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Form	y	9	U	-1	Г

Return of Private Foundation

OMB No 1545-0052

		or tax year beginn	ing					, and endi	<u> </u>		
G Check all t	hat apply	Initial return					of a former p	oublic chai	<u>ıty</u>		Final retur
	Managar Artau	Amended ref	turn		1 /	Addres	ss change		1	Name change	· · · · · · · · · · · · · · · · · · ·
	Name of fou	indation								A Employer identific	cation number
Use the IRS label.	DAVID F	. & KAREN K.	ጥዘብ	MAS FO	מחואוור	TT ∩N				20-	5681086
Otherwise,		street (or P O box nu						Room/su	ıto.	B Telephone number (see	
print		ID F. THOMAS		mai is not c	acavered (o succi	addicasj	100111/30	ııc	B (elephone number (see	bage to ot me ment
or type		CHASE STREET								(21	.2) 752-6
See Specific Instructions	City or town	, state, and ZIP code						·		C If exemption applica	ition is
msuucuons	,									pending, check here D 1 Foreign organizat	
	RYE, NY	10580								2 Foreign organizat	
Check type	of organiza	ition X Section	501(c)(3) exe	mpt pri	vate f	oundation			85% test, check h	
Section 4	947(a)(1) no	nexempt charitable tr	ust	Oth	er taxa	ble pr	ıvate founda	tion		E If private foundation	
Fair marke	t value of all	assets at end		unting m				crual		under section 507(b)	
• •	m Part II, co		Ot	her (spe	cify)					F If the foundation is	ın a 60-month tem
16) ▶ \$				column (d) must	be on	cash basis)			under section 507(b)	
Part I Analy	sis of Reve	enue and Expenses tolumns (b), (c), and ((The	(a) Re	venue a	nd	(b) Net inve	estment		c) Adjusted net	(d) Disburs for char
may r	ot necessarily	equal the amounts in	, I		enses per ooks	r	incon		•	ıncome	purpo:
1		ie 11 of the instruction				780.	, ,			· · · · · · · · · · · · · · · · · · ·	(cash bas
1	If the f	etc received (attach schedi foundation is not require	ed to I			, 50,				· -	
2 Check I	(111001	Sch B				852.	<u> </u>	852.			ATCH
1	•	est from securities									
1			1								
i	al income or (lo		[1.3		-			-	- '	· · · · · · · · · · · · · · · · · · ·
6a Net gan		sale of assets not on line	10		1,	816.					
	ales price for all in line 6a	1,8	818.	. ** *.						,	
7 Capita	gain net inco	ome (from Part IV, line	2).	\ <u>*</u>				1,816.			
8 Netsh	ort-term capit	algaın									,
	modification	s · · · · · · · · ·	• • •	· · · ·	* <u> </u>						- "-
and allo	wances · · ·	• •		<u> </u>	(,					
	ost of goods sold										-
		(attach schedule)				-3.		-3.			ATCH
I .		rough 11			28,	445.		2,665.			111011
_		rs, directors, trustees, etc				0.					
14 Other		ries and wages						i			
15 Pensio		oyee benefits	[
16a Legal i	ees (attach so	hedule)	[
b Accoun	iting fees (att	ach schedule)				100					
c Other		ees (attach schedule)	.*			172.		172.			ļ
17 Interes		HMENT 4	٠٠٠}			29.		29.			
16a Legal I b Accour c Other 17 Interes 18 Taxes (19 Depred 20 Occup	ittach schedule)	(see page 14 of the instruc	tions)								
19 Depred	iation (attach	schedule) and deple	ion.	∀Fn	$\overline{-7}$						
20 Occup				4 L U	70						
: 1	conterences, and publica	and meetings	اءِ ۾	0015	<u> छ</u> ू						
23 Other	y and publica expenses (atta	1001 1404	· Z Z	2010	80-9						
5 L -		l administrative:expe	nses		121						
	es 13 through	1 ()()()	FN	117		201.		201.			[
) I	_	grants paid	<u>~ " (</u>	<u>, U 1</u>			-				
	_	rsements Add lines 24 a	ınd 25			201.		201.			
	ct line 26 fror										İ
1		penses and disbursement	٠ ٠ ١		28,	244.		2.454			ļ
l		ome (if negative, ente	· ' I					2,464.			ļ
		e (if negative, enter -0			- 96		<u></u>	וררון פ		-0-	
10 2 000 7 9 7 1	a an d Paperv RN 2532	work Reduction Act 11/12/2010 1	Notice 1 · 4 4	, see pago יא פיס	e30 of th M (/ ∩	ne Insti I Q _ Q	ructions. * A.	ren 9 18	А		Form 990
	2002	/12/2010 1	1.74	A	• 0	٠٥٠					

