 22 of the instructions). (c) Name and address (d) Title, and awarge (c) Compensation (see page 22 of the instructions). (e) Expense account, other incomplete than those included on line 1 - see page 23 of the instructions). (e) Expense account, other incomplete products to position (e) Compensation (e) Expense account, other allowances of each employee paid more than \$50,000 (f) Title, and awarge (c) Compensation (e) Compensation (e) Expense account, other allowances of each employee paid more than \$50,000 (f) Title, and awarge (c) Compensation (e) Compensation (e) Expense account, other allowances of each employee paid more than \$50,000 (f) Title, and | | · · · · · · | | | . Lites Lites | | |
| (3) Provide a grant to an individual for travel, study, or other smilar purposes? | | • • | | | Dy. Dy. | | |
| (4) Provide a grant to an organization other than a chartable, etc. organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions). (5) Provide of any purposes other than religious, chartable, scentific, literary, or deucational purposes, or for the prevention of cruelty to children or animals? b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If "Yes," atlanch the statement required by Regulations section 33 4945-5(d) D b Id the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? A A lany time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No B D Id the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract? A A lany time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No Tax No Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) No | | | | | | 1 1 | |
| section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions). | | | | | . Yes A No | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fall to quality under the exceptions described in Regulations section 53 494.5 or in a current notice regarding disaster assistance (see page 22 of the instructions)? c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? if 'Yes attach the statement required by Regulations section 3.3 494.5-(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? if 'Yes' to 6b, file Form 8870 b Did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract? if 'Yes' to 6b, file Form 8870 a All any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? It is all officers, directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Title, and average for the properties of the instructions). (b) Title, and average foundation described in position (p) Compensation (see page 22 of the instructions). (c) Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (d) Contributions to employee barding party and determed compensation (compensation compensation). (e) Expense account, other allowances. | | • • | - | | | | |
| purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? C regarding of a current notice regarding disaster assistance (see page 22 of the instructions)? If "Yes," attach the statement required by Regulations section 53 4945-5(d) B Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," attach the statement required by Regulations section 53 4945-5(d) B Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? If "Yes," to 60, file Form 870 Ta At any time during the tax year, was the foundation a party to a prohibited tax shefter transaction? If "Yes in the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average (c) Compensation (see page 22 of the instructions). (b) Title, and average (c) Compensation (see page 23 of the instructions). (c) Expense account, other allowances of excellent to position. (d) Contributions to position of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (e) Expense account, other allowances of excellent to position. (b) Title, and average (c) Compensation (e) Comp | | | | | . Yes X No | ' | |
| b If any answer is "Yes" to Sa(1)-(5), cit any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance theck here. If the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes and the statement required by Regulations section 53 4945-5(g) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If Yes to 8b, file Form 8870 A at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? If Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Title, and average (b) Title, and average (c) Compensation (see page 22 of the instructions). On the fallowances of each employee paid more than \$50,000 (b) Title, and average (c) Compensation (fir not paid, enter divided to position of the fallowances) of the fallowances of the allowances of the allowances of the allowances of the page 22 of the instructions). | | (5) Provide for any purpose other than religious, charitat | ole, scientific, literary, | or educational | | | |
| Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. If the answer is "Yes" to question 53 4(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 5a Did the foundation, during the year, revew any funds, directly or indirectly, to pay premiums on a personal benefit contract? because it maintained expenditure responsibility for indirectly, to pay premiums on a personal benefit contract? The part vill "Yes" to 60, file Form 8870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" t | | purposes, or for the prevention of cruelty to children of | r anımals? | | . Yes X No | · | |
| Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. If the answer is "Yes" to question 53 4(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 5a Did the foundation, during the year, revew any funds, directly or indirectly, to pay premiums on a personal benefit contract? because it maintained expenditure responsibility for indirectly, to pay premiums on a personal benefit contract? The part vill "Yes" to 60, file Form 8870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" to 60, file Form 870 The part vill "Yes" t | b | If any answer is "Yes" to 5a(1)-(5), did any of the transi | actions fail to qualify | under the exceptions | s described in | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? because it maintained expenditure responsibility for the grant? the state the statement required by Regulations section 53 4945-5(g) and a personal benefit contract? because it maintained expenditure responsibility for the grant? and provided the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? because it maintained expenditure responsibility for the grant? con a personal benefit contract? because it maintained expenditure responsibility for the grant? because it maintained expenditure responsibility for the grant provided to the transaction? because it maintained expenditure responsibility for the grant provided to the transaction? be a view of the foundation during the expension of the foundation managers and their compensation? compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). compensa | | | | | | 5b | |
| because it maintained expenditure responsibility for the grant? If "Yes," stach the statement required by Regulations section 53 4945-5(d) a Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes," 65 bt, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? The part VIII information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average hours, per week devoted to position (c) Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). 2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average devoted to position (c) Compensation (e) Expense account, other allowances NONE (b) Title, and average devoted to position (e) Compensation (e) Expense account, other allowances (c) Compensation (e) Expense account, other allowances (d) Contributions to employee benefit plans and deferred compensation. (e) Expense account, other allowances (e) Expense account, other allowances (e) Expense account, other allowances (for Compensation (for Compensation (e) Expense account, other allowances (e) Expense account, other allowances (for Compensation (for Compensation (e) Expense account, other allowances (for Compensation (for paid, enter allowances) (c) Compensation (e) Expense account, other allowances (e) Expense account, other allowances (for Compensation (for paid, enter allowances) | | Organizations relying on a current notice regarding disast | er assistance check h | ere | ▶ 🔲 | | |
