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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 Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number Name of foundation Use the IRS label 23-2930930 LACKAWANNA INSTITUTE Otherwise, Number and street (or P O box number if mail is not delivered to street address) R Telephone number (see the instructions) print 544 JEFFERSON AVE (570) 586-8073 or type City or town ZIP code See Specific If exemption application is pending, check here Instructions SCRANTON PA 18510 D 1 Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check Section 501(c)(3) exempt private foundation Check type of organization here and attach computation Section 4947(a)(1) nonexempt charitable trust X Other taxable private foundation If private foundation status was terminated Ε J Accounting method. X Cash Fair market value of all assets at end of year 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 2,268,962. (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Analysis of Revenue and Part I (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income income for charitable columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) Contributions, gifts, grants, etc, received (att sch) 252,052. Ck ► I if the foundn is not req to att Sch B Interest on savings and temporary 137 137 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 REVENU b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 252,189. Total. Add lines 1 through 11 137. 12 13 Compensation of officers, directors, trustees, etc Other-employee, salaries, and wages Pension plans, employee benefits 14 16 a Legal fees (attach schedule) b Accounting fees (attach sch) 10 c Other prof fees (attach sch) O scanned nov 3 c 2010 28,772. Taxes (attach) changle) see instit.) See FLine 18 Stm 35,966 3,597 3,597. 61,636 sch) and depletion L-19 Stmt 61,636 0 1,493. 11,945. 1,493. 14,931 Occupancy 21 Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) 26,030. See Line 23 Stmt 26,030. Total operating and administrative expenses. Add lines 13 through 23 66,726 66,747. 138,563. 5,090 Contributions, gifts, grants paid Total expenses and disbursements. 5,090 66,726. 66,747. Add lines 24 and 25 138,563 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 113,626 0. **b** Net investment income (if negative, enter -0) C Adjusted net income (if negative, enter -0-)

TEFA0301

02/02/10

Dark	- 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	or year
raic	. 11	See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	74,575.	146,359	. 146,359.
	2	Savings and temporary cash investments		53,808	
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)			
Ą		Less, allowance for doubtful accounts			
S	8	Inventories for sale or use			31.7.
ASSETS	9	Prepaid expenses and deferred charges			
Š	10:	a Investments – U.S. and state government obligations (attach schedule)		-	
	۱ ۱	b Investments — corporate stock (attach schedule)	·		
	1	c Investments — corporate bonds (attach schedule)			
	i	Investments – land, buildings, and			1
	' '	equipment. basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ 2,484,755.			
		Less accumulated depreciation (attach schedule) L-14 Stmt - 445,960.	1,989,806.	2,038,795	2,038,795.
		Other assets (describe DEPOSITS)	90,955.	30,000	. 30,000.
	16	Total assets (to be completed by all filers – see instructions. Also, see page 1, item I)	2,155,336.	2,268,962	. 2,268,962.
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			
B	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ	21	Mortgages and other notes payable (attach schedule)			
i	22	Other liabilities (describe ►)			
Ē	22	Total liabilities (add lines 17 through 22)			
<u>s</u>	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			
ËÜ	25	Temporarily restricted			
, D	26	Permanently restricted .			
A B A L A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds	1,360,853.	1,471,478	
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds	794,483.	797,484	
RS	30	Total net assets or fund balances (see the instructions)	2,155,336.	2,268,962	
	31	Total liabilities and net assets/fund balances (see the instructions)	2,155,336.	2,268,962	-
Part	: III	Analysis of Changes in Net Assets or Fund Balance			
1		I net assets or fund balances at beginning of year — Part II, colum of-year figure reported on prior year's return)	ın (a), lıne 30 (must agre	ee with	2,155,336.
2		or amount from Part I, line 27a		2	
3		Increases not included in line 2 (itemize)		<u></u>	
4		lines 1, 2, and 3			
5		ases not included in line 2 (itemize)	•		
		I net assets or fund balances at end of year (line 4 minus line 5) -	- Part II column (h) line		
		accord or raina balantoos at ona or your (line + millias line s) =	- are no column (b), link	'	

