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

OMB No 1545-0052

2009

Department of the Treasury  
Internal Revenue Service

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2009, or tax year beginning , 2009, and ending

G Check all that apply ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return  
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type See Specific Instructions	Name of foundation <b>LUKE CHARITABLE FOUNDATION</b>		A Employer identification number <b>20-2597824</b>
	Number and street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number (see the instructions) <b>(617) 770-7688</b>
	<b>333 ROOSEVELT AVE</b>		C If exemption application is pending, check here <input type="checkbox"/>
	City or town	State ZIP code	D 1 Foreign organizations, check here <input type="checkbox"/>
	<b>PAWTUCKET</b>	<b>RI 02860</b>	2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ <b>3,726,336.</b>	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE	1 Contributions, gifts, grants, etc., received (att sch)				
	2 Ck <input checked="" type="checkbox"/> if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments	68.	68.	68.	
	4 Dividends and interest from securities	115,004.	115,004.	115,004.	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain/(loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
ADMINISTRATIVE EXPENSES	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	115,072.	115,072.	115,072.	
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule) L-16a Stmt	960.			960.
	b Accounting fees (attach sch)				
	c Other prof fees (attach sch)				
17 Interest					
18 Taxes (attach schedule X see instr) See Line 18 Stmt	12,323.	12,323.	12,323.		
19 Depreciation (attach sch) and depletion					
20 Occupancy					
21 Travel, conferences, and meetings	1,485.			1,485.	
22 Printing and publications					
23 Other expenses (attach schedule) See Line 23 Stmt	38,776.	28,676.	28,676.	10,100.	
24 Total operating and administrative expenses. Add lines 13 through 23	53,544.	40,999.	40,999.	12,545.	
25 Contributions, gifts, grants paid	159,994.			159,994.	
26 Total expenses and disbursements. Add lines 24 and 25	213,538.	40,999.	40,999.	172,539.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-98,466.				
b Net investment income (if negative, enter -0-)		74,073.			
c Adjusted net income (if negative, enter -0-)			74,073.		

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**Part II Balance Sheets**

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>A S S E T S</b>	1 Cash — non-interest-bearing	74,017.	89,256.	89,256.
	2 Savings and temporary cash investments	305,690.	183,812.	183,812.
	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 the instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U.S. and state government obligations (attach schedule)	848,855.	997,345.	1,018,920.
	b Investments — corporate stock (attach schedule)	1,929,852.	1,709,802.	2,064,165.
	c Investments — corporate bonds (attach schedule)	319,490.	268,612.	242,806.
	11 Investments — land, buildings, and equipment basis			
<b>L I A B I L I T I E S</b>	Less accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans	191,019.	123,260.	127,377.
	13 Investments — other (attach schedule)			
	14 Land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)			
	15 Other assets (describe )			
	16 <b>Total assets</b> (to be completed by all filers — see instructions. Also, see page 1, item I)	3,668,923.	3,372,087.	3,726,336.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
<b>N E T F U N D A S S E T B A L A N C E S</b>	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe )			
	23 <b>Total liabilities</b> (add lines 17 through 22)			
	<b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
<b>O T H E R S</b>	28 Paid-in or capital surplus, or land, building, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	3,668,923.	3,372,087.	
	30 <b>Total net assets or fund balances</b> (see the instructions)	3,668,923.	3,372,087.	
	31 <b>Total liabilities and net assets/fund balances</b> (see the instructions)	3,668,923.	3,372,087.	