| because it maintained expenditure responsibility for the grant? If "Yes," stach the statement required by Regulations section 53 4945-5(d) a Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes," 65 bt, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? The part VIII information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average hours, per week devoted to position (c) Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). 2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average devoted to position (c) Compensation (e) Expense account, other allowances NONE (b) Title, and average devoted to position (e) Compensation (e) Expense account, other allowances (c) Compensation (e) Expense account, other allowances (d) Contributions to employee benefit plans and deferred compensation. (e) Expense account, other allowances (e) Expense account, other allowances (e) Expense account, other allowances (for Compensation (for Compensation (e) Expense account, other allowances (e) Expense account, other allowances (for Compensation (for Compensation (e) Expense account, other allowances (for Compensation (for paid, enter allowances) (c) Compensation (e) Expense account, other allowances (e) Expense account, other allowances (for Compensation (for paid, enter allowances) | С | If the answer is "Yes" to question 5a(4), does the founda | ition claim exemption t | from the tax | | | |
| ## "Yes," attach the statement required by Regulations section 53 4945-5(d) 15 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 15 b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 16 b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 17 'Yes' to 6b, file Form 8870 17 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 18 b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 19 c Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 10 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). 10 Compensation (see page 22 of the instructions). 11 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). 12 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). 13 C Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). 16 Expense account, other allowances of each employee paid more than \$50,000 their than those included on line 1 - see page 23 of the instructions). 17 C Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). 18 C Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). 19 C Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). 10 C Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). 19 C Compensation of five highest-paid employees (other than th | | | | | Yes No | | |
| 6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? # Yes* to 6b, file Form 8870 7 a At any time during the year, was the foundation a party to a prohibited tax shelter transaction? **No** **Pert VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (g) Compensation | | | | | · — — | | |
| on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average hours per week devoted to position 4 TTACHMENT 5 0 . 0 . 0 . 0 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 by Title, and average hours per week devoted to position (b) Title, and average hours per week devoted to position (c) Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 by Title, and average hours per week devoted to position (c) Compensation (c) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (e) Compensation (e) Expense account, other allowances | 6 - | • • • | | nav premijime | | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | va | | | | Yes X No | . | |
| ## 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? | ь | · | | | • — — | | l x |
| Tax At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? | • | | ary or manectry, or a p | personal benefit contrat | ··· | | |
| b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? | 7.0 | | rty to a prohibited tay | chelter transaction? | Ves X No | . | |
| Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average devoted to position (c) Compensation (first paid, enter displayed board plants) (e) Expense account, other allowances | | | | | • — | | |
| ATTACHMENT 5 | | | | | | | |
| (a) Name and address (b) Title, and average hours per week devoted to position ATTACHMENT 5 0 0 0 0 0 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Contributions to employee benefit plans and deferred compensation of the instructions of the instructions of the instructions of the plans and deferred compensation of the plant | | and Contractors | | _ | | · | |
| ATTACHMENT 5 0. 0. 0. 0 2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other allowances (e) Expense account, other account (e) Expense account (e) Expense account (e) Expense accoun | 1_ | List all officers, directors, trustees, foundation m | | | | | |
| ATTACHMENT 5 0. 0. 0. 0 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other allowances NONE (c) Compensation (e) Expense account, other allowances | | (a) Name and address | hours per week | (If not paid, enter | employee benefit plans | | |
| ATTACHMENT 5 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. | | | devoted to position | -0-) | and deterred compensation | | |
| 2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (other allowances) | 7 T | TACUMENT S | | 0 | ١ ١ | | 0 |
| 2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (e) Expense account, other allowances | Αı | TACHMENT 3 | | | | | <u> </u> |
| 2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances other allowances | | | | | | | |
| 2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances other allowances | | | | | | | |
| If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances | | | | | | | |
| If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances | | | | | | | |
| If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances | | | | | | | |
| If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances | | | | | | | |
| (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances | | | her than those inc | luded on line 1 - se | e page 23 of the inst | ructions). | |
| (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position long plans and deferred compensation long plans and deferred co | | if flotte, effet NONE. | | | (d) Contributions to | | |
| NONE NONE Tompensation | (a |) Name and address of each employee paid more than \$50,000 | hours per week | (c) Compensation | | | |
| | | | devoted to position | | | | |
| | | | | | | | |
| Fotal number of other employees paid over \$50,000 | | NONE | | | | | |
| Fotal number of other employees paid over \$50.000 | | | | | | | |
| Fotal number of other employees paid over \$50.000 | | | | | | | |
| Fotal number of other employees paid over \$50.000 | | | | | | | |
| Fotal number of other employees paid over \$50.000 | | | | | | | |
| Fotal number of other employees paid over \$50.000 | | | | | | | |
| Fotal number of other employees paid over \$50,000 | | | | | | | |
| Total number of other employees paid over \$50.000 | | | - | | | · | |
| Total number of other employees paid over \$50.000 | | | | | | | |
| | | A sumb so of other employees and ever \$50,000 | | · | L | | |

| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employand Contractors (continued) | yees, | |
|---|-----------|----------|
| 3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, | enter "NO | NE." |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Comp | |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | ▶ | NONE |
| 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 beneficianes served, conferences convened, research papers produced, etc. | Exper | nses |
| 1 N/A | | |
| · ==================================== | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amo | unt |
| 1 NONE | 7.110 | |
| | | |
| 2 | | |
| | | |
| All other program-related investments See page 24 of the instructions | | |
| 3 NONE | | |
| | | |
| Total. Add lines 1 through 3 | L | |

9E1465 1 000 70854I 2776

| Pa | Minimum Investment Return (All domestic foundations must complete this part. Foresee page 24 of the instructions.) | eign foundat | ions, |
|-----|---|---|-------------|
| 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 | 3,406,335. |
| b | Average of monthly cash balances | 1b | 9,118,959. |
| С | Fair market value of all other assets (see page 24 of the instructions) | 1c | 0. |
| d | Total (add lines 1a, b, and c) | | 12,525,294. |
| е | 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 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 12,525,294. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 | • | |
| | | 4 | 187,879. |
| 5 | of the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 12,337,415. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 616,871. |
| Pa | art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) profoundations and certain foreign organizations check here ▶ ☐ and do not complete this | | |
| 1 | Minimum investment return from Part X, line 6 | . 1 | 616,871. |
| 2 a | Tax on investment income for 2009 from Part VI, line 5 | | |
| b | Income tax for 2009 (This does not include the tax from Part VI) 2b | 7 | |
| c | | 7 2c | 497. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | | 616,374. |
| 4 | Recoveries of amounts treated as qualifying distributions | | |
| 5 | Add lines 3 and 4 | | 616,374. |
| 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 | 616,374. |
| _ | | | |
| Pa | art XII Qualifying Distributions (see page 25 of the 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 | _ | 1,380,822. |
| b | | | 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 | | 3a | 0. |
| b | | 3b | 0. |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | • — — — — — — — — — — — — — — — — — — — | 1,380,822. |
| 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 (see page 26 of the instructions) | 5 | 497. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | • | 1,380,325. |
| - | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating | whether the | foundation |
| | qualifies for the section 4940(e) reduction of tax in those years | | |