(a) List and desc • 2-story brick warel	cribe the kind(s) of proper nouse, or common stock,	rtv sold (e.a. re	eal estate	(b) How ac	hase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a	<u> </u>			D Dona	ation		
b		-	·				····
С	·						
d		-					
е							
(e) Gross sales price	(f) Depreciation (or allowa		(g) Cost or other plus expense o	basis f sale		(h) Gain or (e) plus (f) m	(loss) inus (g)
a							
b						····	
<u>c</u>			<u> </u>				
<u>d</u>	 			-			
e				150			
Complete only for assets sh (i) Fair Market Value					,	(I) Gains (Colugain minus column (F	ımn (h)
as of 12/31/69	(j) Adjusted as of 12/3		(k) Excess of coll over column (j),		th	an -0-) or Losses (fr	om column (h))
a b						·	
C	·						
d							
e							
2 Capital gain net income or ((net capital loss)	If gain, also	enter in Part I, line 7 er -0- in Part I, line 7	7	2		
3 Net short-term capital gain of	or (loss) as defined in sec			_			
. •		, ,	• •	٦			
			It (loss) enter ().	H-			
If gain, also enter in Part I, in Part I, line 8	iiile o, coluitiii (c) (see tii	ne instructions)	11 (1000); 011101		3		
in Part I, line 8 Part V	der Section 4940(e) vate foundations subject t	for Reduce	d Tax on Net Inves		me		
Part I, line 8 Part V Qualification Universe Proposition Universe Propo	der Section 4940(e) vate foundations subject to this part blank. section 4942 tax on the digualify under section 4940	for Reduce to the section 49 distributable amo	d Tax on Net Invest 940(a) tax on net invest ount of any year in the b	ment income)	me	Yes	☐ No
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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 – se	e the inst	ructions)		
1 a Exempt operating foundations described in section 4940(d)(2), check here	7			_	نـ ـ ـ .
Date of ruling or determination letter (attach copy of letter if necessary - see instr.)					
b Domestic foundations that meet the section 4940(e) requirements in Part V,		1			0.
check here ▶ 🕱 and enter 1% of Part I, line 27b					į
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	_				ļ
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		-			ار
foundations only Others enter -0-)		2			0.
3 Add lines 1 and 2	٥.	3			<u>0.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others ente	r -U-)	5			0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-6 Credits/Payments		3			0.
6 Credits/Payments a 2009 estimated tax pmts and 2008 overpayment credited to 2009					!
b Exempt foreign organizations — tax withheld at source 6b					}
c Tax paid with application for extension of time to file (Form 8868) 6c		-			1
d Backup withholding erroneously withheld 6d					1
7 Total credits and payments Add lines 6a through 6d		7 7			
8 Enter any penalty for underpayment of estimated tax. Check here		8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ 9			0.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶ 10			0.
11 Enter the amount of line 10 to be Credited to 2010 estimated tax	d	▶ 11			
Part VII-A Statements Regarding Activities					
1a 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?	aid it		1a		Х
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1ь		x
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any mate or distributed by the foundation in connection with the activities	erials pu	ıblıshed			
c Did the foundation file Form 1120-POL for this year?			1 c		x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
(1) On the foundation \$ (2) On foundation managers \$					
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in foundation managers	nposed	on			
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 of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the cha.	, articie nges	S	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					1
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 direction	s that c	onflict			
with the state law remain in the governing instrument?			6		<u> </u>
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	X	<u> </u>
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)	•				
PA - Pennsylvania			-		
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 <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>			8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,'	2(j)(3) o comple	r 4942(j)(5 te <i>Part XI</i>)	9		
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing					
and addresses			10	<u> </u>	х
BAA			Form 9 9	0-PF	(2009)

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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	x
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12	x
Did the foundation comply with the public inspection requirements for its annual returns and exemulation with the public inspection requirements for its annual returns and exemulation with the public inspection requirements for its annual returns and exemulation with the public inspection requirements for its annual returns and exemulation with the public inspection requirements for its annual returns and exemulation with the public inspection requirements for its annual returns and exemulation with the public inspection requirements for its annual returns and exemulation with the public inspection requirements for its annual returns and exemulation with the public inspection requirements for its annual returns and exemulation with the public inspection requirements.	ption application?	13 X	
14 The books are in care of ► DOUGLAS FORRER CPA Tele	enhone no ► (570)	586-8	073
Located at > 1503 FAIRVIEW ROAD CLARKS SUMMIT PA ZIP	+4 18411	===	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check i			FIT
and enter the amount of tax-exempt interest received or accrued during the year	▶ 15		لسا
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Require			
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Ye	s No
1 a 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		1 1
(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 No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No		
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions describe Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the inst	d in ructions)?	1 b	
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 a that were not corrected before the first day of the tax year beginning in 2009?	acts,	1 c	x
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	a		
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 No		
If 'Yes,' list the years ▶ 20, 20, 20			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4)			
all years listed, answer 'No' and attach statement - see the instructions.)		2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years 20, 20, 20, 20	ears here		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No		
b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundary or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period apply 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 Č, Form 4720, determine if the foundation had excess business holdings in 2009.)	tO	3 ь	\perp
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	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
GA Jour bognining in 2007			

