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Form **990-PF**

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 of a former public charity Initial return Final return Amended return Address change Name change Name of foundation **Employer identification number** Use the IRS label. Michael F Bower & Dorothy L Cochrane Foundation 22-3282518 Otherwise. Number and street (or P.O box number if mail is not delivered to street address) Telephone number (see the instructions) print 80 Watering Pond Road (203) 458-8969 or type. See Specific City or town State ZIP code If exemption application is pending, check here Instructions. Guilford CT 06437-1660 D 1 Foreign organizations, check here |X | Section 501(c)(3) exempt private foundation Check type of organization 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year J Accounting method: X Cash under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis.) 1,422. Part I | Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books for charitable income ıncome columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see the instructions).) 13,618. Contributions, gifts, grants, etc, received (att sch) Ck ► If the foundn is **not** req to att Sch B Interest on savings and temporary cash investments Dividends and interest from securities 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 Capital gain net income (from Part IV, line 2) . . 0. Net short-term capital gain Income modifications 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 13,619. 1. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach.sch) MINISTRATIVE c Other prof fees (attach schRECEIVED OPERATING 17 Interest 18 Taxes (attach schedule requistr) Sec. (19 Depreciation (attach MAY sch) and depletion $\overset{\circ}{\circ}$ 50 50. Ŝ Occupancy 21 Travel, conferences, and bettings UT Printing and publications 22 Other expenses (attach schedule) Total operating and administrative 24 expenses. Add lines 13 through 23 50 25 Contributions, gifts, grants paid 14,258. 14,258. 26 Total expenses and disbursements. Add lines 24 and 25 14,308 50 14,258. Subtract line 26 from line 12: a Excess of revenue over expenses -689 and disbursements **b** Net investment income (if negative, enter -0-) 1

Form **990-PF** (2009

0.

C Adjusted net income (if negative, enter -0-)

Part	11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
ı, arı		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	2,144.	1,422.	1,422.
	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				
A		Less: allowance for doubtful accounts			
S	8	Inventories for sale or use	<u> </u>		
A S E T	9	Prepaid expenses and deferred charges			
S	l	a Investments – U.S. and state government obligations (attach schedule)			
	۱,	b Investments — corporate stock (attach schedule) . L-10b .Stmt .	0.	 	· · -
		c Investments — corporate bonds (attach schedule)			-
	l	Investments – land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	l .	5 5			
	ı	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule)	_		
		Other assets (describe Total assets (to be completed by all filers —)		
		see instructions. Also, see page 1, item l)	2,144.	1,422.	1,422.
Ļ	17	Accounts payable and accrued expenses			
_	18	Grants payable			
A B I	19	Deferred revenue .			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
I T	21	Mortgages and other notes payable (attach schedule)			
ı	22	Other liabilities (describe	·		
<u> </u>	23		1		
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	4		
N F E U	24	Unrestricted			
T N	25	Temporarily restricted			1
, D	26	Permanently restricted			
A B A L A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
E L	27	Capital stock, trust principal, or current funds			
S N	28	Paid-in or capital surplus, or land, building, and equipment fund			
OE	29	Retained earnings, accumulated income, endowment, or other funds .	2,144.	1,422.	
ŘŠ	30	Total net assets or fund balances (see the instructions)	2,144.	1,422.	
	31	Total liabilities and net assets/fund balances	2,144.	1,422.	
Dart	111	(see the instructions) Analysis of Changes in Net Assets or Fund Balance		1,422.	· ··-
1	Tota end-	il net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	mn (a), line 30 (must agre	e with 1	2,144.
2	Ente	er amount from Part I, line 27a		2	-689.
3	Other	increases not included in line 2 (itemize) Tax refund		3	133.
4	Add	lines 1, 2, and 3		4	1,588.
5		eases not included in line 2 (itemize) <u>loss on sale</u>		5	166.
6_	Tota	I net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), line	306	1,422.