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	3,668,923.
2 Enter amount from Part I, line 27a	2	-98,466.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	3,570,457.
5 Decreases not included in line 2 (itemize) <b>REALIZED LOSS FROM SALE OF SECURITIES</b>	5	198,370.
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	3,372,087.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a PUBLICLY TRADED SEC-JESUP & LAMONT A/C 18953121		P	various	Various
b PUBLICLY TRADED SEC-JESUP & LAMONT A/C 84738445		P	Various	Various
c PUBLICLY TRADED SEC-JESUP & LAMONT A/C 25483752		P	Various	Various
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 645,825.		788,317.	-142,492.
b 177,518.		232,160.	-54,642.
c 769,515.		770,751.	-1,236.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			-142,492.
b			-54,642.
c			-1,236.
d			
e			

2 Capital gain net income or (net capital loss).	— [ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ]	2	-198,370.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	— [ If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0- in Part I, line 8 ]	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☒ Yes☐ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008			
2007			
2006			
2005			
2004			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructions)**

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary – see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	1,481.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	1,481.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	1,481.
6 Credits/Payments			
a 2009 estimated tax pmts 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)	6c	5,000.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	5,000.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	28.	
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	3,491.	
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> 3,491. Refunded <input type="checkbox"/>	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities		X
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		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T		X
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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) <input type="checkbox"/>		
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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		X

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**Part 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 instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	13	X	
14	The books are in care of <u>BOBBY LAU</u> Telephone no <u>(781) 848-5028</u> Located at <u>400 CROWN COLONY DR QUINCY, MA</u> ZIP + 4 <u>02169</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u>			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

	Yes	No
<b>1 a</b> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1 b	
<b>c</b> 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?	1 c	X
<b>2</b> 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))		
<b>a</b> At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes,' list the years <u>20 08</u> , <u>20</u> , <u>20</u> , <u>20</u>		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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 the instructions)	2 b	X
<b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>		
<b>3 a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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	
<b>4 a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4 b	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)****5a** During the year did the foundation pay or incur any amount to(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No(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(d)(2)? (see instructions) ☐ Yes ☒ No(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No**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 instructions)?Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If 'Yes' to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?**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 instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CHIU YIP 71 WINGATE RD PROVIDENCE RI 02906	TRUSTEE	0.00	0.	0.
TZE PING NG 76 MIDDLE RD E GREENWICH, RI 02818	TRUSTEE	0.00	0.	0.
ROBERT BILLINGTON C CUMBERLAND RI 02865	TRUSTEE	0.00	0.	0.
See Information about Officers, Directors, Trustees, Etc.		0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1— see instructions). 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
NONE				
0				
0				
0				
0				

Total number of other employees paid over \$50,000.

None

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services – (see instructions). If none, enter 'NONE.'

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		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 beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	0.
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	0.
2	
All other program-related investments See instructions.	
3	
Total. Add lines 1 through 3	None

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**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
a Average monthly fair market value of securities	1a	3,190,973.
b Average of monthly cash balances	1b	281,760.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	3,472,733.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	3,472,733.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	52,091.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,420,642.
6 Minimum investment return. Enter 5% of line 5	6	171,032.

**Part XI** Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1 Minimum investment return from Part X, line 6	1	171,032.
2a Tax on investment income for 2009 from Part VI, line 5	2a	1,481.
b Income tax for 2009. (This does not include the tax from Part VI)	2b	
c Add lines 2a and 2b	2c	1,481.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	169,551.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	169,551.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	169,551.

**Part XII** Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	172,539.
b Program-related investments — total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	172,539.
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 instructions)	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	172,539.

**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

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				169,551.
2 Undistributed income, if any, as of the end of 2009.				
a Enter amount for 2008 only			169,505.	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2009				
a From 2004	0.			
b From 2005	0.			
c From 2006	0.			
d From 2007	0.			
e From 2008	0.			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 172,539.				
a Applied to 2008, but not more than line 2a			169,505.	
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2009 distributable amount				3,034.
e Remaining amount distributed out of corpus	0.			
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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				166,517.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005	0.			
b Excess from 2006	0.			
c Excess from 2007	0.			
d Excess from 2008	0.			
e Excess from 2009	0.			