PAGE 1

E	artil	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year		
-	art n	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	0.	0.	0		
	2	Savings and temporary cash investments					
	3	Accounts receivable					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
		Less allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see page 16 of the instructions)					
	7	Other notes and loans receivable (attach schedule)		,			
		Less allowance for doubtful accounts ▶					
Ø	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ą	10 a	Investments - U S and state government obligations (attach schedule)					
		Investments - corporate stock (attach schedule)					
	С	Investments - corporate bonds (attach schedule)					
	11	Investments - land, buildings, and equipment basis			•		
		Less accumulated depreciation (attach schedule)					
	12	Investments - mortgage loans					
	13	Investments - other (attach schedule) ATCH 5	84,265.	112,509.	106,491		
	14	Land, buildings, and	i i				
		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 i)	84,265.	112,509.	106,491		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
es.	19	Deferred revenue					
≣	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable (attach schedule)					
_	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.		•			
ĕ	24	Unrestricted	,				
Balances	25	Temporarily restricted					
	26	Permanently restricted					
pur		Foundations that do not follow SFAS 117,					
3		check here and complete lines 27 through 31. ▶ X	04.065	110 500			
ō	27	Capital stock, trust principal, or current funds	84,265.	112,509.			
šet	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.				
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.			
Net Assets or	30	Total net assets or fund balances (see page 17 of the	01 265	112 500			
Z		Instructions) Total liabilities and net assets/fund balances (see page 17	84,265.	112,509.			
	31	(pg-	84,265.	112 500			
	art I	of the instructions)		112,509.	L		
		I net assets or fund balances at beginning of year - Part II		rt agree with	<u> </u>		
•					84,265		
2	Ento	of-year figure reported on prior year's return)		· · · · · · · · · · 1	28,244		
2	Othe	r amount from Part I, line 27a		١ ۾	20,244		
3 Other increases not included in line 2 (itemize) ▶							
_	Door	concernational under the O (domino) -		-	112,509		
6	Tota	I net assets or fund balances at end of year (line 4 minus	fine 5) - Part II, column (h	o) line 30 6	112,509		

Form 990-PF (2009)		20-56810	86		Page 3
Part IV Capital Gains	and Losses for Tax on inv	estment Income		<u> </u>	
	d describe the kind(s) of property sold (- -	(b) How acquired P-Purchase	(c) Date acquired	(d) Date sold (mo , day, yr)
CEE DADE THE COUR	rick warehouse, or common stock, 200 :	sns MLC Co)	D-Donation	(mo , day, yr)	(
<u>-14</u>	DOLL				<u> </u>
<u>b</u>					
<u>c</u>			_		
0					
	(f) Depreciation allowed	(g) Cost or other basis		(h) Coro os (la	
(e) Gross sales price	(or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					
b					
d					
Complete only for accets o	howing goin in column (b) and own	and by the foundation on 12/21/60			
Complete only for assets s	howing gain in column (h) and own	'		Gains (Col (h) g (k), but not less t	
(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		Losses (from co	
<u>a</u>					
<u>b</u>					. <u>-</u>
<u>c</u>					
d					
<u>e</u>	. 16	and the second Death Lag 7	1		
2 Capital gain net income or	(net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		1,816.
3. Net short-term capital gain	ا ا or (loss) as defined in sections 12				
	line 8, column (c) (see pages 13				
_	, , , , ,				
Part V Qualification Un	Ine 8	iced Tax on Net Investment Inc	3		
		e section 4940(a) tax on net investi			
(1 of optional use by domestic	private roundations subject to the	e section 4940(a) tax on het investi	nent inco	ine)	
If section 4940(d)(2) applies,	leave this part blank				
ii section 4940(d)(z) applies,	leave this part blank				
Was the foundation liable for	the section 4942 tax on the distrib	utable amount of any year in the b	ase perior	43	Yes X No
	not qualify under section 4940(e)			∟	J 163 [] 110
		, see page 18 of the instructions be	fore mak	ing any entries	· · ·
(a)	(b)	(c)	1010 111011	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2008	0.	83,001.		· · · · · · · · · · · · · · · · · · ·	0.000000
2007	0.	54,523.			0.000000
2006	0.	0.			0.000000
2005					
2004					
					•
2 Total of line 1, column (d)	<u></u>		2		0.00000
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		0.000000
·		,			
4 Enter the net value of nor	charitable-use assets for 2009 fro	m Part X, line 5	4		83,417.
5 Multiply line 4 by line 3	· · · · · · · · · · · · · · · · · · ·		5		0.
		• • • • • • • • • • • • • • • • • • • •	 		
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		25.
7 Add lines 5 and 6			7		_25.
					_
8 Enter qualifying distribution If line 8 is equal to or great VI instructions on page	ons from Part XII, line 4	n Part VI, line 1b, and complete t	8 hat 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	e ins	tructio	ons)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1						
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			49.			
	here and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%						
	of Part I, line 12, col. (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2						
3	Add lines 1 and 2			49.			
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			49.			
6	Credits/Payments	.`					
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 2,500.		•				
	Exempt foreign organizations-tax withheld at source 6b 0.						
	Tax paid with application for extension of time to file (Form 8868) 6c 0.	- ,					
đ	Backup withholding erroneously withheld						
7	Total credits and payments Add lines 6a through 6d		2,5	500.			
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			- 1			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		2,4	51.			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 2,451. Refunded ▶ 11	·					
	t VII-A Statements Regarding Activities						
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No X			
	participate or intervene in any political campaign?	1a	-				
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19						
	of the instructions for definition)?	1b		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	1 c	•	x			
	c Did the foundation file Form 1120-POL for this year?						
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	ာ					
_	(1) On the foundation S (2) On foundation managers S						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	-					
•	on foundation managers > \$	2		X			
2	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	-	,				
,	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		х			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х			
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х			
٠	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		1				
	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) > NY,						
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			i			
	(or designate) of each state as required by General Instruction G ^o If "No," attach explanation	8b	Х				
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		Х			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			İ			
	names and addresses	10	Х				