Form 990-PF (2009) Michael F Bower & Dorothy L Cochrane Foundation

22-3282518

Page 2

(a) List and describe	e the kind(s) of property sold (e.g., rease; or common stock, 200 shares MLC	al estate,	(b) How according P — Purch D — Dona	ase	(C) Date acquired (month, day year)	(d) Date sold (month, day, year)
1a 400 Shares GE			D		11/18/09	11/23/09
b 200 Shares GE			<u> </u>		11/18/09	12/21/09
c						
d						
e			_			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	
a 6,354.			5,412.			-58.
b 3,098.			3,206.			-108.
с с			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
d						
e						
Complete only for assets shown	ng gain in column (h) and owned by the	ne foundation on 12/31/69			(I) Gains (Colu	ımn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if ar	(i) 1y	g: tha	ain minus column (k nn -0-) or Losses (fr), but not less
a						-58.
b						-108.
С						
d						
e						
2 Capital gain net income or (net	If (loss), ente	enter in Part I, line 7 r -0- in Part I, line 7		2		-166.
, , ,	loss) as defined in sections 1222(5) ar 8, column (c) (see the instructions). I	· · · · · · · · · · · · · · · · · · ·				
ın Part I, Iıne 8		<u></u> _		3		
Part V Qualification Under	r Section 4940(e) for Reduced	Tax on Net Investme	ent Incor	ne		
If 'Yes,' the foundation does not quali	tion 4942 tax on the distributable amounty under section 4940(e). Do not compose a column for each year; see the	olete this part.		S.	Yes	X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass			(d) Distribution umn (b) divided	
2008	3,425.		0.			0.000000
2007	15,785.		850.			
2006	12,565.		850.			
2005	9,590.					18.570588
2004			2,955.			18.570588 14.782353
	11,785.		2,955. 7,880.			18.570588 14.782353 3.245347
2 Total of line 1, column (d)	11,785.			2		18.570588 14.782353 3.245347 1.495558
3 Average distribution ratio for the	e 5-year base period — divide the total	I on line 2 by 5, or by the	7 , 880.	2		18.570588 14.782353 3.245347 1.495558 38.093846
Average distribution ratio for the number of years the foundation	e 5-year base period – divide the total	on line 2 by 5, or by the ears	7 , 880.			18.570588 14.782353 3.245347 1.495558 38.093846
Average distribution ratio for the number of years the foundation	e 5-year base period – divide the total has been in existence if less than 5 y	on line 2 by 5, or by the ears	7,880.	3		18.570588 14.782353 3.245347 1.495558 38.093846 7.618769
 3 Average distribution ratio for the number of years the foundation 4 Enter the net value of nonchari 5 Multiply line 4 by line 3 	e 5-year base period – divide the total has been in existence if less than 5 y	on line 2 by 5, or by the ears	7,880.	3		18.570588 14.782353 3.245347 1.495558 38.093846 7.618769 1,527.
 3 Average distribution ratio for the number of years the foundation 4 Enter the net value of nonchari 5 Multiply line 4 by line 3 	e 5-year base period — divide the total has been in existence if less than 5 y table-use assets for 2009 from Part X,	on line 2 by 5, or by the ears	7,880.	3 4 5		18.570588 14.782353 3.245347 1.495558 38.093846 7.618769 1,527. 11,634.
 3 Average distribution ratio for the number of years the foundation 4 Enter the net value of noncharing 5 Multiply line 4 by line 3 6 Enter 1% of net investment inc 	e 5-year base period — divide the total has been in existence if less than 5 y table-use assets for 2009 from Part X, ome (1% of Part I, line 27b)	on line 2 by 5, or by the ears	7,880.	3 4 5		18.570588 14.782353 3.245347 1.495558 38.093846 7.618769 1,527. 11,634. 0.
3 Average distribution ratio for the number of years the foundation 4 Enter the net value of noncharit 5 Multiply line 4 by line 3 6 Enter 1% of net investment inc. 7 Add lines 5 and 6 8 Enter qualifying distributions from	e 5-year base period — divide the total has been in existence if less than 5 y table-use assets for 2009 from Part X, ome (1% of Part I, line 27b)	I on line 2 by 5, or by the ears line 5	7,880.	3 4 5 6 7 8		18.570588 14.782353 3.245347 1.495558 38.093846 7.618769 1,527. 11,634. 0. 11,634.