**Part IV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

**1** a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling **03/13/05**

**b** Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> 'Assets' alternative test — enter					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
<b>c</b> 'Support' alternative test — enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year — see instructions.)**1 Information Regarding Foundation Managers:**

**a** 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) (See section 507(d)(2) )

NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:**

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

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

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i>				
BLACKSTONE TOURIST COUNCIL-RI CHINESE DRAGON BOAT RACE 175 MAIN ST PAWTUCKET RI 02865		501 (C)	CHINESE COMMUNITY EVENT	45,000.
RI ASSOC OF CHINESE AMERICANS 48 BLACKSTONE BLVD PAWTUCKET RI 02865		501 (C)	OPERATING FUND CHARITABLE	7,920.
BROWN UNIVERSITY 164 ANGELL ST PROVIDENCE RI 02912		501 (C)	OPERATING	40,000.
PAWTUCKET FOUNDATION 210 WEST AVE PAWTUCKET RI 02865		501 (C)	OPERATING	10,000.
CULTURE REGENERATION RESEARCH SOCIETY PO BOX 1147 FREEMONT CA 94555		501 (C)	OPERATING	10,000.
CHINESE CHRISTIAN CHURCH 333 ROOSEVELT AVE PAWTUCKET RI 02860		501 (C)	OPERATING	18,000.
INTERNATIONAL INSTITUTE 645 ELMWOOD AVE PROVIDENCE RI 02907		501 (C)	OPERATING	6,000.
BRYANT UNIVERSITY DOUGLAS PIKE SMITHFIELD RI 02828		501 (C)	OPERATING	1,800.
COMMUNITY COLLEGE OF RI 1762 LOUISQUISSET PIKE LINCOLN RI 02865		501 (C)	OPERATING	8,000.
See Line 3a statement				13,274.
<b>Total</b>			<b>3a</b>	<b>159,994.</b>
<i>b Approved for future payment</i>				
<b>Total</b>			<b>3b</b>	

## **Part XVI-A – Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1	Program service revenue.					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			4	68.	
4	Dividends and interest from securities			4	115,004.	
5	Net rental income or (loss) from real estate.					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			6		
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue					
a						
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)				115,072.	
13	Total. Add line 12, columns (b), (d), and (e)				13	115,072.

(See worksheet in the instructions for line 13 to verify calculations.)

## **Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

[illegible]



Form 990-PF, Page 1, Part I, Line 18

**Line 18 Stmt**

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
FOREIGN TAX PAID	33.	33.	33.	
FEDERAL TAX	12,290.	12,290.	12,290.	

Total 12,323. 12,323. 12,323.

Form 990-PF, Page 1, Part I, Line 23

**Line 23 Stmt**

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
PORTFOLIO FEES	28,676.	28,676.	28,676.	
BANK CHARGES	100.			100.
MANAGEMENT FEES	10,000.			10,000.

Total 38,776. 28,676. 28,676. 10,100.

Form 990-PF, Page 6, Part VIII, Line 1

**Information about Officers, Directors, Trustees, Etc.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> SHIRLEY WU 5 WAKE ROBIN RD LINCOLN RI 02865	TRUSTEE 0.00	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> NAI CHE TSAI W WARWICK RI 02886	TRUSTEE 0.00	0.	0.	0.

Total

0. 0. 0.

Form 990-PF, Page 11, Part XV, line 3a

**Line 3a statement**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox  Amount
<b>a</b> <i>Paid during the year</i>				
PAWTUCKET SCHOOL DEPT 137 ROOSEVELT AVE PAWTUCKET RI 02860		501 (C)	OPERATING	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 5,000.
FIRSTWORKS 270 WESTMINSTER ST PROVIDENCE RI 02903		501 (c)	OPERATING	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 1,074.
SHOWERS OF BLESSING 3536 ARDEN RD HAYWARD CA 94545		501 (c)	OPERATING CHRISTIAN CHURCH COMPANY	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 5,000.
OVERSEAS CHINESE ASSN NE CHAPTER PO BOX 644 BELMONT MA 22478		501 (C)	OPERATING	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 2,200.

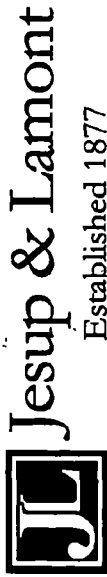
Total

13,274.