| Рa | rt XIII Undistributed Income (see page | 26 of the instruction | ns) | | |
|----|--|-----------------------|---------------------|----------|---------------------------------------|
| | | (a) | (b) | (c) | (d) |
| 1 | Distributable amount for 2009 from Part XI, | Corpus | Years prior to 2008 | 2008 | 2009 |
| | line 7 | | | | 616,374. |
| 2 | Undistributed income, if any, as of the end of 2009 | | | | |
| | Enter amount for 2008 only | | | | |
| b | Total for pnor years 20 07 20 06 20 05 | | | | |
| 3 | Excess distributions carryover, if any, to 2009 | | | | |
| | From 2004 | | | | |
| | From 2005 0. | | | | |
| | | | | | |
| ď | From 2006 | | | | |
| | From 2008 2,574,163. | | | | |
| | Total of lines 3a through e | 3,619,685. | | | |
| | Qualifying distributions for 2009 from Part XII, | | | | |
| • | line 4 ▶ \$1,380,822. | | | | |
| а | Applied to 2008, but not more than line 2a | | | | |
| b | Applied to undistributed income of prior years (Election | | | | |
| | required - see page 26 of the instructions) | | | | |
| С | Treated as distributions out of corpus (Election | | | | |
| | required - see page 26 of the instructions) | | | | 616,374. |
| | Remaining amount distributed out of corpus | 764,448. | | | |
| 5 | Excess distributions carryover applied to 2009 | ·· | | | |
| • | (If an amount appears in column (d), the same | | | <u> </u> | |
| _ | amount must be shown in column (a)) | | | | |
| 6 | Enter the net total of each column as indicated below: | | | | |
| 2 | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 4,384,133. | | | |
| | Prior years' undistributed income Subtract | | | | |
| b | line 4b from line 2b | | | | |
| 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 | | | | |
| А | Subtract line 6c from line 6b Taxable | | | | |
| u | 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 | | | | |
| | | | | | |
| ī | Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be | | | | |
| | distributed in 2010 | | | | |
| 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 | | | | |
| | instructions) | | | | |
| 8 | Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the | | | | |
| | instructions) | 0. | | <u>.</u> | |
| 9 | Excess distributions carryover to 2010. | | | | |
| | Subtract lines 7 and 8 from line 6a | 4,384,133. | | | · · · · · · · · · · · · · · · · · · · |
| | Analysis of line 9 | | | | |
| | Excess from 2005 | | | | |
| b | Excess from 2006 | | | | |
| | Excess from 2007 1, 045, 522. | | | | |
| | Excess from 2008 2,574,163. | | | | |
| е | Excess from 2009 764, 448. | | | | |

| b 2 a | Check box to indicate whe | | a private operating four | idation described in secti | on l | 1 4942 | (J)(3) or | 1 4043(1)/ |
|----------|--|-------------------------|---|--|--------------------------------|-------------------------|-----------------|------------|
| a | Enter the lesser of the ad- | | | | 1 | 1 | 1 | 4942(j) |
| | justed net income from Part | Tax year (a) 2009 | (b) 2008 | Prior 3 years (c) 2007 | (d) · | 2006 | - (| e) Total |
| | or the minimum investment return from Part X for each | (4) 2000 | (5) 2000 | (0) 2007 | (4) | | | |
| ь | year listed | | | - | | | | |
| 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. | | | | | | | |
| 3 | 2d from line 2c 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 | | | | | | | |
| b | 4942(j)(3)(B)(i) "Endowment" alternative test- | | | | | | | |
| | enter 2/3 of minimum invest- ment return shown in Part X, | | | | | | | |
| | line 6 for each year listed | | | | | | | |
| С | "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 sup- port from an exempt | | | | | | | |
| | organization | | <u> </u> | - | | | - | |
| D. | (4) Gross investment income. rt XV Supplementa | n/ Information /C | omplete this par | t only if the four | dation had | \$5,000 | or mor | |
| Га | | | e page 28 of the i | | idation nac | Ψο,σοσ | 01 11101 | c iii as. |
| ı | Information Regarding | | | | | | | |
| а | List any managers of the before the close of any | tax year (but only if t | nave contributed mo hey have contributed | re than 2% of the to more than \$5,000) | otal contribut (See section | ions recei 507(d)(2) | ved by the) | ∍ foundat |
| | JOHN W. HEN | ····· | | | | | | |
| b | List any managers of to ownership of a partners | | | | | an equal | y large po | ortion of |
| | Ownership of a partners | sinp or other entity, o | windir the roundation | 711 1123 2 1070 01 great | .01 111101001 | | | |
| | N/A | | | | | | | |
| 2 | Information Regarding | Contribution, Gran | t, Gift, Loan, Scholars | ship, etc., Programs: | | | | |
| | Check here ▶ ☐ If the unsolicited requests for organizations under other parts. | or funds If the four | idation makes gifts, | grants, etc (see pa | | | | |
| а | The name, address, an | d telephone number | | | l be addresse | d | | |
| b | The form in which appli | | bmitted and informa | tion and materials the | ey should incl | ude | | |
| | N/A | | · | | | | | |
| С | Any submission deadlin | es | | | | | | |
| | N/A | | | | | | | |
| d | Any restrictions or lin factors | nitations on awards | , such as by geog | raphical areas, char | ıtable fields, | kinds of | institution | is, or ot |
| ISA | N/A | | | | | | F | 990-PF (2 |
| | 000 70854I 2776 | | | | | | ⊢om | 33U-FF (2 |

| Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | | | | | |
|--|--|------------------------|----------------------------------|------------|--|--|--|--|--|--|
| Recipient | If recipient is an individual, | Foundation | | | | | | | | |
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | status of recipient | Purpose of grant or contribution | Amount | | | | | | |
| a Paid during the year | or substantial contributor | , recipion | | | | | | | | |
| a raid daring the year | | | | | | | | | | |
| ATTACHMENT 7 | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | : | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Total | | | ▶ 3a | 1,373,600. | | | | | | |
| b Approved for future payment | | | | | | | | | | |
| | | | | | | | | | | |
| ATTACHMENT 8 | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | <u></u> | L | <u> </u> | 05.000 | | | | | | |
| Total | | | ▶ 3b | 25,000. | | | | | | |