Form	990-PF (2009) Michael F Bower & Dorothy L Cochrane Foundation 22-3282518		F	age 4
Par		ions)		
⁻ 1 a	a Exempt operating foundations described in section 4940(d)(2), check here ► ☐ and enter 'N/A' on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)	n/	a	
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			
	check here ▶ ☐ and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
	foundations only. Others enter -0-)			
3	Add lines 1 and 2		,	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			 ,
6	Credits/Payments:			ĺ
	a 2009 estimated tax pmts and 2008 overpayment credited to 2009			
	Exempt foreign organizations — tax withheld at source			1
	c Tax paid with application for extension of time to file (Form 8868) .			
	d Backup withholding erroneously withheld			
,	Total distallation and payments in the state of the state			
8				
10	Tax add. If the total of lines of and o to most diam line // onto			0.
10				<u> </u>
Par	t VII-A Statements Regarding Activities			
		Π	Yes	No
1 a	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?	1 a	103	Х
t	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		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		\mathbf{x}
,	c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			lacksquare
	(1) On the foundation \$ (2) On foundation managers \$			
€	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
_	foundation managers . •\$	-		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If 'Yes,' attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	3		х
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes.	4a		x
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b 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		X
•	If 'Yes,' attach the statement required by General Instruction T.	-		<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
·	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Х	
7		7		х
	a Enter the states to which the foundation reports or with which it is registered (see the instructions)			
	CT - Connecticut			
ı	b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
•	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8b		<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(i)(5)			\sqcup
-	for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		x

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Form **990-PF** (2009)

orm 990-PF (2009) Michael F Bower & Dorothy L Cochrane Foundation	22-328	2518	P;	age 5
Part VII-A Statements Regarding Activities Continued				
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		<u> </u>
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption a	pplication?	. 13	Х	
Website address				
14 The books are in care of ► Michael Bower Telephone	no. ► _(<u>20</u>	3) <u>458</u>	<u>-896</u>	9
14 The books are in care of ► Michael Bower Telephone Located at ► 80 Watering Pond Road Guilford CT ZIP + 4 ►	<u>06437-</u>	1660		 -
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here				
and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			1	
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No_
1a During the year did the foundation (either directly or indirectly):				
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X	io		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X N	lo		Ì
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	_	lo		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X N	lo		
(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)?	Yes X	lo		
(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.)	Yes ⊠N	lo		
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 instruction	s)?	. 1b		
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 were not corrected before the first day of the tax year beginning in 2009?		. 1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
a 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?	Yes X	lo		
If 'Yes,' list the years ▶ 20 , 20 , 20 , 20				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)	(2) (2) to			
all years listed, answer 'No' and attach statement – see the instructions.)		<u>2b</u>	 	<u> X</u>
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years her ▶ 20 , 20 , 20	e.			. [
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes XI	40		
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.)		. <u>3b</u>	 	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		. <u>4a</u>		X_
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		X
the tax year beginning in 2009?	·· · ·	Form 99	O-PF	
		1 (4) 111 22	- I	

Form 990-PF (2009) Michael F Bower & Do	rothy L Cochrane	Foundation_	22-328	32518 Pag	ge 6
Part VII-B Statements Regarding Activit	ies for Which Form	4720 May Be Requ	uired (continued)		
5a During the year did the foundation pay or incur	any amount to:				1
(1) Carry on propaganda, or otherwise attempt	t to influence legislation	(section 4945(e))?	. Yes X	No	
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	c election (see section 4 tion drive?	4955); or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	•	•	Yes X	No	
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	an a charitable, etc, org 4940(d)(2)? (see instru	anization described ctions)	Yes X	No	
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	is, charitable, scientific, n of cruelty to children of	literary, or ranimals?	Yes 🗓	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to qua a current notice regardi	ualify under the exception ng disaster assistance	ns	5b	
Organizations relying on a current notice regar	ding disaster assistance	e check here	► □		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure response	ibility for the grant? .		🗌 Yes 📗	No	
If 'Yes,' attach the statement required by Regu					
6a Did the foundation, during the year, receive an on a personal benefit contract?		• • •		No	
b Did the foundation, during the year, pay premil <i>If 'Yes' to 6b, file Form 8870.</i>	ums, directly or indirectly	y, on a personal benefit	contract?	6b	<u>X</u>
7a At any time during the tax year, was the found	ation a party to a prohib	uted tax shelter transact	ion? Yes X	No	
b If yes, did the foundation receive any proceeds				7b	
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	mployees,	_
and Contractors					
1 List all officers, directors, trustees, foundation				_	
(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	
Dorothy L. Cochrane					
80 Watering Pond Road Guilford CT 06437	President 1.00	0.	0.		0.
Michael F. Bower 80 Watering Pond Road	Treas/ Sec				
Guilford CT 06437	2.00	0.	0.		Ο.
Michael Yukevich					_
PO Box 1812	Director				
Bellevue WA 98009	0.00	0.	0.		0.
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1 – see ins	tructions). If none, ent	er 'NONE.'	—
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense accou	unt,
paid more than \$50,000	hours per week devoted to position	(c) componed on	employee benefit plans and deferred compensation	other allowances	S
None					
0					
0					
0	-				—
0					—
Total number of other employees paid over \$50,000		07/06/09	<u> </u>	No. No.	one (009)

Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Ei	mployees,
3 Five highest-paid independent contractors for professional services — (see instruct enter 'NONE.'	ions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
none		
	none	
		<u>-</u>
Total number of others receiving over \$50,000 for professional services		None
Part IX-A Summary of Direct Charitable Activities		
Part IX-A Summary of Direct Chartable Activities		
List the foundation's four largest direct charitable activities during the tax year Include relevant statistical informat organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ion such as the number of	Expenses
1 Donations are made to tax exempt organizations		
Total donations for the year \$14,258.00 to 5 organi	zations.	
see attached list		14,258.
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 ta	ax year on lines 1 and 2.	_Amount
1 There are none currently		
		0.
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		None
RAA	<u> </u>	Form 990-PF (2009)

22-3282518

Page 7

Form 990-PF (2009) Michael F Bower & Dorothy L Cochrane Foundation

Form 990-PF (2009) Michael F Bower & Dorothy L Cochrane Foundation 2.	2-3282518	Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign found	ations,
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	0.
b Average of monthly cash balances	1b	1,550.
c Fair market value of all other assets (see instructions)	1 c	0.
d Total (add lines 1a, b, and c)	1 d	1,550.
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	1,550.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	23.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,527.
6 Minimum investment return. Enter 5% of line 5	6	76.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private ope and certain foreign organizations check here ► ☐ and do not complete this p	rating founda art.)	
1 Minimum investment return from Part X, line 6	1	76.
2a Tax on investment income for 2009 from Part VI, line 5	<u>.</u>	
b Income tax for 2009. (This does not include the tax from Part VI) .		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	76.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	76.
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	76.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes		4.4.050
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	14,258.
b Program-related investments — total from Part IX-B	1 b	<u> </u>
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	0.
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	0.
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	14,258.
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.

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.

BAA

6 Adjusted qualifying distributions. Subtract line 5 from line 4

Form **990-PF** (2009)

6

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				76.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only .			0.	
b Total for prior years: 20, 20, 20				<u> </u>
3 Excess distributions carryover, if any, to 2009:				
a From 2004 11,444.				
b From 2005 9, 454.				
c From 2006 12,565.				
d From 2007 15,785. e From 2008 3,425.				
	52,673.			
Total of lines 3a through e Qualifying distributions for 2009 from Part	32,073.			
XII, line 4: ► \$ 14,258.				!
a Applied to 2008, but not more than line 2a			-	
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 .				
e Remaining amount distributed out of corpus	14,258.			
5 Excess distributions carryover applied to 2009 .				
(If an amount appears in column (d), the same amount must be shown in column (a).)				
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	66,931.			
b Prior years' undistributed income. Subtract		0		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency				
has been issued, or on which the section				
4942(a) tax has been previously assessed			<u>-</u>	
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.	
Time Ed. Taxable amount See modulous				
f Undistributed income for 2009 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2010				76.
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)	11,444.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	55,487.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006 . 12,565.				
c Excess from 2007 15,785.				
d Excess from 2008 3, 425.				
e Excess from 2009 14,258.				

Form 990-PF (2009) Michael F Bower & D				22-328251	8 Page 10
Part XIV Private Operating Foundation					N/A
1 a If the foundation has received a ruling or d is effective for 2009, enter the date of the r	uling	•	•	· ►	
b Check box to indicate whether the foundation		ating foundation des		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	T	
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
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				-	,
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:		1			
(1) Value of all assets		ļ			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		_			
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed			. =		
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income.					
Part XV Supplementary Information assets at any time during the			organization h	ad \$5,000 or mo	re in
1 Information Regarding Foundation Managa a List any managers of the foundation who had close of any tax year (but only if they have Michael F Bower & Dorothy	ave contributed mo contributed more t	re than 2% of the to han \$5,000) (See s	otal contributions red ection 507(d)(2).)	ceived by the foundar	tion before the
b List any managers of the foundation who of a partnership or other entity) of which the None	wn 10% or more of foundation has a 10	the stock of a corpo % or greater interes	oration (or an equal st.	ly large portion of the	e ownership of
2 Information Regarding Contribution, Gran Check here In the foundation only not requests for funds. If the foundation makes complete items 2a, b, c, and d.	nakes contributions	to preselected char	itable organizations		
a The name, address, and telephone numbe See Information Regarding Contribution, G	·				
b The form in which applications should be s	submitted and inforr	nation and materials	s they should includ	e:	
c Any submission deadlines:		····			
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charitab	le fields, kinds of in	estitutions, or other fa	actors.

