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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

F	or ca	lendar	year 2009, d	or tax year beg	inning			, 2009	, and end	ling					20
G	Che	Check all that apply Initial return		Ir	itial return	of a former p	oublic cha	rity	ty Final return						
				Amended	return		Addres	ss change		Na	ame (	change			
_			Name of fou	ndation						<i>,</i>	A Em	ployer iden	tificat	tion number	
	Use the IRS														
	lat	oel.	LAURENTI	FAMILY C	HARITA	BLE TRU	JST					22	2-3	697005	
	Othe	rwise,	Number and	street (or P O box	number if n	nail is not de	livered to street	address)	Room/si	uite	B Teles	phone number (	see pa	ge 10 of the instructions	5)
		int													
		ype. pecific	941 WHIT	TEHORSE AV	ENUE				SUITE	10		( (	509	) 581-210	00
		ctions.	City or town,	state, and ZIP co	de						C If ex	emption app	lication	1 15	
										- 1,	pending, check here  D 1. Foreign organizations, check here				▶ 🔲
			HAMILTON	N, NJ 0861	)						2 Foreign organizations, check here 85% test, check here and attach computation				
F	Che	ck type	e of organiza	tion X Sect	ion 501(c	)(3) exem	pt private f	oundation							
	S	ection 4	4947(a)(1) nor	nexempt charitab	le trust	Othe	r taxable pr	ıvate founda	tion						
- 1	Fair	marke	et value of all	assets at end	J Accou	nting met	hod X C	ash Acc	crual					(A), check here .	
			m Part II, col	(c), line		ner (speci				1	= If th	e foundation	ı ısın a	a 60-month terminati	ion
		▶ \$		27,358.		column (d)	must be on	cash basıs )			und	er section 50	7(b)(1)	(B), check here	<u>▶                                    </u>
ΞI	Part	Analy	sis of Reve	nue and Expen	ses (The	(a) Reve	enue and	(b) Net inve	netment.	(6)	Λ σ	etad not		(d) Disbursem	
7				olumns (b), (c), ar equal the amoun		expen	ses per	incom		<sup>(c)</sup>	nco Inco	sted net ome		for charitab purposes	
72				e 11 of the instruc		bo-	oks	,	· .					(cash basis o	
∍ <sup>-</sup> -	1	Contribut	tions, gifts, grants,	etc , received (attach so	chedule)										
	2	Check		oundation is <b>not</b> red Sch B											
5	3	Interest		temporary cash inve			15,518.		5,518.				o	ATCH 1	
Ĉ	4	Divider	nds and intere	st from securities	L		28,687.	2	28,687.					ATCH 2	
	5 a	Gross r	rents	. <b></b> .											
2	b	Net rent	tal income or (los	ss)									$\perp$		
۾ ڇ	6a	Net gair	n or (loss) from s	sale of assets not on			543.								
Revenue	b		ales price for all on line 6a	140	,000.										
ڏ چ	7	Capital	gain net inco	me (from Part IV,	line 2) .	- <u></u>			543.				) E /	CEIVED	
<u></u>	8			algaın								r	(1)	2 EIVED	
	9	Income	e modifications ales less retums	s · · · · · · · ·	• • • •							la .			72
	10 a		wances · · ·	• -								188 N	IAY_	1 8 2010	8
			ost of goods sold						_				+		8
	1			(attach schedule)								0	СT	DEN, UT	<u> </u>
	11			n schedule)			44,748.		4 740				7	JLIN, UI	
_	12			rough 11			44,748	4	4,748.				_		
	13			s, directors, trustees											
Š	14			ries and wages .		•		<del></del> _							
ns.	15			oyee benefits	• • • •								+	<del></del>	
G	16a		ees (attach sch		.;; -, · · ├	<del></del>	6,162.		3,081.	<u> </u>			<u> </u>		3,081
Ē	•			ach schedule) ATC			4,045.		4,045.	<u> </u>		•	<del>-  -</del>		, 001
Administrative Expenses	1. C			es (attach schedu			3,043.		1,040.				+		
itra	17			· · · · · · · · · · · · · · · · · · ·			15.		15.				+		
inis	18		-	(see page 14 of the ins	_								+		
Ē	19			schedule) and de					. —		<del></del>		+		
Ă	20										<del></del>		╬		
Operating and	21			and meetings						<del> </del>				<u> </u>	
ğ	23			ions			30.	-		ļ			+		30
atir	24			administrative ex									+	· <del>··</del>	
)er;	~~		_	administrative e			10,252.		7,141.			(	).	5	3,111
ŏ	25		•	grants paid			46,730.		,				+		5,730
	26		•	grants paid sements Add lines 2			56,982.	<del></del>	7,141.			(	).		9,841
_	27		ct line 26 from		and 25								+		<del></del>
	i .			enses and disburser	ents		-12,234								
	1			me (if negative, e	–			3	7,607.	-			1		
_	1			(if negative, ente								-0-	-		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. \* ATCH 4 Jsa \*\* ATCH 5 9E1410 1 0000 2 FK1WQ F678 5/12/2010 7:51:01 AM V 09-6.1 PR-22287