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Pái	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 20087	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 HOLLAND & KNIGHT Telephone to 312-71	5-57	03	
	The books are in care of ► HOLLAND & KNIGHT Telephone no ► 312-71 Located at ►131 SOUTH DEARBORN STREET - 30TH FL CHICAGO, IL ZIP+4 ► 60603			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. , ▶	$\cdot \Box$
	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)			٠.
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1.		
	disqualified person?		Ì	
	(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?			
	(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)?		-	٠.
	(6) Agree to pay money or property to a government official? (Exception, Check "No" if	ŀ		
	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)			
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 page 20 of the instructions)?	15		
	Organizations relying on a current notice regarding disaster assistance check here	-		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
ŭ	were not corrected before the first day of the tax year beginning in 2009?	10		х
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)			Ι.
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	'		١.
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2 b		Х
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		i –	٠.
·	The provisions of section 4-3-2(a)(2) are being applied to any of the years listed in 2a, list the years field			ļ
3 2				ļ
Ja	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
.	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or		-	
U				
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		1	1
	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 Schodule C. Form 4730, to determine if the	İ		
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	3 ь		
4-	foundation had excess business holdings in 2009) Did the foundation invest during the year any amount in a manner that would reopardize its charitable purposes?	4a	 	X
40	PRO THE TOTAL GROUP TO VEST OUT THE YEAR ANY ARROBOT THE A TRADITED THAT WOULD JEPOSZOTZE US CHARLESDIE DUTDOSES?	1 -7 4		

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?

4b

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				_
Total number of other employees paid over \$50,000 .				▶

Part VIII Information About Officers, Directors, Trustees, Foundation Mar and Contractors (continued)	nagers, Highly Paid Employ	/ees,
3 Five highest-paid independent contractors for professional services (see page 23	of the 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 chantable activities during the tax year. Include relevant statistical infor of organizations and other beneficianes served, conferences convened, research papers produced, etc.	mation such as the number	Expenses
1 N/A		
2		
3		
·		
4		
Part IX-B Summary of Program-Related Investments (see page 23 of the ins	terrations.	<u> </u>
Part IX-B Summary of Program-Related Investments (see page 23 of the Institute Describe the two largest program-related investments made by the foundation during the tax year on lines 1 are		Amount
1 NONE		
2		
All other program-related investments See page 24 of the instructions		
3 NONE		

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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qualifies for the section 4940(e) reduction of tax in those years