| Enter gross amounts unless otherwise indicated | | business income | Excluded by | section 512, 513, or 514 | (e) Related or exempt function income |
|--|----------------------|-----------------|---------------------------------------|--------------------------|---|
| • | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See page 28 of the instructions) |
| 1 Program service revenue. | 1 | | | | the mistractions) |
| a b | - | | | | |
| | <u> </u> | | | | |
| | | | | | |
| e | | | | | · · · · · · · · · · · · · · · · · · · |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | - |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | 14 | 51,691. | |
| Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | 1 | | | | <u> </u> |
| 7 Other investment income | I I | | | | |
| 8 Gain or (loss) from sales of assets other than inventor | 1 | | 18 | 0. | |
| 9 Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory. | i | | | | |
| 1 Other revenue a | | | | | |
| b U.S. TREASURY REFUND | | | 01 | 57. | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Subtotal Add columns (b), (d), and (e) | | | | 51,748. | |
| 3 Total. Add line 12, columns (b), (d), and (e). | | | | 13 | 51,748 |
| See worksheet in line 13 instructions on page 28 | | | | | - |
| Line No. Explain below how each active the accomplishment of the financial page 29 of the instructions) | | | | | |
| | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | <u> </u> | |
| | | | | | |
| | | <u> </u> | | | ·· ·· ·· |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | NOT APPLICAE | RI.E | | <u> </u> |
| | ···- | NOT APPLICAL | | | |
| | | | | | |
| | | | | | |
| | | · | | | |
| | | | | | |
| | | | | | |
| | | | · | | |
| | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Form | 990-PF | (2009) | | | | | 20-15 | 5583 | 5 | | | P | age 13 |
|------------|--------------------------------|---|---------------------|------------------------------|----------------|-------------------|---------------------|-------------------|----------------------|--------------------------|--------------------------|-------------|---------------------|
| Pa | rt XVII | Information Exempt Orga | | ransfers To an | d Transa | ctions | and F | Relatio | onship | s With | Nonc | | |
| 1 | in sec | he organization directl ction 501(c) of the C zations? fers from the reporting f | ode (other than | section 501(c)(3) | organizations) | g with) or in | any othe section | er orga 527, r | inization elating | described to politica | 3 | Yes | No |
| а | _ | ash | | | | | | | | | 1a(1) | | х |
| | | ther assets | | | | | | | | | | | X |
| b | Other | transactions | | | | | | | | | | | |
| | | ales of assets to a nonc | | | | | | | | | | | X |
| | | urchases of assets from | | | | | | | | | | | X |
| | | ental of facilities, equipm | | | | | | | | | | | $\frac{\lambda}{x}$ |
| | | eimbursement arrangem | | | | | | | | | | | X |
| | | oans or loan guarantees erformance of services | | | | | | | | | | | X |
| c | | ng of facilities, equipmen | | | | | | | | | | | Х |
| d | | answer to any of | | | | | | | | | | faır | market |
| | | of the goods, other | | | | | | | | | | | |
| | value | in any transaction o | r sharing arran | gement, show in c | olumn (d) th | e value | of the | goods | , other | assets, o | r servic | es re | ceived |
| (a) | Line no | (b) Amount involved | (c) Name of | noncharitable exempt org | anization | (d) De: | scription o | of transfe | rs, transac | ctions, and s | hanng am | ingeme | ents |
| | _ | N/A | | | | N/A | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | <u>-</u> | | | | | | | | | |
| | | | | | | | | _ | | • | | | |
| | | | | | | | | | | | | • | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | • | | | |
| | | | | | | | - | | | _ | _ | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | - | | | | | | | | |
| | | | | <u> </u> | | | | | | | | | |
| | | | | <u>.</u> | | | | | | | | | |
| 2a | ls the | foundation directly or | indirectly affilia | ated with, or related | to, one or m | nore tax- | exempt | organiz | ations d | escribed ii | n | | |
| | | n 501(c) of the Code (ot | | | | | | | | | 1 1 | es 🔃 | X No |
| | If "Ye | s," complete the following | | | | Т | | | | | | | |
| | | (a) Name of organization | n | (b) Type of | organization | | | (0 |) Descrip | tion of relation | onsnip | | |
| | <u> </u> | | | | | + | | | | | | - | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | Under | penalties of perjury, I dec | lare that I have ex | amined this return, included | iding accompa | nying scho | edules and | d statem | ents, and | to the bes | t of my k | nowled | ige and wiedge |
| | 501101, | | ., | or property (ourse, unem | | ا ہے | h | | | | | | |
| - | _ | - LIVI | | | | 31 | 14/10 | - D- | Dire | NOF | | | |
| ere | Sı | gnature of officer or trustee | | | Deta | Date | 1 | - | Title | Prepare | 's identif | vino | |
| Sign Here | Paid Preparer's Use Only | Preparer's signature | lusa | n Dul | Date 5/6 | 1/a0, | Chec self-e | k if employe | d ► | number page 30 d | (See Sign of the inst | ature o | |
| <i>U</i>) | Palc Prepar Use O | Firm's name (or yours it | ERNST | & YOUNG U.S. | LLP | | 1 | | EN ▶ | 34-656 | | | |
| | ر بِي ا | self-employed), address | | | SUITE 80 | 0 | | | | <u> </u> | | | |