Form 990-PF (2009)

PAGE 4

Fo	rm <b>9</b> 9	D-PF (2009)	22-3	3697005	Page 2
_		Attached schedules and amounts in the	Beginning of year	End	of year
L	'art I	Balance Sheets  description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	1,582.	7,988.	
	2	Savings and temporary cash investments	129,956.	149,524.	154,893
	3	Accounts receivable			
	١	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			
	0	, , ,			
	_	disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
	_	Less allowance for doubtful accounts ▶			
sets	8	Inventories for sale or use	930.	930.	930
SS		Prepaid expenses and deferred charges ATCH .7			
Ä		Investments - U S and state government obligations (attach schedule) *.*	48,667.	0.	<u> </u>
	1	Investments - corporate stock (attach schedule) ATCH 9	210,190.	334,167.	<u> </u>
		Investments - corporate bonds (attach schedule) ATCH 10	188,598.	68,598.	12,600
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) ATCH 11	500,163.	513,993.	517,699
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	1,080,086.	1,075,200.	1,027,358
_	17	Accounts payable and accrued expenses			
	18	Grants payable	<u> </u>		
s	19	Deferred revenue			
ij		Loans from officers, directors, trustees, and other disqualified persons			
iabiliti	24	· · · · · · · · · · · · · · · · · · ·			
Ë	1	Mortgages and other notes payable (attach schedule)	46,616.	53,964.	
	22	Other liabilities (describe ► ATCH_12)	- 40,010.		
	23	Total lightilities (odd lines 47 through 22)	46,616.	53,964.	
_	23	Total liabilities (add lines 17 through 22)	40,010.	33, 904.	
		Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.	1 000 470	1 001 036	
2	24 25 26	Unrestricted	1,033,470.	1,021,236.	
횰	25	Temporarily restricted			
ä	26	Permanently restricted			
밀		Foundations that do not follow SFAS 117,			
Ţ		check here and complete lines 27 through 31. ▶			
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets	30	Total net assets or fund balances (see page 17 of the			
Š		instructions)	1,033,470.	1,021,236.	
	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	1,080,086.	1,075,200.	
	art I	Analysis of Changes in Net Assets or Fund E			<u></u>
_		I net assets or fund balances at beginning of year - Part II,	<del></del>	agree with	
•			, ,	_	1,033,470
2		an amount from Double has 0.7-			-12,234
		er increases not included in line 2 (itemize)		· · · · · · · · · · <del>- ·</del>	12,234
J	Othe	a increases not included in line 2 (itemize)	·		

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶\_\_\_\_\_\_ 1,021,236. 5

\*\*ATCH 8

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30.

Form 990-PF (2009)

1,021,236.

P	art IV Capital Gains	s and Losses for Tax on Inv	estment Income			
	(a) List an 2-story b	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
1 a	SEE PART IV SCHE	DULE				
_ <u>k</u>	)					
		<del> </del>				
_0	<u> </u>					
	)	(f) Depreciation allowed	(g) Cost or other basis	 		<del></del>
_	(e) Gross sales price		(h) Gain or (lo (e) plus (f) mini			
_a						
_ <u>b</u>						
_0						
-6		· · · · · · · · · · · · · · · · · · ·				
-		howing gain in column (h) and owr	ned by the foundation on 12/31/69		Garage (Cal. (b) a	an minus
_	(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (ı)		Gains (Col (h) g (k), but not less t Losses (from co	han -0-) <b>or</b>
_		as of 12/31/69	over col (j), if any		200303 (110111 00	
_ <u>a</u>						<del></del>
_						
_0						<del></del>
e						
	Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		543.
3	Net short-term capital gair	'' ) or (loss) as defined in sections 12		<del>-</del>	-	
•	· · · · · · · · · · · · · · · · · · ·	, line 8, column (c) (see pages 13				
	_	line 8	•	3		
Р			iced Tax on Net Investment Inc	ome		
W			utable amount of any year in the ba	ase period	<sup>d?</sup>	Yes X No
_			, see page 18 of the instructions be	fore mak	ing any entries	<del></del>
_	(a)	(b)	(c)	Jore mak	(d)	
	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions 57,050.	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	col (c))
	2008 2007	58,569.	1,036,360. 1,092,599.			0.055048
_	2007	46,450.	1,085,267.			0.042801
_	2005	53,750.	1,052,866.			0.051051
_	2004	51,000.	1,003,916.			0.050801
2	Total of line 1, column (d)	ļ		2		0.253306
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		0.050661
4	Enter the net value of nor	ncharitable-use assets for 2009 from	m Part X, line 5	4		990,500.
5	5 Multiply line 4 by line 3					50,180.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		376.
7	Add lines 5 and 6			7	· · · · · · · · · · · · · · · · · · ·	50,556.
8	Enter qualifying distribution If line 8 is equal to or great VI instructions on page	ens from Part XII, line 4 eater than line 7, check the box in the 18	n Part VI, line 1b, and complete t	8 hat part i	using a 1% tax	49,841.