Pa	rt XIII Undistributed Income (see page	e 26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				4,122.
2	Undistributed income, if any, as of the end of 2009				-
a	Enter amount for 2008 only			4,150.	
b	Total for pnor years 20 07 ,20 06 ,20 05		2,726.		
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005			i	
c	From 2006				
d	From 2007		,		
е	From 2008 0.			•	•
f		0.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 0.		,		
а	Applied to 2008, but not more than line 2a	-		o.	
			,		
D	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
	Treated as distributions out of corpus (Election			-	
C	required - see page 26 of the instructions)				- ′
d	Applied to 2009 distributable amount			, ,	
	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009	0.			0.
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as		*		-
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b	Prior years' undistributed income Subtract		!		
	line 4b from line 2b	,	2,726.		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been	*		' 1	•
	issued, or on which the section 4942(a) tax has		•		
	been previously assessed		· · · · · · · · · · · · · · · · · · ·		
d	Subtract line 6c from line 6b Taxable	,	2 726	_	
_	amount - see page 27 of the instructions		2,726.		
e	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page		-	4 150	
	27 of the instructions			4,150.	
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be				4,122.
7	distributed in 2010 Amounts treated as distributions out of corpus				4,122.
′	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				•
8	instructions)			-	
•	applied on line 5 or line 7 (see page 27 of the			1	
_	instructions)				
9	Excess distributions carryover to 2010.	0.			
	Subtract lines 7 and 8 from line 6a	} -	 		
	Analysis of line 9	,			
a	Excess from 2005				
b	Excess from 2006				
C	Excess from 2007				
	Excess from 2008				

	If the foundation has					
ıa	If the foundation has a foundation, and the ruling					
ь	Check box to indicate wh					2(J)(3) or 4942(J)(5)
		Tax year	private operating tourie	Prior 3 years	1 1 1012	1 4342()(3)
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	I or the minimum investment return from Part X for each year listed		,,			
b	85% of line 2a					
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					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i)					
_	line 6 for each year listed			 		
	"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					
	(3) Largest amount of sup- port from an exempt organization					
	(4) Gross investment income		<u> </u>	<u> </u>		
	at any time o	during the year - se	e page 28 of the in		ation had \$5,000	or more in assets
1	Information Regarding	•		- 11 00/ - 6 11 1-1-		
а	before the close of any					ived by the foundation)
	N/A				 	
b	List any managers of ownership of a partner					lly large portion of the
	N/A					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholars	nip, etc., Programs:		
		or funds If the foun	dation makes gifts, g	grants, etc (see page		and does not accept tions) to individuals or
а	The name, address, a	nd telephone number	of the person to who	n applications should b	e addressed	
b	The form in which app	lications should be su	bmitted and informati	on and materials they	should include	
C	Any submission deadli	nes			 	
	Any restrictions or li	mitations on awards	such as by geogr	aohical areas charita	able fields kinds of	f institutions or other

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount			
Name and address (home or business)	any roundation manager or substantial contributor	recipient	contribution				
a Paid during the year							
		1					
		1					
]					
			l				
	1						
		}	,				
	1						
	1						
Total	<u> </u>						
Total	<u> </u>	· · · · · ·					
	1						
		i					
]				

Part XVI	-A Analysis of Income-Produ	cing Activ	vities	 -		
Enter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
a						
ь —						
c						
d						
е						
f						
g Fees	s and contracts from government agencies					
2 Member	rship dues and assessments					
	on savings and temporary cash investments			14	852.	
4 Dividend	ds and interest from securities					
	tal income or (loss) from real estate			ļ <u>.</u>		
	t-financed property					
	debt-financed property					
	al income or (loss) from personal property .	<u>.</u> .		1.0	2	
7 Other in	nvestment income			18	-3.	<u> </u>
	(loss) from sales of assets other than inventory			18	1,816.	
9 Net inco	ome or (loss) from special events			<u> </u>		
	rofit or (loss) from sales of inventory					
	evenue a					
ь				-		
c						
d				<u> </u>		
e					2,665.	
	Add columns (b), (d), and (e)				<u> </u>	2,665.
	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 28 t			• • • • • •	13	
Part XVI	B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line No. ▼	Explain below how each active the accomplishment of the for page 29 of the instructions)					
						. .
					· <u>-</u> .	
	_		NOT APPLICABL	E		
					·	
	-	-				
	<u> </u>					
	.					
	ļ					
						