Phone no 864-242-5740

and ZIP code

29601

GREENVILLE, SC

JOHN W. HENRY FAMILY FOUNDATION, INC

20-1555835

ATTACHMENT 9

Schedule D Detail of Long-term Capital Gains and Losses

| | Date | Date | Gross Sales | Cost or Other | Long-term |
|--|----------|------------|-------------|---------------|-----------|
| Describion | nalinhav | 5000 | 2 | 200 | |
| CAPITAL GAINS (LOSSES) FROM SECURITIES | | | | | |
| | | | | | |
| U S TREAS BILLS 2-19-09 MATURED | UNKNOWN | 02/19/2009 | 4,500,004 | 4,500,004 | |
| TOTAL CAPITAL GAINS (LOSSES) FROM SECURITIES | | | 4,500,004 | 4,500,004 | |
| | | | | | |
| | | | 4,500,004 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Totals | | | | 4,500,004 | 0 |
| | | | | | |

JSA 8F0970 2 000

PAGE 26 ATTACHMENT 9

708541 2776

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES PER BOOKS 57.

DESCRIPTION U.S. TREASURY REFUND

TOTALS

57.

ATTACHMENT 2

| ٠ | CHARITABLE | 2,718. | 2,718. |
|---------------------------------|---|------------------|--------|
| | ADJUSTED NET INCOME | | 0. |
| | NET INVESTMENT INCOME | | 0 |
| | REVENUE AND EXPENSES PER BOOKS | 2,718. | 2,718. |
| - LEGAL FEES | | | TOTALS |
| FORM 990PF, PART I - LEGAL FEES | DESCRIPTION | KATZ BASKIES LLC | |

| FEES | |
|------------|--|
| ACCOUNTING | |
| - 미 | |
| ⊣∥ | |
| PART | |
| 990PF, | |
| FORM | |

| CHARITABLE PURPOSES | 3,000. |
|---|---------------|
| ADJUSTED NET INCOME | |
| NET INVESTMENT INCOME | 0 |
| REVENUE AND EXPENSES PER BOOKS | 3,000. |
| | TOTALS |
| DESCRIPTION | ERNST & YOUNG |

ᠬ

ATTACHMENT

PAGE 18

| FXPFNSFS |
|----------|
| OTHER |
| 1 |
| — |
| PART |
| Д |
| 균. |
| 균. |
| 균. |
| Ŀ |
| 990 P. |
| 990 P. |
| 균. |

| | | П | INCOME | | | 1,954. | | |
|---------|-----|----------|-------------|-------------|----------------------|-----------|-------------|--|
| REVENUE | AND | EXPENSES | PER BOOKS | 811. | 562. | 1,954. | 131. | |
| | | | DESCRIPTION | FILING FEES | DUES & SUBSCRIPTIONS | BANK FEES | PAYROLL FEE | |

TOTALS

| CHARITABLE PURPOSES 811. 562. | 131. |
|-------------------------------|------|
|-------------------------------|------|

1,504.

FORM 990PF, PART VIII

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

| • | • 0 | | | | | | |
|---|--|--|--|---|--|---|--------------|
| EXPENSE ACCT AND OTHER ALLOWANCES |) | | | J | ~ | J | |
| CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | | o | | | 0 | .0 | 0 |
| COMPENSATION | .0 | .0 | .0 | .0 | · 0 | .0 | 0 |
| TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | PRESIDENT / DIRECTOR 1.00 | SECRETARY / DIRECTOR 1.00 | TREASURER 1.00 | DIRECTOR 2.00 | DIRECTOR 1.00 | DIRECTOR 1.00 | GRAND TOTALS |
| NAME AND ADDRESS | JOHN W. HENRY 301 YAMATO ROAD, SUITE 2200 BOCA RATON, FL 33431 | EDWIN TWIST 301 YAMATO ROAD, SUITE 2200 BOCA RATON, FL 33431 | HAROLD TALISMAN 301 YAMATO ROAD, SUITE 2200 BOCA RATON, FL 33431 | CHARLOTTE VENA 301 YAMATO ROAD, SUITE 2200 BOCA RATON, FL 33431 | LINDA PIZUTTI 301 YAMATO ROAD, SUITE 2200 BOCA RATON, FL 33431 | DAVID GINSBERG 301 YAMATO ROAD, SUITE 2200 BOCA RATON, FL 33431 | |