Par	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he 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		7	52.
	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		7	52.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		7	52.
6	Credits/Payments Credits/Payments			
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 511.			
b	Exempt foreign organizations-tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		5	11.
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2	241.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
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		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	_		
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation $\blacktriangleright$ \$(2) On foundation managers $\blacktriangleright$ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
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		Х
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6		Х
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	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► NJ,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27) <sup>7</sup> 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

Par	t 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 page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Www.LAURENTITRUST.ORG			
14	The books are in care of ► LAURENCE R. LAURENTI, JR. Telephone no ► 609-581	-21	00	
	Located at ▶941 WHITEHORSE AVENUE TRENTON, NJ ZIP+4 ▶ 08610		<b></b>	
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			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		•	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?		1	
	(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	ļ		
	termination of government service, if terminating within 90 days ) Yes X No			
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)?	1b		Х
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2009?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	İ		
	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			
	6e, Part XIII) for tax year(s) beginning before 2009?			
	If "Yes," list the years		1	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement - see page 20 of the instructions )	2b	ļ <u> </u>	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	D			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business		1	
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			J.
	foundation had excess business holdings in 2009 )	3 b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	_ <u>^</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4 b		Х

	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
5 a	During the year did the foundation pay or incur any amou (1) Carry on propaganda, or otherwise attempt to influer (2) Influence the outcome of any specific public election	nce legislation (section		Yes X No		
	directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other	ner sımılar purposes?				
	(4) Provide a grant to an organization other than a chari section 509(a)(1), (2), or (3), or section 4940(d)(2)? (	see page 22 of the ins	structions)	. Yes X No	,	
	(5) Provide for any purpose other than religious, charital purposes, or for the prevention of cruelty to children or	r anımals?			,	
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans. Regulations section 53 4945 or in a current notice regard	ing disaster assistant	e (see page 22 of the	instructions)?	5b	
	Organizations relying on a current notice regarding disast			▶□		1
С	If the answer is "Yes" to question 5a(4), does the foundation	•				
	because it maintained expenditure responsibility for the gr			Yes No	'	
	If "Yes," attach the statement required by Regulations section				l l	
6 a	Did the foundation, during the year, receive any funds, d	lirectly or indirectly, to	pay premiums			
	on a personal benefit contract?				·	.,
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a	personal benefit contra	ct?	6b	X
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pair	rty to a prohibited tax	shelter transaction?	. Yes X No	·	
b	If yes, did the foundation receive any proceeds or have a					X
Pai	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers,	Highly Paid Emplo	oyees,	
1	and Contractors List all officers, directors, trustees, foundation m	anagers and their	compensation (see	name 22 of the instri	ictions)	
<u>.                                     </u>	(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 other allow	
ĀT	TACHMENT 13		0.	0.		0
	Compensation of five highest-paid employees (ot If none, enter "NONE."	her than those inc	luded on line 1 - se	ee page 23 of the inst	ructions).	
	) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allov	
ИОИ	NE .		0.	0.		0
					<del> </del>	
						<del></del>
Tota	I number of other employees paid over \$50,000 .					