						
	<u> </u>					

		Exempt Orga	nizations										
1	in se	he organization directly ction 501(c) of the Co	or indirectly ode (other than	section	n 501(c)(3) org	anizations	g with	any other section 52	organization 27, relating t	described o political		Yes	No
а	organı Transi	zations? fers from the reporting fo	oundation to a no	oncharita	able exempt organ	ization of							
-		ash									1a(1)		Х
		ther assets		• • • •							1a(2)		Х
ь		transactions			<i>.</i>								
-		ales of assets to a nonch	aritable exempt o	organizat	ion						1b(1)		Х
		urchases of assets from									1b(2)		X
		ental of facilities, equipme									1b(3)		Х
		eimbursement arrangeme									1b(4)		X
	(5) Lo	oans or loan guarantees									1b(5)		Х
		erformance of services o									1b(6)		Х
С		ng of facilities, equipmen	•		-						1c		Х
		answer to any of t	•							wavs show		fair i	market
		of the goods, other			•	-				-			
		in any transaction or		_		-							
		· · · · · · · · · · · · · · · · · · ·			,								
(a) l	ine no	(b) Amount involved	(c) Name of r	nonchant	able exempt organiz	zation	· · · · · · · · · · · · · · · · · · ·	scription of t	ransfers, transac	tions, and shan	ng arra	ngeme	nts
		N/A					N/A		<u> </u>				
		-											
					· · · · · · · · · · · · · · · · · · ·								
		-											
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			i				 						
									_				
							 			 	-		
									**				
2.0	le tha	foundation directly or	indirectly affilia	tod with	or related to	000 00 0	nore tax	evemet or	ganizations de	secribed in			
Za		on 501(c) of the Code (oth								[T Ye	s []	No
.		s," complete the following		301(0)(3)) or in section 52					L	— '`	~ L_	
	11 16	(a) Name of organization			(b) Type of orga	anization	····		(c) Descript	tion of relations	hip		
		(-,	-	 	(-, -,), <u>-</u>						<u> </u>		
							-						
													
)	l	•								
		penalties of penjury, I decy	ere that I have ex	amined t	his retum, includin	g accompa	anying sch	edules and	statements, and	to the best o	f my k	nowled	ige and
	belief,	it is trul porrect, and com	plete Declaration	of prepar	er (other than taxp	ayer or fide	uciary) is t	pased on all	information of v	which prepare	has a	ny kno	wiedge
		ANT-					"//"	110	►/IRU	STEE			
စ	Sı	ignature of officer or trustee					Date	1	Title				
He				$\overline{}$		Date		- I		Preparer's			
드	۰, ۷	Bronararia	9111 S	- N				Check self-en	nployed ►	number (Se page 30 of t			
Sign Here	Dare of	Preparer's signature	m &	5	3	11/	12/20		· /	P00737			
- •	Pald Preparer's Use Only	Firm's name (or yours if	PRICE		HOUSECOOPE	ERS LL	P		EIN ▶	13-4008	324		
	د ته ا	self-employed), address	. ▶ 300 M	ADISO	N AVENUE								
		and ZIP code	NEW Y	ORK,	NY		1	0017	Phone n	o 646-4	71-3	000	
										F	om 99	0-PF	(2009)

. Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization		Employer identification number
DAVID F. & KAREN K.	THOMAS FOUNDATION	20-5681086
Organization type (check one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	,
Form 990-PF	X 501(c)(3) exempt private foundation	
7 (3111) 000 1 1		and forwards to a
	4947(a)(1) nonexempt charitable trust treated as a priv	ate foundation
	501(c)(3) taxable private foundation	
Note. Only a section 501(c)(7 instructions.	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General R	Rule and a Special Rule See
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year one contributor. Complete Parts I and II	ar, \$5,000 or more (in money or
Special Rules		
sections 509(a)(1) a	o(3) organization filing Form 990 or 990-EZ that met the 331/3 % and 170(b)(1)(A)(vi), and received from any one contributor, during 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 9	ng the year, a contribution of the greater
the year, aggregate	0(7), (8), or (10) organization filing Form 990 or 990-EZ that rece contributions of more than \$1,000 for use exclusively for religiouses, or the prevention of cruelty to children or animals. Complete P	s, charitable, scientific, literary, or
the year, contribution aggregate to more year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that receives for use exclusively for religious, charitable, etc., purposes, but than \$1,000. If this box is checked, enter here the total contribution of the religious, charitable, etc., purpose. Do not complete any of the nization because it received nonexclusively religious, charitable, etc.	t these contributions did not ions that were received during the e parts unless the General Rule etc , contributions of \$5,000 or more
Caution. An organization that 990-EZ, or 990-PF), but it mus or on line 2 of its Form 990-P 990-PF)	is not covered by the General Rule and/or the Special Rules doest answer "No" on Part IV, line 2 of its Form 990, or check the bown, to certify that it does not meet the filing requirements of Scheol	es not file Schedule B (Form 990, ox on line H of its Form 990-EZ, dule B (Form 990, 990-EZ, or
for Form 990, 990-EZ, or 990-PF.	iction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