Page 11

3 Grants and Contributions Paid During the Ye	<u>ar or Approved for Futu</u>	re Payment		
Recipient	if recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
See Attached List			Charitable	
All to Charitable	None	None		
Organizations				14,258.
_				
		1		
•				
	ļ			
			İ	
•				
Total	<u> </u>		► 3a	14,258.
b Approved for future payment	_			
	1			
	i			
		1		
			1	
			1	
	1			
		<u> </u>		
Total				.1

Part XVI-A Analysis of Income-Producing Activities

BAA

nte	gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded by	section 512, 513, or 514	- ———		
	Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)		
	-			code		(See the instructions)		
a b				++-	- ·			
C				++-				
				+		-		
u				 				
•				+-+				
'	Fees and contracts from government agencies			 				
-			<u> </u>	+				
	Membership dues and assessments			14	1.			
	Interest on savings and temporary cash investments			14				
	Dividends and interest from securities			+ ++-	·			
	Net rental income or (loss) from real estate:			 				
	Debt-financed property			 				
	Not debt-financed property			+		 		
	Net rental income or (loss) from personal property .			+ +				
7	Other investment income			 				
8	Gain or (loss) from sales of assets other than inventory			18	-166.			
9	Net income or (loss) from special events			 -				
10	Gross profit or (loss) from sales of inventory			ļļ				
11	Other revenue:			 				
а				 				
b								
C				ļ <u> </u>				
d				ļ				
е				\bot				
12	Subtotal. Add columns (b), (d), and (e)	i l			-165.			
13	Total. Add line 12, columns (b), (d), and (e)				13	-165.		
13					13	-165.		
13 See	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cal	culations.)	shment of Exemp	ot Purpose		-165.		
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cal XVI-B Relationship of Activities to the	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cal XVI-B Relationship of Activities to the	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cal XVI-B Relationship of Activities to the	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cal XVI-B Relationship of Activities to the	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es	to the enstructions.)		
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
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13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
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13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			
13 See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the e No. Explain below how each activity for which included accomplishment of the foundation's exempting	culations.) Accompl			es			

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

•	descri	e organization directly of bed in section 501(c) of	f the Code (oth	igage in any of the fo ner than section 501	ollowing with an (c)(3) organizatí	y othe	er organization or in section 52	7,		Yes	No
		ig to political organization		nanaharitahla ayam	nt araamiration	of:					
		fers from the reporting t	oungation to a	nonchantable exem	ipt organization	OI.			1a (1)		X
	(1) C:				• •••		• • • •				X
		ther assets			• • • •	•	•	•••	1a (2)		<u>-^</u>
		transactions'							41.43		
		ales of assets to a nonc			• • •	•		• • •	1b(1)		<u>X</u>
	• •	urchases of assets from			ion .		•	• • • •	1b (2)		<u>X</u>
		ental of facilities, equipi	-	assets			•		1 b (3)		<u>X</u>
	(4) R	eimbursement arrangen	nents .						1 b (4)		<u>X</u>
	(5) Lo	oans or loan guarantees		• • • •					1 b (5)		<u>X</u>
	(6) Pe	erformance of services	or membershij	p or fundraising solic	itations .		•		1 b (6)		<u> </u>
	c Sharır	ng of facilities, equipme	nt, mailing list	s, other assets, or p	aid employees	•	• •		1c		<u> </u>
							بمنياه امليتمظم لأطا	a abaut tha fair	manufat valua	~ •	
	the ac	answer to any of the ab oods, other assets, or se ansaction or sharing ar	ervices aiven t	ov the reporting found	dation. If the fou	ındatı	on received les	s than fair mark	ket value in	OI	
(a) Line no.	(b) Amount involved	(c) Name o	of noncharitable exempt or	ganization	(d)	Description of tran	isfers, transactions,	and sharing arran	gement	<u>s</u>
						-					
										•	
										_	
									.		
				-					-	-	
						_	.				
_											