Form 990-PF (2009) 22-3697005	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
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	
	0
<b>i</b>	l I
Total number of others receiving over \$50,000 for professional services	NONE
Total number of others receiving over \$50,000 for professional services	▶ NONE
Total number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	▶ NONE  Expenses
Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number	
Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities duning the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc  1 INTERFAITH CARE GIVERS - PROMOTES THE INDEPENDENCE AND DIGNITY OF HOMEBOUND ELDERLY AND PEOPLE WITH DISABILITIES	Expenses
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List the foundation's four largest direct charitable activities dunng the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc  1 INTERFAITH CARE GIVERS - PROMOTES THE INDEPENDENCE AND DIGNITY OF HOMEBOUND ELDERLY AND PEOPLE WITH DISABILITIES BY MATCHING THEM WITH CARING VOLUNTEERS TO ASSIST THEM.  2 SUNSHINE FOUNDATION - ANSWERS THE DREAMS OF CHRONICALLY ILL, PHYSICALLY CHALLENGED, AND ABUSED CHILDREN WHOSE FAMILIES CANNOT FULFILL THEIR REQUESTS DUE TO FINANCIAL STRAINS.  3 BELMONT CENTER FOR COMPREHENSIVE TREATMENT - PROVIDES COMPASSIONATE, HIGH-QUALITY HEALTHCARE TO THE GREATER PHILADELPHIA REGION.	Expenses 5,000
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List the foundation's four largest direct charitable activities dunng the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc  1 INTERFAITH CARE GIVERS - PROMOTES THE INDEPENDENCE AND DIGNITY OF HOMEBOUND ELDERLY AND PEOPLE WITH DISABILITIES BY MATCHING THEM WITH CARING VOLUNTEERS TO ASSIST THEM.  2 SUNSHINE FOUNDATION - ANSWERS THE DREAMS OF CHRONICALLY ILL, PHYSICALLY CHALLENGED, AND ABUSED CHILDREN WHOSE FAMILIES CANNOT FULFILL THEIR REQUESTS DUE TO FINANCIAL STRAINS.  3 BELMONT CENTER FOR COMPREHENSIVE TREATMENT - PROVIDES COMPASSIONATE, HIGH-QUALITY HEALTHCARE TO THE GREATER PHILADELPHIA REGION.	Expenses 5,000 5,000

Part X-B Summary of Program-Related investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2 NONE	
All other program-related investments See page 24 of the instructions	
3 NONE	
otal. Add lines 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the instructions)	gn foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	876,417.
b	Average of monthly cash balances	1b	129,167.
C		1c	0.
d	Total (add lines 1a, b, and c)	1d	1,005,584.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,005,584.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	15,084.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	990,500.
6	Minimum investment return. Enter 5% of line 5	6	49,525.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ ☐ and do not complete this process.	ate operating	
1	Minimum investment return from Part X, line 6	1	49,525.
	Tax on investment income for 2009 from Part VI, line 5 2a 752.		,
b	Income tax for 2009 (This does not include the tax from Part VI)	1	
C	Add lines 2a and 2b	2c	752.
3	Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c from line 1	3	48,773.
4	Recoveries of amounts treated as qualifying distributions	4	······································
5	Add lines 3 and 4	5	48,773.
6	Add lines 3 and 4  Deduction from distributable amount (see page 25 of the instructions)	6	<u>-</u>
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	48,773.
		<u> </u>	
Ρć	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	l	<del></del>
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	49,841.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		<del> </del>
	purposes	2	0.
3	purposes  Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3 b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	49,841.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		•
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4		49,841.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	hether the f	
	qualifies for the section 4940(e) reduction of tax in those years		

22-3697005

Pa	art XIII Undistributed Income (see page	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
•		30.000			48,773.
•	Undistributed income, if any, as of the end of 2009				
2					
a	07 06 05				
ь 3	Excess distributions carryover, if any, to 2009				
_	ا ممه م				
	110111 2004				
b	110111 2000				
C	From 2006				
d	( 202				
e	110111 2000	13,586.			
	Total of lines 3a through e	13,000.			
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 49,841.				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)	·			
а	Applied to 2009 distributable amount				48,773.
	Remaining amount distributed out of corpus	1,068.			•
5	Excess distributions carryover applied to 2009				
6	(If an amount appears in column (d), the same 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	14,654.			
	Prior years' undistributed income Subtract				
IJ	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be				
7	distributed in 2010				
•	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	1,124.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	13,530.			
10	Analysis of line 9				
	Excess from 2005				
b	Excess from 2006				
С	Excess from 2007 4, 968.				
d	Excess from 2008 6, 202.				
	Excess from 2009 1,068.				