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Doub VII D Cook Double 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		4700 14	23-2930	0930	Page 6
Part VII-B Statements Regarding Activiti		1 4/20 May Be Requ	uired (continued)		
5a During the year did the foundation pay or incur(1) Carry on propaganda, or otherwise attempt	-	(section 4945(e))?	Yes X N	10	
(2) Influence the outcome of any specific public	c election (see section 4	•			
on, directly or indirectly, any voter registrat (3) Provide a grant to an individual for travel, s	ion drive?		H. H	lo lo	
•	•	•		•	
(4) Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instru	ctions)	Yes X	10	
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	s, charitable, scientific, of cruelty to children o	literary, or r animals? .	Yes X N	10	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	ne transactions fail to qua a current notice regardi	ualify under the exception ng disaster assistance	ns	5b	
Organizations relying on a current notice regard	ding disaster assistance	e check here	▶ 🗌		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsi	e foundation claim exemblity for the grant?	mption from the	Yes I	No	
If 'Yes,' attach the statement required by Regul	ations section 53 4945-	5(d)			
6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirectly	ectly, to pay premiums	Yes X	No	
b Did the foundation, during the year, pay premium of 'Yes' to 6b, file Form 8870	ims, directly or indirectl	y, on a personal benefit	contract?	6b	X
7a At any time during the tax year, was the foundation	ation a party to a prohib	ited tax shelter transact	ion? Yes X	10	
b If yes, did the foundation receive any proceeds	or have any net income	e attributable to the trans	saction?	7b	
Part VIII Information About Officers, Di and Contractors	rectors, Trustees,	Foundation Manag	jers, Highly Paid Ei	mployees	,
1 List all officers, directors, trustees, foundation	managers and their co	omnensation (see instru	uctions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)		(e) Expense other allow	
NONE			• • • • • • • • • • • • • • • • • • • •		
2 Compensation of five highest-paid employees	s (other than those incl	uded on line 1— see ins	tructions). If none, enter	r 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
NONE					
0					
0					
0					
0					
Total number of other employees paid over \$50,000			>	Form 990	None

	3-29309	
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly F and Contractors (continued)	'aid Em	ployees,
3. Five highest-paid independent contractors for professional services — (see instructions). If none, enter 'NONE.'		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		None
		Моне
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 HILL SECTION PARK PROJECT		
		126,112.
2 URBAN BEAUTIFICATION - TREE PLANTING PROGRAM		
]	
		9,123.
3 COMMUNITY HERB GARDEN PROJECT		
		1,124.
4 ACQUIRE AND RESTORE C.S. WOOLWORTH HISTORIC SITE		
		296.
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1		
2		
*		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	•	
BAA		Form 990-PF (2009

Form 990-PF (2009) LACKAWANNA INSTITUTE	23-2930930	Page 8
Part X Minimum Investment Return (All domestic foundations must complete this see instructions.)	part. Foreign found	lations,
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	1 b	81,898.
c Fair market value of all other assets (see instructions)	1 c	0.
d Total (add lines 1a, b, and c)	1 d	81,898.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	 	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	81,898.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3		
(for greater amount, see instructions)	4	1,228.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	80,670.
6 Minimum investment return. Enter 5% of line 5	[6]	4,034.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) priva and certain foreign organizations check here ▶ x and do not complete		ations
1 Minimum investment return from Part X, line 6	1 1	
2a Tax on investment income for 2009 from Part VI, line 5	,	
b Income tax for 2009. (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	····
5 Add lines 3 and 4	5	
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	
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc. purposes:	:	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	66,747.
b Program-related investments – total from Part IX-B .	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes		
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line		66,747.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	66,747.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	ng whether the foundation	on

Form **990-PF** (2009)

Part XIII. Undistributed Income (see instructions)