As of Date: 2/05/10

## Realized Gain/Loss



Account Number: 1895-3121  
 LUKE CHAR. FOUNDATION; LOUIS  
 YIP, TZE PING NG, R BILLINGTON  
 S WU & N TSAI, TTEES (LCM)

Short Term	Continued	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
DESCRIPTION								
MASTERCARD INC CL A		21.0000	67.2900	06/24/09	08/26/09	1,509.04	1,413.09	95.95
MONSANTO CO NEW		33.0000	164.0756	04/17/09	12/21/09	8,433.51	5,414.50	3,019.01
NETFLIX COM INC		85.0000	66.1518	12/22/08	10/12/09	6,491.95	5,622.91	869.04
NYSE EURONEXT		77.0000	39.4270	03/09/09	12/21/09	4,118.79	3,035.88	1,082.91
		110.0000	57.3999	06/24/08	02/13/09	2,106.00	6,314.00	-4,208.00
		295.0000	25.6274	12/22/08	02/13/09	5,647.93	7,560.10	-1,912.17
PRICELINE COM INC								
COM NEW		32.0000	78.1060	03/19/09	06/24/09	3,409.51	2,499.40	910.11
		32.0000	78.1060	03/19/09	08/13/09	4,788.22	2,499.40	2,288.82
		35.0000	78.1060	03/19/09	12/21/09	7,617.29	2,733.71	4,883.58
QUALCOMM INC		100.0000	47.7810	09/15/08	06/24/09	4,473.88	4,778.11	-304.23
RESEARCH IN MOTION								
LTD		88.0000	48.2787	02/11/09	06/24/09	6,296.23	4,248.53	2,047.70
ROSS STORES INC								
(CALIF)		232.0000	24.9217	12/01/08	06/24/09	8,850.57	5,781.84	3,068.73
SCHWAB CHARLES CORP NEW		221.0000	15.2129	11/18/08	06/24/09	3,825.41	3,362.06	463.35
US BANCORP NEW		180.0000	29.8876	06/24/08	03/04/09	1,972.44	5,379.77	-3,407.33
WATERS CORPORATION		195.0000	36.3692	12/22/08	03/19/09	6,343.33	7,092.01	-748.68
WELLS FARGO COMPANY		665.0000	25.2182	06/24/08	06/24/09	15,287.89	16,770.10	-1,482.21
<b>Total - Short Term</b>						<b>\$268,651.47</b>	<b>\$261,830.19</b>	<b>\$6,821.28</b>

## Realized Gain/Loss

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As of Date: 2/05/10

Account Number: 1895-3121  
 LUKE CHAR. FOUNDATION; LOUIS  
 YIP, TZE PING NG, R BILLINGTON  
 S WU & N TSAI, TTEES (LCM)