	rt XIV Private Oper	ating Foundations	see nage 27 of the	instructions and Par	t VII-A guestion 9)	NOT APPLICABLE
1 a	If the foundation has					
	foundation, and the ruling					1/2) == 1 10.40(.)(5)
þ	Check box to indicate wh		i private operating found		4942()	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	· · · · · · · · · · · · · · · · · · ·
	I or the minimum investment return from Part X for each				•	
	year listed					
b	85% of line 2a					
	Qualifying distributions from Part					
•	XII, line 4 for each year listed .					
d	Amounts included in line 2c not					
	used directly for active conduct					
e	of exempt activities					
_	directly for active conduct of					
	exempt activities. Subtract line					
3	2d from line 2c			<u> </u>		
•	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest- ment 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					
	ioans (section 512(a)(5))					
	or royalties) (2) Support from general					
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(iii)					
	<li>(3) Largest amount of sup- port from an exempt</li>					
	organization	<u> </u>				
	(4) Gross investment income				4:	· · · · · · · · · · · · · · · · · · ·
1-6	Supplementa	during the year - se	ompiete this part	only if the founda	ition nad \$5,000	or more in assets
<del>_</del>	Information Regarding			311 40110113.7	<del>.</del>	
'_	List any managers of	•		a than 70/ of the total		ad bu tha facedation
а	before the close of any	tax vear (but only if th	nave contributed more	more than \$5 000) (Se	e section 507(d)(2) )	ed by the foundation
			,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	ATTACHME	***				
b	List any managers of					large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	n has a 10% or greater	interest.	
	4-					
	N/A					
2	Information Regarding	-		•		
	Check here ► X if t	he foundation only r	nakes contributions	to preselected charit	able organizations ai	nd does not accept
	unsolicited requests for	or funds. If the foun	dation makes gifts, g	rants, etc (see page	28 of the instructio	ns) to individuals or
	organizations under ot	her conditions, comple	ete items 2a, b, c, and	d		
а	The name, address, a	nd telephone number	of the person to whon	n applications should be	e addressed	
b	The form in which appl	lications should be sul	omitted and information	on and materials they	should include:	
				•		
_						
С	Any submission deadli	nes.				
d	Any restrictions or li	mitations on awards,	such as by geogra	phical areas, charitat	ole fields, kinds of i	nstitutions, or other
	factors					•

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual	Foundation status of						
Name and address (home or business)	If recipient is an individual show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount				
a Paid during the year	or socialities contributes							
•								
ATTACHMENT 15								
			i					
			<u>}</u>					
Total			▶ 3a	46,730.				
<b>b</b> Approved for future payment								
Total			▶ 3b					

er gross amounts unless otherwise indicated		ated business income		section 512, 513, or 514	(e) Related or exempt function income
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See page 28 of the instructions)
a	<del>-</del>				
b					
g Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments			14	15,518.	
Dividends and interest from securities			14	28,687.	
Net rental income or (loss) from real estate  Debt-financed property					·
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	543.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory	,				
Other revenue a					<del> </del>
b					
·					
d i					
d e Subtotal Add columns (b), (d), and (e)				44,748.	
e	to verify calc	ulations) complishment of E	xempt Purp	oses	
Subtotal Add columns (b), (d), and (e)	to verify calc	ulations) complishment of E ch income is reporte	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 int XVI-B Relationship of Activities  ne No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of E ch income is reporte	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 int XVI-B Relationship of Activities  ne No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of E ch income is reporte	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 int XVI-B Relationship of Activities  ne No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of E ch income is reporte exempt purposes (	xempt Purped in column other than b	oses  (e) of Part XVI-A cont	ributed importantly
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 int XVI-B Relationship of Activities  ne No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of E ch income is reporte exempt purposes (	xempt Purped in column other than b	oses  (e) of Part XVI-A cont	ributed importantly
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	990-PF		Pagardina T	ransfers To an	d Tropco	otions	and Polati	onshins	With Non		age 13
Pa	rt XVII	Exempt Orga		ansiers to an	u Iransa	Cuons	anu Kelau	Onsinps		cnam	lable
1	ın se	he organization directly ction 501(c) of the C	ode (other than	section 501(c)(3) c	organizations					Yes	No
а	organi Trans	zations? fers from the reporting f	oundation to a no	ncharitable exempt orç	ganization of						
	(1) Ca	ash							1a(	1)	Х
	(2) 0	ther assets							1a(	2)	Х
þ		transactions									١,,
		ales of assets to a nonch									X
		urchases of assets from									X
		ental of facilities, equipm									X
		eimbursement arrangeme							1		X
		pans or loan guarantees									X
_		erformance of services of									$\frac{1}{x}$
C		ng of facilities, equipmer e answer to any of									
a		of the goods, other		· ·	=						
		in any transaction or		• •							
	value	in any transaction of	snamy arrang	ement, snow in co	namm (a) ti	io value	or the good	3, 001101 83	3013, 01 3014	1003 10	CCIVCO
(a) l	ine no	(b) Amount involved	(c) Name of n	oncharitable exempt orga	anization	(d) De	scription of transf	ers, transaction	s, and shanng a	rrangeme	nts
		N/A				N/A					
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	sectio	n 501(c) of the Code (oth s," complete the following (a) Name of organization	ner than section 50 g schedule		527?	nore tax		zations desci		Yes	× No
	<del></del>	(=/ 5. Signification		(2) 1) pc 51 0				-, - 500, 1011			
	Under belief,	penalties of perjury, I declift is true, correct, and com	are that I have exa plete Declaration of augusti	mined this return, included for preparer (other than ta	ding accompa axpayer or fidu	nying sch iciary) is	edules and stater pased on all infor	mation of whice	the best of my th preparer has	knowled any kno	lge and wledge
<u>e</u>	5	gnature of officer or trustee				Date	·	Title			
Sign Here	Paid Preparer's Use Only	Preparer's signature	Tay held	W.D.	Date 5/13	/10	Check if self-employ	ed ►  no	reparer's iden umber (See Sig age 30 of the in 200821814	nature o structions	
	Pa rep	Firm's name (or yours if			WN PC			EIN ▶ 22	-2027092		
	د ته	self-employed), address	•	HN DR							
		and ZIP code	PRINCE	TON, NJ		0.8	8540-6313	Phone no	609-520-	1188	