	- (.	•.,	 	,	٠.		•	, ,	
	_		 		_		_		
Name of c				_ D.	Δ	7 T	n.	됴	

Page_

Name of o	rganization DAVID F. & KAREN K. THOMAS F	OUNDATION	Employer identification number 20-5681086
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DAVID F. THOMAS 345 PURCHASE STREET	 \$\$5,780.	Person X Payroll Noncash
	RYE, NY 10580		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZiP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	•	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll

(Complete Part II if there is a noncash contribution.)

Noncash

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	852.	852.
REVENUE AND EXPENSES PER BOOKS	852	852.
		TOTAL
	INVESTMENTS, LLC	
DESCRIPTION	NORTH STREET IN	

FORM 990PF, PART I - OTHER INCOME

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT INCOME

-3.

-3.

-3.

TOTALS

DESCRIPTION NORTH STREET INVESTMENTS, LLC

ATTACHMENT

20-5681086

PAGE 18

ATTACHMENT

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

NET INVESTMENT INCOME	172.	172.
REVENUE AND EXPENSES PER BOOKS	1,72.	172.
DESCRIPTION	NORTH STREET INVESTMENTS, LLC	TOTALS

ATTACHMENT

ATTACHMENT 4

PART I - INTEREST EXPENSE FORM 990PF,

	NET	INVESTMENT	INCOME	,	29.
REVENUE	AND	EXPENSES	PER BOOKS	1	29.
					NORTH STREET INVESTMENTS, LLC
			DESCRIPTION		NORTH STREET

29.	29.
29.	29.
INVESTMENT	EXPENSES PER BOOKS

TOTALS

PAGE 21

DAVID F. & KAREN K. THOMAS FOUNDATION

- OTHER INVESTMENTS PART II FORM 990PF,

DESCRIPTION

NORTH STREET INVESTMENTS, LLC

TOTALS

2	ENDING	FMV
ATTACHMENT	NG	VALUE
	ENDING	BOOK V

	١
509.	000
112,	110

106,491.

106,491.

ATTACHMENT 6

EXPENSE ACCT AND OTHER ALLOWANCES	·	· 0	Ö	0
CONTRIBUTIONS ITO EMPLOYEE BENEFIT PLANS	°C	Ö	Ö	0
COMPENSATION	o	ó	O	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR 1.00	DIRECTOR 0.00	DIRECTOR 0.00	GRAND TOTALS
NAME AND ADDRESS	DAVID F. THOMAS C/O DAVID F. THOMAS 345 PURCHASE STREET RYE, NY 10580	KAREN K. THOMAS C/O DAVID F. THOMAS 345 PURCHASE STREET RYE, NY 10580	JAMES N. BENEDICT C/O DAVID F. THOMAS 345 PURCHASE STREET RYE, NY 10580	

DAVID F. & KAREN K. THOMAS FOUNDATION
FORM 990-PF - PART IV

Kind of Property		NS AND LOSSES FOR TAX ON INVEST Description			D.	Date	Date sold	
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	D	acquired Gain or (loss)	
		NORTH STREE	r investmen			Р		VARIOUS
0.		2.	FE. OTHER				-2.	
	•	NORTH STREE		NTS LLC		P	VARIOUS	VARIOUS
1,818.		0.					1,818.	
TAL GAIN(LO	oss)						1,816.	
								18
							.	

SCHEDULE D (Form 1041)