Long Term						
DESCRIPTION	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST
AGRIUM INC	193.0000	65.9858	12/21/07	06/24/09	7,991.92	12,735.27
	80.0000	65.9858	12/21/07	12/21/09	4,800.26	5,278.87
AMERICAN TOWER CORP CL A	175.0000	21.2500	07/19/05	12/21/09	7,439.63	3,718.75
AMPHENOL CORP NEW CL A	130.0000	31.2992	10/04/06	06/24/09	4,037.69	4,068.89
	37.0000	31.8550	12/19/06	06/24/09	1,149.19	1,178.64
	121.0000	31.8550	12/19/06	12/21/09	5,296.94	3,854.46
APPLE INC	89.0000	37.6900	07/07/05	06/24/09	12,052.96	3,354.41
	7.0000	37.6900	07/07/05	08/13/09	1,173.23	263.83
	6.0000	37.6900	07/07/05	12/21/09	1,177.39	226.14
	14.0000	57.8880	06/27/06	12/21/09	2,747.26	810.44
AUTODESK INC	105.0000	42.1679	09/16/05	06/24/09	2,077.89	4,427.63
BP PLC SPONS ADR	83.0000	67.6471	12/19/06	06/24/09	3,915.83	5,614.72
CITRIX SYSTEM INC	292.0000	22.1700	07/07/05	06/24/09	9,092.64	6,473.64
CME GROUP INC	34.0000	293.3900	07/07/05	06/24/09	10,397.27	9,975.26
	31.0000	293.3900	07/07/05	11/09/09	9,613.51	9,095.09
	10.0000	535.7000	06/27/07	11/09/09	3,101.13	5,357.00
	5.0000	436.2500	06/24/08	11/09/09	1,550.56	2,181.25
DEERE & CO	82.0000	89.9158	01/07/08	12/21/09	4,518.69	7,373.11
DU PONT E.I. DE NEMOURS AND COMPANY	2,154.0000	43.0886	12/20/07	06/24/09	53,282.76	92,812.89
FLIR SYSTEMS INC	775.0000	41.0144	07/30/08	08/10/09	16,680.99	31,786.19
FLOWSERVE CORP	129.0000	100.4579	03/12/08	06/24/09	9,236.16	12,959.08
	34.0000	100.4579	03/12/08	12/21/09	3,329.46	3,415.57
						-86.11
						-3,722.92
						-15,105.20
						-2,854.42
						-630.69
						518.42
						422.01
						2,619.00
						-1,698.89
						-2,349.74
						1,936.82
						951.25
						909.40
						8,698.55
						1,442.48
						-29.45
						-31.20

172 / JWF1 / FIG1





## Realized Gain/Loss

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As of Date: 2/05/10

Account Number: 1895-3121  
 LUKE CHAR. FOUNDATION; LOUIS  
 YIP, TZE PING NG, R BILLINGTON  
 S WU & N TSAI, TTEES (LCM)

Long Term DESCRIPTION	Continued	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
WATERS CORPORATION		230.0000	31.8400	07/23/07	03/04/09	2,520.33	7,323.20	-4,802.87
		430.0000	60.2689	05/09/07	03/19/09	13,987.81	25,915.62	-11,927.81
		20.0000	62.1600	07/23/07	03/19/09	650.59	1,243.20	-592.61
WELLS FARGO COMPANY		1,517.0000	29.9457	12/20/07	06/24/09	34,874.78	45,427.70	-10,552.92
Total - Long Term						\$377,173.17	\$526,487.00	-\$149,313.83

REDEMPTIONS

602189  
383195.06  
 602189  
532508.89



INDEPENDENT PORTFOLIO CONSULTA  
PORTVUE - LUKCAI LSK

SCHEDULE OF REALIZED GAINS AND LOSSES  
LUKE CHARITABLE FOUNDATION (CAI)

FOR THE PERIOD FROM 01/01/09 THROUGH 12/31/09

SECURITY DESCRIPTION	ORIGINAL COST	PURCHASE DATE	PROCEEDS	SALE DATE	GAIN OR (-LOSS)
VIRGINIA ST HSG DEV AUTH 6 000% 03/25/38	254 30	03/31/08	256.42	01/26/09	2 12
VIRGINIA ST HSG DEV AUTH 6 000% 03/25/38	512 08	03/31/08	516 36	02/25/09	4 28
VIRGINIA ST HSG DEV AUTH 6 000% 03/25/38	817 01	03/31/08	823.83	03/25/09	6 82
IBM CORP SR NT 6 500% 10/15/13	50,878 00	10/15/08	55,900 00	05/07/09	5,022.00
HOUSTON TX AIRPORT REV 6 880% 01/01/28	97,325 00	05/07/09	97,500 00	06/26/09	175 00
WAYNE MI ARPT AUTH REV 4.750% 12/01/19	89,657 00	06/03/09	98,750.00	09/24/09	9,093 00
PENNSYLVANIA HSG FIN P/C 5 724% 10/01/09	4,831 25	03/11/09	5,000 00	10/01/09	168 75
SHORT-TERM TOTAL	\$ 244,274 64	\$	258,746.61	\$	14,471 97