PRINCETON,

NJ

08540-6313 Phone no 609-520-1188

22-3697005

LAÜRENTI FAMILY CHARITABLE TRUST

FORM 990-PF - PART IV

FORM 990-PF - PART IV

FORM 990-PF - PART IV

Gross sale	Kind of Property		Description			or D	Date acquired	Date sold
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	Gain or (loss)	
			TAL GAIN DI				543.	
120,000.		120,000 SL	M CORP				03/30/2006	06/15/200
20,000.		20,000 FED: 20,000.	ERAL HOME LO	DAN BANK			VARIOUS	04/22/200
OTAL GAIN(LOS	SS)				• • • • • •		543.	

ATTACHMENT 1

ATTACHMENT

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

	NET	INVESTMENT	INCOME
REVENUE	AND	EXPENSES	PER BOOKS
			DESCRIPTION

15,518.

15,518.

15,518.

15,518.

TOTAL

CHARLES SCHWAB INTEREST INCOME

ATTACHMENT 2

7

## - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

	NET	INVESTMENT	INCOME	28,687.	28,687.
REVENUE	AND	EXPENSES	PER BOOKS	28,687.	28,687.
					TOTAL
			DESCRIPTION	CHARLES SCHWAB DIVIDEND INCOME	

22-3697005

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# FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES_	3,081.
ADJUSTED NET INCOME	0
NET INVESTMENT INCOME	3,081.
REVENUE AND EXPENSES PER BOOKS	6,162.
	TOTALS
DESCRIPTION	ACCOUNTING FEES

ATTACHMENT 3

PR-22287

ATTACHMENT

PAGE 21

ATTACHMENT

OTHER PROFESSIONAL FEES FORM 990PF, PART I

EXPENSES PER BOOKS REVENUE AND DESCRIPTION

INVESTMENT INCOME

4,045.

INVESTMENT MANAGMENT FEES

4,045.

4,045.

TOTALS

4,045.

4

ATTACHMENT 5

- TAXES FORM 990PF, PART I

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT INCOME

15.

15.

FOREIGN TAXES

DESCRIPTION

TOTALS

ATTACHMENT 5

PAGE 22

r,

ATTACHMENT

ATTACHMENT 6

REVENUE AND

- OTHER EXPENSES

PART I

FORM 990PF,

EXPENSES PER BOOKS

DESCRIPTION FILING FEES

30.

TOTALS

30.

CHARITABLE PURPOSES 30.

PAGE 23

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9

PREPAID EXPENSES AND DEFERRED CHARGES

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PART II

FORM 990PF,

PAGE 24
PR-22287
09-6.1

ATTACHMENT 7	ENDING <u>FMV</u>	. 930.	930.
	ENDING BOOK VALUE	086	930.
	DESCRIPTION	ACCRUED INTEREST	TOTALS
	DESCR	ACCRU	

ATTACHMENT 8

STATE OBLIGATIONS
STATE
AND
U.S.
1
ΙΙ
PART
990PF,
FORM

ENDING	BOOK VALUE
	DESCRIPTION

	ENDING FMV		
8 L			
ATTACHMENT 8	ENDING BOOK VALUE	.0	

0

0

PAGE 25

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PR-22287

PAGE 27

ATTACHMENT 10

ATTACHMENT 10	ENDING BOOK VALUE FMV	0. 68,598. 12,600.	69 509 12 600
FORM 990PF, PART II - CORPORATE BONDS	DESCRIPTION	SLM CORP 6/09 LEHMAN BROS HLDINGS 7.2%	O L R ECE