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

DAVID F. & KAREN K. THOMAS FOUNDATION

Note: Form 5227 filers need to complete only Parts I and II

Employer identification number

20-5681086

Par	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar or Less		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1 a						
A'	TTACHMENT 7			0.	2.	-2.
_						
b	Enter the short-term gain or (loss), if any,	from Schedule D)-1, line 1b		1 <u>b</u>	
2	Short-term capital gain or (loss) from Form	ns 4684, 6252,	6781, and 882	4	2	,
3	Net short-term gain or (loss) from partners					
4	Short-term capital loss carryover Enter th Carryover Worksheet				4	(
5	Net short-term gain or (loss). Combine lin column (3) on the back	es 1a through 4	· ın column (f) · · · · · · ·	Enter here and on line	: 13,	-2.
Par	t II Long-Term Capital Gains and Losse		1	ne Year	(e) Cost or other basis	(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(see page 4 of the instructions)	the entire year Subtract (e) from (d)
6 a						
_A	TTACHMENT 8			1,818.	0.	1,818.
	Fator the least to see a collection of any fi	Cabadala D	4 h Ch	<u> </u>		
	Enter the long-term gain or (loss), if any, fi					
7	Long-term capital gain or (loss) from Form					
8	Net long-term gain or (loss) from partners					
9	Capital gain distributions					
0 1	Gain from Form 4797, Part I Long-term capital loss carryover Enter the	e amount, if any	, from line 14 (of the 2008 Capital Los	s	,
2	Carryover Worksheet	s 6a through 1		Enter here and on the		

• ,	•				
Sche	dule D (Form 1041) 2009				Page 2
	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	·····
	Caution: Read the instructions before completing this	part.	(see page 5)	or trust's	(3) Total
13	Net short-term gain or (loss)	13			-2.
14	Net long-term gain or (loss):				
а	Total for year	14a			1,818.
b		14b			
C	28% rate gain	14c			
		15			1,816.
to Pa	b: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fort V, and do not complete Part IV If line 15, column (3), is a net loss, complete P				
Par	t IV Capital Loss Limitation			·	
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F				
a	The loss on line 15, column (3) or b \$3,000 If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page over Worksheet on page 7 of the instructions to figure your capital loss carryove.	: : :		16 ()
Carry	over Worksheet on page 7 of the instructions to figure your capital loss carryove	e i, iiii r	ie 22 (or Form 990-1, ii	ne 34), is a loss, comp	nete the Capital Loss
Par					
Forn	n 1041 filers. Complete this part only if both lines 14a and 15 in colu	ımn (2	2) are gains, or an an	nount is entered in F	Part I or Part II and
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	e thai	n zero		
	tion: Skip this part and complete the worksheet on page 8 of the instruc-	ctions	ıf		
	other line 14b, col (2) or line 14c, col (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero n 990-T trusts. Complete this part only if both lines 14a and 15 are	e aar	se or qualified divide	ande are included ii	n income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa				
	er line 14b, col (2) or line 14c, col (2) is more than zero	.,		onest on page of or	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	14)	17		
18	Enter the smaller of line 14a or 15 in column (2)	• • •			
	but not less than zero 18				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19				
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0- ▶ 21		, ,		
22	Subtract line 21 from line 20 If zero or less, enter -0-		22		
23	Subtract line 22 from line 17 If zero or less, enter -0-		23		
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24		` '		
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box	ζ.			
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24				
27	Are the amounts on lines 22 and 26 the same?				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or li	ne 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% (15)			30	.
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate				
	(see the Schedule Ginstructions in the instructions for Form 1041).			31	

33

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

20-5681086

ATTACHMENT 7

Schedule D Detail of Short-term Capital Gains and Losses

DAVID F. & KAREN K THOMAS FOUNDATION

VARIOUS VARIOUS 0 2 2 VARIOUS 0 2 2 VARIOUS 0 2 2 VARIOUS 0 0 2 2 VARIOUS 0 0 2 2 VARIOUS 0 0 2 2 VARIOUS 0 0 2 2 VARIOUS 0 0 0 2 2 VARIOUS 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	· ·	Date	Date	Gross Sales	Cost or Other	Short-term
WARTOUS O O O O O O O O O O O O O O O O O O	Description	Acquired	DIDC	D)	Davis	Galificoss
VARIOUS VARIOUS 0 O O O O O O O O O O O O O O O O O O	PITAL GAINS (LOSSES) HELD FOR INVESTMENT PURPOSES					
VARIOUS VARIOUS 0 O 0 O 0 O 0 O 0 O 0 O 0 O 0						
	NORTH STREET INVESTMENTS LLC	VARIOUS	VARIOUS	0	2	-2
0 0						
	TAL CAPITAL GAINS (LOSSES) HELD FOR INVESTMENT PURPOSES			0.	2	-2.
						:
				-		
,						
0						
0				,		
	ıtals			0	2	2