SHORT-TERM  
=====

INDEPENDENT PORTFOLIO CONSULTA  
PORTVUE - LUKCAI LSK

SCHEDULE OF REALIZED GAINS AND LOSSES  
LUKE CHARITABLE FOUNDATION (CAI)

FOR THE PERIOD FROM 01/01/09 THROUGH 12/31/09

LONG-TERM	SECURITY DESCRIPTION	ORIGINAL COST	PURCHASE DATE	PROCEEDS	SALE DATE	GAIN OR (-LOSS)
=====	=====	=====	=====	=====	=====	=====
136	FNMA PASS THRU POOL 357843 6.000% 07/01/35	136 90	08/27/07	136.35	01/26/09	-0 55
388	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	387 17	03/03/06	388.02	01/26/09	0 85
916	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	929 30	08/16/05	915 57	01/26/09	-13 73
1 262	FNMA PASS THRU POOL 357843 6.000% 07/01/35	1 266 99	08/27/07	1 261 86	02/25/09	-5 13
390	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	389 14	03/03/06	389 99	02/25/09	0 85
920	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	933 57	08/16/05	919 77	02/25/09	-13 80
127	FNMA PASS THRU POOL 357843 6.000% 07/01/35	127 85	08/27/07	127 33	03/25/09	-0 52
6 881	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	6 866 01	03/03/06	6 881 06	03/25/09	15 05
924	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	937 84	08/16/05	923 98	03/25/09	-13 86
60 000	ARKANSAS ST DEV FIN P/C 5.380% 04/01/09	60 000 00	08/04/05	60 000 00	04/01/09	0 00
125	FNMA PASS THRU POOL 357843 6.000% 07/01/35	125 06	08/27/07	124 55	04/27/09	-0 51
5 328	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	5 316 05	03/03/06	5 327 70	04/27/09	11 65
928	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	942 13	08/16/05	928 21	04/27/09	-13 92
856	VIRGINIA ST HSG DEV AUTH 6.000% 03/25/38	848 44	03/31/08	855 52	04/27/09	7 08
125 000	VIRGINIA ST HSG DEV AUTH 6.510% 05/01/19	132 875 00	08/05/05	126 250 00	05/01/09	-6 625 00
100 000	VIRGINIA STATE HSG DEV AUTH 6.375% 05/01/10	105 846 00	08/15/05	101 000 00	05/01/09	-4 846 00
6 306	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	6 292 06	03/03/06	6 305 85	05/26/09	-0 53
932	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	946 46	08/27/07	932 47	05/26/09	13 79
814	VIRGINIA ST HSG DEV AUTH 6.000% 03/25/38	807 31	03/31/08	814 05	05/26/09	-13 99
50 000	MULTNOMAH CNTY OR LTD TAX 7.150% 06/01/09	54 098 50	10/06/05	50 000 00	06/01/09	6 74
2 674	FNMA PASS THRU POOL 357843 6.000% 07/01/35	2 685 24	08/27/07	2 674 38	06/25/09	-4 098 50
1 874	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	1 869 51	03/03/06	1 873 61	06/25/09	-10 86
937	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	950 79	08/16/05	936 74	06/25/09	4 10
884	VIRGINIA ST HSG DEV AUTH 6.000% 03/25/38	876 93	03/31/08	884 25	06/25/09	-14 05
5 070	FNMA PASS THRU POOL 357843 6.000% 07/01/35	5 090 74	08/27/07	5 070 14	07/27/09	7 32
1 874	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	1 870 30	03/03/06	1 874 40	07/27/09	-20 60
941	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	955 16	08/16/05	941 04	07/27/09	4 10
782	VIRGINIA ST HSG DEV AUTH 6.000% 03/25/38	775 18	03/31/08	781 65	07/27/09	-14 12
122	FNMA PASS THRU POOL 357843 6.000% 07/01/35	122 30	08/27/07	121 81	08/25/09	6 47
1 538	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	1 534 62	03/03/06	1 537 98	08/25/09	-0 49
945	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	959 53	08/16/05	945 35	08/25/09	3 36
989	VIRGINIA ST HSG DEV AUTH 6.000% 03/25/38	980 56	03/31/08	988 75	08/25/09	-14 18
2 498	FNMA PASS THRU POOL 357843 6.000% 07/01/35	2 507 89	08/27/07	2 497 74	09/25/09	8 19
850	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	848 59	03/03/06	850 45	09/25/09	-10 15
950	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	963 93	08/16/05	949 68	09/25/09	1 86
590	VIRGINIA ST HSG DEV AUTH 6.000% 03/25/38	585 30	03/31/08	590 19	09/25/09	-14 25
2 361	FNMA PASS THRU POOL 357843 6.000% 07/01/35	2 371 08	08/27/07	2 361 49	09/25/09	4 89
816	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	814 22	03/03/06	816 01	10/26/09	-9 59
954	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	968 35	08/16/05	954 04	10/26/09	-14 31
367	VIRGINIA ST HSG DEV AUTH 6.000% 03/25/38	364 08	03/31/08	367 12	10/26/09	3 04
2 779	FNMA PASS THRU POOL 357843 6.000% 07/01/35	2 789 93	08/27/07	2 778 64	11/25/09	-11 29
1 341	FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	1 337 67	03/03/06	1 340 60	11/25/09	2 93
958	FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	972 79	08/16/05	958 41	11/25/09	-14 38
368	VIRGINIA ST HSG DEV AUTH 6.000% 03/25/38	364 78	03/31/08	367 83	12/01/09	123 00
100 000	HOFFMAN ESTATES, L.L.C. 4.600% 12/01/09	99 877 00	08/03/05	100 000 00	12/01/09	123 00
1 393	FNMA PASS THRU POOL 357843 6.000% 07/01/35	1 398 34	08/27/07	1 392 68	12/28/09	-5 66