							-				
_											
_					-					_	
			<u> </u>								
	descr	foundation directly or in tibed in section 501(c) on s,' complete the following	f the Code (ot	ted with, or related t her than section 501	o, one or more (c)(3)) or in sec	tax-ex tion 5	xempt organiza 27?	tions 	. Yes	X	No
		(a) Name of organization		(b) Type of	organization		(6	Description of	f relationship		
				,,,,,,,	<u> </u>		•				
			-								
_											
	Under pena complete i	alties of perjury, I declare that I Declaration of preparer (other t	have examined the	is return, including accompluciary) is based on all info	panying schedules an rmation of which pre	d state parer h	ments, and to the be as any knowledge	est of my knowledge	and belief, it is true	e, correc	t, and
		111 lin 1	14,00			1 4	-29 10	► UP-5	. T.		
\$	-	Mulay /	Jow			17	-29-10		ec- 1 rea	2	
3	Sign	ature of officer or trustee	1	$\overline{}$		Date		Title			
•		Preparer's	-//		NDO	Date	:	Check if	Preparer's Identify (See Signature in	ing num the inst	per rs)
	Paid Pre-	signature	1 eu	159 e	$-(ZF)^{\prime\prime}$	04	/20/10	self- employed ► X	POOZO	15	75
È	parer's	Firm's name (or ELLE)	N D PAGE	CPA V				EIN ►			
	Use	vours if solf	NORTH MAI								
	Only	address, and ZIP code BRAN			CT	06	405	Phone no.	(203) 483	-432	2.4
_		•									

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			
Michael F Bower & Dorothy L Cochrane Foundation		22-3282518			
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	990-EZ 501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a p	private foundation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a priva	ite foundation			
	501(c)(3) taxable private foundation				
Check if your organization is covered by the Ger	neral Rule or a Special Rule . nızatıon can check boxes for both the General Rule and a Sp	ecial Rule. See instructions			
Note: Only a section sortcy(7), (6), or (10) orga	mization can effect boxes for both the deficial rate and a op	celai raie. Cee manacione			
General Rule —					
X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one					
contributor. (Complete Parts I and II.)					
Special Rules -					
For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections					
509(a)(1)/170(b)(1)(A)(vi) and received from	any one contributor, during the year, a contribution of the gr (ii) Form 990-EZ, line 1 Complete Parts I and II.	eater of (1) \$5,000 or (2) 2% of the			
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year,					
aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the					
prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For a section 501(c)(7), (8), or (10) organiza	ation filing Form 990 or 990-EZ, that received from any one co	ontributor, during the year,			
this box is checked, enter here the total conf	, charitable, etc, purposes, but these contributions did not ag tributions that were received during the year for an <i>exclusivel</i>	ly religious, charitable, etc.			
purpose. Do not complete any of the parts u	nless the General Rule applies to this organization because i	t received nonexclusively			
religious, charitable, etc, contributions of \$5	,000 or more during the year.	▶\$			
Caution: An organization that is not covered by	the General Rule and/or the Special Rules does not file Sche	dule B (Form 990, 990-EZ, or			
990-PF) but it must answer 'No' on Part IV. line	2 of their Form 990, or check the box on line H of its Form 99	90-EZ, or on line 2 of its Form			
990-Pr, to certify that it does not meet the filing	requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

	B (Form 990, 990-EZ, or 990-PF) (2009)	Page	
Name of org			ployer identification number
Michae	el F Bower & Dorothy L Cochrane Foundation		-3282518
Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
:	Michael Bower & Dorothy Cochrane 80 Watering Pond Road Guilford CT 06437	\$ <u>13,6</u> 1	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution.)
(a) Number	(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) Number	(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) Number	(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) Number	(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) Number	(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.)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

of 1

of Part II

Name of organization

Michael F Bower & Dorothy L Cochrane Foundation

Employer identification number 22-3282518

(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	600 Shres of General Electric	-	
		\$ 9,618.	11/18/09
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u> -	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	
(a) Io. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
}		\$	
(a) lo. from Part l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	

1

Form 990-PF, Page 10, Part XV, Line 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs Name Michael F Bower Address 80 Watering Pond Road 06437 (203) 458-8969 City, St. Zip, Phone Guilford CTThe form in which applications should be submitted and information and materials they should include: Letter: The foundation has only made contributions to preselected charitable organizations to date. Any submission deadlines: none Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: Awards to new institutions if made would beless than \$100.00. No grants Name . . Michael F Bower Address 80 Watering Pond Road CT 06437 (203) 458-8969 City, St, Zip, Phone Guilford The form in which applications should be submitted and information and materials they should include: Any submission deadlines: none

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

To individuals: to date none anticipated.

Supporting Statement of:

Form 990-PF, p7/Part IX-A, Expenses

Description	Amount	
Kripalu	9,000.	
Hazelden		
Sonoma Ashram Foundation	5,000.	
CT Food Bank	100.	
WSHU	108.	

Total <u>14,258.</u>