Ŋ

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

MARY JO DEVINE 301 YAMATO ROAD SUITE 2200 BOCA RATON, FL 33341 561-912-0831

| ı | | | |
|---|--|--|--|
| | | | |
| l | | | |
| l | | | |
| l | | | |
| l | | | |
| l | | | |
| l | | | |
| l | | | |
| l | | | |
| l | | | |
| l | | | |
| l | | | |
| ŀ | | | |
| l | | | |
| ļ | | | |
| | | | |
| ı | | | |
| l | | | |
| ı | | | |
| ۱ | | | |
| | | | |
| I | | | |
| I | | | |
| l | | | |
| I | | | |
| I | | | |
| I | | | |
| ١ | | | |
| I | | | |
| I | | | |
| ١ | | | |

| RECIPIENT NAME AND ADDRESS | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
|--|--|----------------------------------|---------|
| ACTION AGAINST HUNGER 247 WEST 37TH STREET NEW YORK, NY 10018 | NONE 509(A)(1) | TO FUND OPERATIONS | 5,000 |
| ALS ASSOC MASSACHUSETTS CHAPTER 75 MCNEIL WAY SUITE 310 DEDHAM, MA 02026 | NONE 509(A)(1) | TO FUND OPERATIONS | 1,000 |
| BOCA RATON LITTLE LEAGUE ONE SOUTH OCEAN BLVD SUITE 324 BOCA RATON, FL 33432 | NONE 509(A)(1) | TO FUND OPERATIONS | .009 |
| BOSTON LOCAL DEVELOPMENT CORP. 43 HAWKINS STREET BOSTON, MA 02114 | NONE 509(A)(1) | TO FUND OPERATIONS | 25,000 |
| BOYS & GIRLS CLUB OF BOSTON 50 CONGRESS ST SUITE 730 BOSTON, MA 02109 | NONE 509(A)(1) | TO FUND OPERATIONS | 100,000 |
| BRIDGE OVER TROUBLED WATERS 22 FORBES RD. SUITE 207 BRAINTREE, MA 02184 | NONE 509(A)(1) | TO FUND OPERATIONS | 5,000 |

| YEAR | |
|-------------------|--|
| THE | |
| DURING | |
| PAID | |
| AND CONTRIBUTIONS | |
| AND | |
| - GRANTS | |
| > | |
| PART | |
| 990PF. | |
| FORM | |

| FORM 990RE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR | DURING THE YEAR | ומו | ATTACHMENT 7 (CONT'D) |
|---|---|----------------------------------|-----------------------|
| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND | | • |
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| | NONE | TO FUND OPERATIONS | 25,000 |
| 260 FRANKLIN SIREET SUITE 630 BOSTON, MA 02110 | 509(A) (1) | | |
| CHILDREN'S HOSPITAL LEAGUE | NONE | TO FUND OPERATIONS | 1,000. |
| 300 LONGWOOD AVENUE | 509(A)(1) | | |
| BOSTON, MA 02115 | | | |
| FLORENCE FULLER CHILD DEVELOPMENT CENTER | NONE | TO FUND OPERATIONS | 100,000 |
| 200 N.E 14TH STREET | 509(A)(1) | | |
| BOCA RATON, FL 33432 | | | |
| GEORGE SNOW SCHOLARSHIP FUND | NONE | TO FUND OPERATIONS | 1,000 |
| 998 S FEDERAL HIGHWAY SUITE 206 | 509(A)(1) | | |
| BOCA RATON, FL 33432 | | | |
| LENNY ZAKIM FUND | NONE | TO FUND OPERATIONS | 1,000 |
| 33 ARCH STREET, 26TH FLOOR | 509(A)(1) | | |
| BOSTON, MA 02110 | | | |
| MASSACHUSETTS GENERAL HOSPITAL | NONE | TO FUND OPERATIONS | 1,001,000 |
| 165 CAMBRIDGE STREET, SUITE 600 | 509(A)(1) | | |
| BOSTON, MA 02114 | | | |