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79713N 2532 11/12/2010

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20-5681086

DAVID F. & KAREN K. THOMAS FOUNDATION

20-5681086

ATTACHMENT 8

Schedule D Detail of Long-term Capital Gains and Losses

	Date	Date	Gross Sales	Cost or Other	Long-term
Description	Acquired	Sold	Price	Basis	Gain/Loss
APITAL GAINS (LOSSES) HELD FOR INVESTMENT PURPOSES					
NORTH STREET INVESTMENTS LLC	VARIOUS	VARIOUS	1,818	0	1,818
OTAL CAPITAL GAINS (LOSSES) HELD FOR INVESTMENT PURPOSES			1,818.	0	1,818
			1,818		
					į
Totals				-	1.818

JSA 9F0970 2 000

V 09-8 5

79713N 2532 11/12/2010

PAGE 26 ATTACHMENT B

Form 8868

(Rev April 2009)

Application for Extension of Time To File an **Exempt Organization Return**

OMB	N۸	154	5 1	700
UMD	NO	104	⊃ - I	703

Department of the Treasury

File a separate application for each return. Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
.... X • 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 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 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 From 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 and click on e-file for Charities & Nonprofits. Name of Exempl Organization DAVID F. & KAREN K. THOMAS FOUNDATION | Employer identification number Type or DAVID F. & KAREN K. THOMAS FOUNDATION 20-5681086 print Number, street, and room or suite no If a P O box, see instructions C/O DAVID THOMAS, 345 PURCHASE ST. File by the due date for filing your return See C/O DAVID THOMAS, 345 PURCHASE ST. City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions RYE, NY 10580 Check type of return to be filed (file a separate application for each return) Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 The books are in the care of > SCHIFF HARDIN LLP Telephone No ▶ 212 745-9562 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) 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. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until $\frac{08/15}{2010}$, to file the exempt organization return for the organization named above. The extension is for the organization's return for. calendar year 2009 or tax year beginning , and ending If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any ٥. nonrefundable credits. See instructions 3<u>a</u> 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 0. 3 b Balance Due. 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 0. 3c | \$ 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

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For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 4-2009)

Form 88	368 (Rev 4-2009)		Page 2
• If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II a	ind check this box	▶ X
Note.	Only complete Part II if you have already been granted an automatic 3-month extension of	n a previously filed For	m 8868.
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).		
Pari	Additional (Not Automatic) 3-Month Extension of Time. Only file the	original (no copies	needed).
Туре	Name of Exempt Organization	Employer Identification	n number
print	DAVID F. & KAREN R. THOMAS FOUNDATION	20-5681086	
File by extende due da	c/O DAVID F. THOMAS, 345 PURCHASE STREET	For IRS use only	de dive product success es
filing the return instruct	See		
Chec	k type of return to be filed (File a separate application for each return):	r	
Н	Form 990 X Form 990-PF	Form 1041-A	Form 6069
\vdash	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust)	Form 4720 [Form 8870
	Form 990-EZ Form 990-T (trust other than above)	Form 5227	411-4 T 0000
STOP	I Do not complete Part II if you were not already granted an automatic 3-month exte	nsion on a previously	Tuea Form 8868.
	books are in the care of SCHIFF HARDIN LLP		_
	ephone No ▶ 212 745-9562 FAX No. ▶		
	ne organization does not have an office or place of business in the United States, check this		▶ 🗀
• If th	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	. If this	S
	e whole group, check this box	. > and attach a	
	th the names and EINs of all members the extension is for.		
	I request an additional 3-month extension of time until11/15/2010		
	For calendar year 2009, or other tax year beginning and er	*	: ;
7	If this tax year is for less than 12 months, check reason: Initial return Final return State in detail why you need the extension ADDITIONAL INFORMATION IS REQ		accounting period
	TO FILE A COMPLETE AND ACCURATE RETURN.		···
			
			Υ
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative	•	ا ا
	nonrefundable credits. See instructions.	8a	\$ 0.
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits		
	tax payments made. Include any prior year overpayment allowed as a credit and an		s 0.
	previously with Form 8868.	8b	\$ 0.
	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if re		
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	See instructions. 8c	\$ 0.
	Signature and Verification		
Under	penalties of penyry, I declare that I have examined this form, including accompanying schedules and stateme e, correct and complete, and that I empauthorized to prepare this form	nts, and to the best of my	Knowledge and belief,
	1 1/ SHIII X STORA	Date > 1	seloction
Signatu		Date ► C	- 8868 (D== 4.0000)
	PRICEWATERHOUSECOOPERS LLP	For	m 8868 (Rev 4-2009)
	300 MADISON AVENUE		
	NEW YORK, NY 10017		