INDEPENDENT PORTFOLIO CONSULTA  
PORTVUE - LUKCAI.LSK

SCHEDULE OF REALIZED GAINS AND LOSSES  
LUKE CHARITABLE FOUNDATION (CAI)

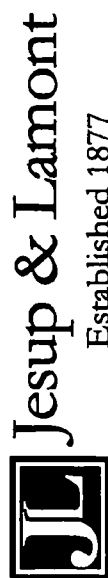
FOR THE PERIOD FROM 01/01/09 THROUGH 12/31/09

SECURITY DESCRIPTION	ORIGINAL COST	PURCHASE DATE	PROCEEDS	SALE DATE	GAIN OR (-LOSS)
1,276 FNMA REMIC POOL# 06-10LC 5.750% 09/25/20	1,272 83	03/03/06	1,275 62	12/28/09	2 79
9,605 FNMA REMIC TRUST 2002-55 VA 5.500% 08/25/13	9,748 87	08/16/05	9,604 80	12/28/09	-144 07
421 VIRGINIA ST HSG DEV AUTH 6.000% 03/25/38	417 56	03/31/08	421 05	12/28/09	3.49
LONG-TERM TOTAL	\$ 526,475 78		\$ 510,768 13		\$ -15,707 65





## Realized Gain/Loss



Account Number: 8473-8445  
 LUKE CHAR. FOUNDATION; LOUIS  
 YIP, TZE PING NG, R BILLINGTON  
 S WU & N TSAI, TTEES (LGA)