PART II

FORM 990PF,

PAGE 28

ATTACHMENT 11

5/12/2010 7:51:01 AM V 09-6.1 2FK1WQ F678

	ATTACHMENT 11
OTHER INVESTMENTS	

ENDING <u>FMV</u>	53,022. 99,083. 97,745. 168,348. 0. 24,749.	517,699.
ENDING BOOK VALUE	52,317. 100,000. 100,000. 161,526. 0. 25,021. 75,129.	513,993.
DESCRIPTION	AMERICAN CENTURY INFLATION PIMCO TOTAL RETURN FUND SCHWAB PREMIER INCOME FD VANGUARD GNMA FUND CAPITAL ONE NA 4.75% PIMCO FOREIGN BOND FUND METROPOLITAN WEST TOTAL RETURN	TOTALS

LAURENTI FAMILY CHARITABLE TRUST FORM 990PF, PART II - OTHER LIABILITIES

22-3697005

ATTACHMENT 12

ENDING BOOK VALUE

DESCRIPTION

DUE TO RELATED PARTIES

53,964.

TOTALS

53,964.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 13

		·	1 •11
EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	·	0
COMPENSATION	.0	·	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	TRUSTEE	GRAND TOTALS
NAME AND ADDRESS	LAURENCE R. LAURENTI, JR. 941 WHITEHORSE AVENUE HAMILTON, NJ 08610	BRIAN LAURENTI 941 WHITEHORSE AVENUE HAMILTON, NJ 08610	

ATTACHMENT 14

### FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

L LAURENTI

B LAURENTI

TRUST	
CHARITABLE	
FAMILY	
LAURENTI	

22-3697005

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

RECIPIENT NAME AND ADDRESS

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 15

AMOUNT

TOTAL CONTRIBUTIONS PAID

46,730

PAGE 32 ATTACHMENT 15

v 09-6 1

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PR-22287

### Laurenti Family Charitable Trust Charitable Contributions January 1, 2009 through December 31, 2009

Name/Address Grounds for Sculpture 18 Fairgrounds Road Trenton, NJ 08619	Amount 150
Interfaith Care Givers 207 Hilcrest Ave. Trenton, NJ 08619	5,000
Sunshine Foundation 1041 Mill Creek Drive Feasterville, PA 19053	5,000
Van Wezel Foundation, Inc. P.O. Box 3434 Sarasota, FL 34230	2,500
Dress for Success 9 Lamone Ave. Hamilton, NJ 08619	2,000
Platinum Minds P.O. Box 218 Mendham, NJ 07945	2,500
Villa Victoria Academy 376 West Upper Ferry Road Ewing, NJ 08628	1,000
National Multiple Sclerosis Society 1 Reed Street Philadelphis, PA 09147	100
Trenton Catholic Academy 175 Leonard Avenue Trenton, NJ 08610	2,365
Family Guidance Center Corp. 1931 Nottingham Way Hamilton, NJ 08619	1,500
Divine Mercy Parish/Holy Cross 201 Adeline Street Trenton, NJ 08611-2419	1,000
McCarter Theatre 91 University Place Princeton, NJ 08540	2,500

Belmont Center for Comprehensive Treatment 4200 Monument Road Philadelphia, PA 19131	5,000
Trenton Catholic Academy 175 Leonard Avenue Hamilton, NJ 08610	2,365
St. Lawrence Rehabilitation Center 2381 Lawrenceville Road Lawrenceville, NJ 08648-2024	1,500
Trenton Soup Kitchen 2 Escher Street Trenton, NJ 08609	1,000
P.H.S. Senior Living Foundation 13 Rozel Road, Suite 120 Princeton, NJ 08540	5,000
Van Wezel Foundation, Inc. P.O. Box 3434 Sarasota, FL 34236	750
Hole in the Wall Gang 565 Ashford Ctr. Road Ashford, CT 06278	2,500
Visitation Home P.O. Box 11242 Hamilton, NJ 08620	1,000
St. Judes; Childrens Research Hospital 262 Danny Thomas Place Memphis, TN 38105-1942	2,000
	\$ 46,730