ATTACHMENT 7 (CONT'D)

| G THE YEAR | |
|-------------------------------|---|
| THE | |
| DURING | |
| PAID | |
| AND CONTRIBUTIONS PAID DURING | |
| AND | |
| GRANTS / | |
| ١ | |
| 2 | I |
| PART XV | |
| 990PF, | |
| FORM | |

| | | | , |
|--|---|----------------------------------|---------|
| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND | | • |
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| NATIONAL BRAILLE PRESS 88 ST. STEPHEN ST BOSTON, MA 02115 | NONE 509(A)(1) | TO FUND OPERATIONS | 10,000 |
| PERKINS SCHOOL FOR THE BLIND 175 NORTH BEACON ST WATERTOWN, MA 02472 | NONE 509(A)(1) | TO FUND OPERATIONS | 10,000 |
| PINE CREST PREPATORY SCHOOL 2700 ST ANDREWS BLVD BOCA RATON, FL 33434 | NONE 509(A)(1) | TO FUND OPERATIONS | 0,000 |
| ROOM TO GROW 142 BERKELEY STREET BOSTON, MA 02116 | NONE 509(A)(1) | TO FUND OPERATIONS | 5,000 |
| THE BOSTON BALLET 19 CLARENDON STREET BOSTON, MA 02116 | NONE 509 (A) (1) | TO FUND OPERATIONS | 25, 000 |
| THE BREAST CANCER RESEARCH FOUNDATION 60 E. 56TH ST ITH FLOOR NEW YORK, NY 10022 | NONE 509(A)(1) | TO FUND OPERATIONS | 5,000 |

ATTACHMENT 7 (CONT'D)

| | l |
|------------|----|
| | ì |
| | ı |
| Ä | ı |
| EAR | 1 |
| 7 | ı |
| THE | ı |
| • | I |
| ING | ı |
| Y. | I |
| DUR | ı |
| AID DURING | I |
| 11 | I |
| PA | I |
| S | I |
| ONS | I |
| TI | I |
| BUTIONS | I |
| RI | I |
| Ξ | l |
| S | l |
| _ | ı |
| AND | ľ |
| A | I |
| ANTS , | l |
| AN | I |
| GR | I |
| 1 | I |
| > | ı |
| × | ı |
| PART | 1 |
| PAI | ı |
| - | |
| Ĕ, | ı |
| OPF | 11 |
| 99 | I |
| Σ | I |
| OR | H |
| ū | II |
| | |

| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | | |
|--|---|----------------------------------|--------|
| | AND | | • |
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| | | | |
| THE FEDERATION OF MASS. FARMER'S MARKETS | NONE | TO FUND OPERATIONS | 5,000 |
| 240 BEAVER STREET | 509(A)(1) | | |
| МА <u>ГТНАМ,</u> МА 02452 | | | |
| THE TREASURE BOX PROJECT, INC | NONE | TO FUND OPERATIONS | 200 |
| P.O BOX 6592 | 509(A)(1) | | |
| DELRAY BEACH, FL 33482 | | | |
| THE WOMEN'S LUNCH PLACE | NONE | TO FUND OPERATIONS | 5,000 |
| 67 NEWBURY STREET | 509(A)(1) | | |
| BOSTON, MA 02116 | | | |
| VOLUNTEERS FOR THE HOMEBOUND | NONE | TO FUND OPERATIONS | 10,000 |
| 3998 FAU BLVD. SUITE # 307 | 509(A)(1) | | |
| BOCA RATON, FL 33431 | | | |
| YMCA OF GREATER BOSTON | NONE | TO FUND OPERATIONS | 25,000 |
| 316 HUNTINGTON AVENUE | 509(A)(1) | | |
| BOSTON, MA 02115 | | | |
| YMCA OF SOUTH PALM BEACH COUNTY | NONE | TO FUND OPERATIONS | 1,500 |
| 6631 PALMETTO CIRCLE SOUTH | 509(A)(1) | | |
| BOCA RATON, FL 33433 | | | |

TOTAL CONTRIBUTIONS PAID

1,373,600.

FORM 990PE. PART XV - CONTRIBULIONS APPROVED FOR FUTURE PAYMENT

9-60 A

| CONTRIBUTOR | |
|-------------|--|
| TIAL | |
| 3 | |
| STA | |
| SUBS | |
| D D | |
| d I | |
| SH | |
| LATION | |
| LAI | |
| æ | |
| | |
| | |
| | |

AND

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

465 HUNTINGTON AVENUE MUSEUM OF FINE ARTS

BOSTON, MA 02115

509(A)(1)

NONE

PURPOSE OF GRANT OR CONTRIBUTION

\$25,000 PER YEAR (CONCLUDING THIS YEAR)

25,000

AMOUNT

ATTACHMENT 8

TOTAL CONTRIBUTIONS APPROVED

25,000

PAGE 25 ATTACHMENT 8

708541 2776