Long Term DESCRIPTION	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
AIRGAS INC	89.0000	46.8214	11/27/07	03/23/09	2,810.16	4,167.10	-1,356.94
	4.0000	46.8214	11/27/07	06/22/09	160.51	187.29	-26.78
	5.0000	46.8214	11/27/07	07/24/09	204.99	234.10	-29.11
	80.0000	48.7069	11/29/07	07/24/09	3,279.92	3,896.56	-616.64
BAIDU INC ADR	7.0000	348.2865	07/31/08	10/28/09	2,735.21	2,437.99	297.22
BMC SOFTWARE INC	3.0000	37.9998	05/20/08	06/22/09	102.29	114.00	-11.71
BURGER KING HLDGS INC	135.0000	24.4417	05/25/07	02/05/09	2,767.48	3,299.63	-532.15
	85.0000	24.4417	05/25/07	04/29/09	1,516.36	2,077.53	-561.17
	1.0000	24.5000	05/29/07	04/29/09	17.84	24.50	-6.66
	49.0000	24.5000	05/29/07	04/30/09	796.22	1,200.50	-404.28
	140.0000	24.8947	05/30/07	04/30/09	2,274.95	3,485.26	-1,210.31
C H ROBINSON WORLDWIDE INC	1.0000	29.3400	07/06/05	06/22/09	49.36	29.34	20.02
	27.0000	29.3400	07/06/05	10/21/09	1,585.12	792.18	792.94
CAMERON INTERNATNL CRP	92.0000	24.6696	09/06/06	11/03/09	3,399.42	2,269.59	1,129.83
	38.0000	23.8452	09/08/06	11/03/09	1,404.12	906.12	498.00
	92.0000	23.8452	09/08/06	11/12/09	3,685.54	2,193.76	1,491.78
CORE LABORATORIES INC	1.0000	109.9000	08/09/07	06/22/09	83.19	109.90	-26.71
	30.0000	109.9000	08/09/07	07/23/09	2,499.44	3,297.00	-797.56
	52.0000	108.8490	08/29/07	07/23/09	4,332.38	5,660.15	-1,327.77
DOLBY LABORATORIES INC CL A	5.0000	34.9894	08/10/07	06/22/09	182.29	174.95	7.34
	5.0000	34.9894	08/10/07	11/05/09	208.20	174.94	33.26
	25.0000	35.0000	08/13/07	11/05/09	1,041.02	875.00	166.02

172 / JWF1 / F1G1





Form **8868**

(Rev April 2009)

Department of the Treasury  
Internal Revenue Service**Application for Extension of Time To File an  
Exempt Organization Return**

OMB No 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶ ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ▶ ☐*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns*

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of Exempt Organization		Employer identification number
	LUKE CHARITABLE FOUNDATION		20-2597824
	Number, street, and room or suite number. If a P.O. box, see instructions.		
	333 ROOSEVELT AVE		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	PAWTUCKET		RI 02860

**Check type of return to be filed** (file a separate application for each return):

- |   |  |                                    |
|---|--|------------------------------------|
| <input type="checkbox"/> Form 990               | <input type="checkbox"/> Form 990-T (corporation)                    | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL            | <input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ            | <input type="checkbox"/> Form 990-T (trust other than above)         | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A                                 | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **BOBBY LAU**

Telephone No ▶ (781) 848-5028

FAX No ▶

- If the organization does not have an office or place of business in the United States, check this box ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ▶ ☐. If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 16, 20 10, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ ☒ calendar year 20 09 or
- ▶ ☐ tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	5,000.
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	5,000.

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.**BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.**

Form 8868 (Rev. 4-2009)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

<b>Type or print</b>  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	LUKE CHARITABLE FOUNDATION	20-2597824
	Number, street, and room or suite number. If a P.O. box, see instructions.	For IRS use only
	333 ROOSEVELT AVE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	PAWTUCKET RI 02860	

**Check type of return to be filed** (File a separate application for each return):

<input type="checkbox"/> Form 990	<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

• The books are in care of **BOBBY LAU**  
 Telephone No. **(781) 848-5028** FAX No. \_\_\_\_\_

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **Nov 15**, 20 **10**.

5 For calendar year **2009**, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_.

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension **Additional time is necessary to accurately reflect security transactions in order to prepare an accurate return**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$	5,000.
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	5,000.
8c <b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs.	8c \$	0.

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **[Signature]** Title **CPA** Date **8/12/10**