•

### SCHEDULE D (Form 1041)

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

## **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

**Employer identification number** 

	LAURENTI FAMILY CHARITABLE TE				22-36970	05	
Not	e: Form 5227 filers need to complete <b>only</b> Pa						
Pa	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 (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1 a							,
		<u> </u>					
-					<u> </u>		
b	Enter the short-term gain or (loss), if any,	from Schedule D	-1, line 1b			1b	
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 partner			· · · · · · · · · · · · · · · · · · ·		3	
4	Short-term capital loss carryover Enter the 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 lir	ne 13,	5	
Pa	rt II Long-Term Capital Gains and Losse	s - Assets Held	More Than Or	ne Year	*		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, уг)	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
							<u> </u>
b	Enter the long-term gain or (loss), if any, fi					6 b	0
7	7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824					7	
8	Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts					8	<del></del>
9	9 Capital gain distributions			9	543		
10						10	
11	Long-term capital loss carryover Enter the Carryover Worksheet		. <i></i>	· · · · · · · · · · · · · · · · · · ·	<i></i>	11	(
12	Net long-term gain or (loss). Combine line column (3) on the back	s 6a through 11	ın column (f)	Enter here and on li	ne 14a,	12	543
For	Paperwork Reduction Act Notice, see the Instru					nedul	e D (Form 1041) 200

Sche	dule D (Form 1041) 2009					Page 2
Par			(1) Beneficiaries'	(2) Esta		(3) Total
	Caution: Read the instructions before completing this pa	art.	(see page 5)	or trus	it's	(0) 10.01
13	110t Short term games (1888)	13				
14	Net long-term gain or (loss):					E 4 3
а		14a				543.
b	,,,,,,	14b				<del></del>
		14c				543.
15	Total lies Seminar (research and research an	15	T Don't has 4s\ Wha	44 45		<del> </del>
to Pa	s: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form rt V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete Par	า 990 rt IV a	- I , Part I, line 4a)  II lind and the <b>Capital Loss Ca</b> l	es 14a and 15 <b>myover Works</b>	, colui s <b>heet,</b> a	nn (2), are net gains, go as necessary
	t IV Capital Loss Limitation					······································
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Pai	et I lu	ne 4c if a trust) the si	maller of		
				I	16	(
Note	The loss on line 15, column (3) or b \$3,000	i, in	e 22 (or Form 990-T, I		oss, co	omplete the Capital Loss
Carry	over Worksheet on page 7 of the instructions to figure your capital loss carryover			•		
	Tax Computation Using Maximum Capital Gains Rates					
	n 1041 filers. Complete this part only if both lines 14a and 15 in column			nount is ent	ered	in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), <b>and</b> Form 1041, line 22, is more t <b>ion</b> : Skip this part and complete the worksheet on page 8 of the instructi					
	ither line 14b, col. (2) or line 14c, col. (2) is more than zero, or	10/13	.,			
	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					
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part	and	complete the work	sheet on pa	age 8	of the instructions if
eithe	er line 14b, col (2) or line 14c, col (2) is more than zero		····	· · · ·		
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	·) .	17			
18	Enter the smaller of line 14a or 15 in column (2)					
	but not less than zero					
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		_		İ	
21	If the estate or trust is filing Form 4952, enter the					
22	amount from line 4g, otherwise, enter -0-		<del> </del> ,,			
22	Subtract line 21 from line 20. If zero or less, enter -0- Subtract line 22 from line 17 If zero or less, enter -0-		22			
23	Subtract line 22 from line 17 If zero or less, enter -U-		23			
24	Enter the smaller of the amount on line 17 or \$2,300		24		l	
	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				1	
	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 line	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 G instructions in the instructions for Form 1041)			[	31	
32	Add lines 30 and 31		. <u></u>	. <u></u>	32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate					
2.4	(see the Schedule Ginstructions in the instructions for Form 1041)				33	<del> </del>
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 he				24	
	G, line 1a (or Form 990-T, line 36)	<u></u>	<del> </del>		School	dule D (Form 1041) 2009

JSA

. . . .

Page 2 Schedule D-1 (Form 1041) 2009 Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side Employer identification number 22-3697005 LAURENTI FAMILY CHARITABLE TRUST Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales price (see page 4 of the (e) Cost or other basis (f) Gain or (loss) Subtract (e) from (d) (c) Date sold (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (see page 4 of the instructions) acquired (mo , day, yr ) (mo, day, yr) instructions) 6a 120,000 SLM CORP 03/30/2006 06/15/2009 120,000. 120,000. 20,000 FEDERAL HOME LOAN 04/22/2009 20,000. 20,000 VARIOUS BANK

Schedule D-1 (Form 1041) 2009

6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b . . . . . . . . . . . . . . .

0.