1 Distributable amount for 2009 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only b Total for prior years 20, 20, 20 3 Excess distributions carryover, if any, to 2009 a From 2004 0.	
2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only b Total for prior years 20, 20, 20 3 Excess distributions carryover, if any, to 2009	
a Enter amount for 2008 only b Total for prior years 20, 20, 20 Excess distributions carryover, if any, to 2009	
3 Excess distributions carryover, if any, to 2009	
a From 2004 0.	
b From 2005 0 .	
c From 2006 0.	
d From 2007 46,956.	
e From 2008 124,498.	
f Total of lines 3a through e 171,454. 4 Qualifying distributions for 2009 from Part	1
XII, line 4 ► \$ 66,747.	
a Applied to 2008, but not more than line 2a	ļ
b Applied to undistributed income of prior years (Election required — see instructions)	
c Treated as distributions out of corpus (Election required — see instructions)	ļ
d Applied to 2009 distributable amount	
e Remaining amount distributed out of corpus 66,747.	<u></u> j
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the	
same amount must be shown in column (a))	
	i
6 Enter the net total of each column as indicated below:	3
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 238, 201.	í
b Prior years' undistributed income Subtract line 4b from line 2b	ļ
c Enter the amount of prior years' undistributed income for which a notice of deficiency	
has been issued, or on which the section	i
4942(a) tax has been previously assessed	
d Subtract line 6c from line 6b Taxable	ļ
amount – see instructions	
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see instructions	
The 2d Tunable union See man actions	
f Undistributed income for 2009 Subtract lines	
4d and 5 from line 1. This amount must be distributed in 2010	Ο.
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)	
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 238, 201.	
10 Analysis of line 9	
a Excess from 2005 0.	1
b Excess from 2006 0.	
c Excess from 2007 46,956.	ļ
d Excess from 2008 124,498.	İ
e Excess from 2009 66,747.	(00.55)

Form 990-PF (2009) LACKAWANNA INSTI Part XIV Private Operating Foundation		tions and Part V	/II-Δ guestion 9	23-293093) Page 10
1a If the foundation has received a ruling or do	etermination letter th			and the ruling	04/03/98
b Check box to indicate whether the foundation	•	iting foundation desc	cribed in section	X 4942(j)(3) or	4942(1)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
each year listed	0.	0.	0.	-44.	-44.
b 85% of line 2a	0.	0.	0.	-37.	-37.
c Qualifying distributions from Part XII, line 4 for each year listed	66,747.	124,498.	46,956.	615,686.	853,887.
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 	66,747.	124,498.	46,956.	615,686.	853,887.
3 Complete 3a, b, or c for the alternative test relied upon:					
a '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 investment return shown in Part X, line 6 for each year listed	2,689.	2,622.	6,335.	-29.	11,617.
c 'Support' alternative test — enter					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information assets at any time during th	(Complete this e year — see ins	part only if the output of the output of the contractions.)	organization ha	d \$5,000 or moi	e in
1 Information Regarding Foundation Manag a List any managers of the foundation who had close of any tax year (but only if they have	ave contributed more	e than 2% of the tota an \$5,000) (See se	al contributions rece ection 507(d)(2))	eived by the foundat	ion before the
b List any managers of the foundation who of a partnership or other entity) of which the f	wn 10% or more of t oundation has a 10%	the stock of a corpor % or greater interest	ration (or an equally	large portion of the	e ownership of
2 Information Regarding Contribution, Gran Check here X if the foundation only m requests for funds If the foundation makes complete items 2a, b, c, and d	akes contributions t	o preselected charit	able organizations	and does not accept zations under other	unsolicited conditions,
a The name, address, and telephone number	of the person to wh	nom applications sho	ould be addressed:		
b The form in which applications should be s	ubmitted and inform	ation and materials	they should include		
c Any submission deadlines	-	· · · · · ·			
d Any restrictions or limitations on awards, s	uch as by geographi	cal areas, charitable	e fields, kinds of ins	stitutions, or other fa	ctors

the second of th	oonanaoa,			
3 Grants and Contributions Paid During the Ye	ar or Approved for Futu	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	Contribution	
Name and address (home or business) a Paid during the year	substantial contributor	recipient	CONTINUUM	
	<u> </u>			
Total			<u>▶ 3a</u>	<u> </u>
b Approved for future payment				
Total			► 3t	ol

Part XVI-A Analysis of Income-Producing Activities

inter gross amo	unts unless otherwise indicated		business income		section 512, 513, or 514	
•		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program s	ervice revenue	code		code		(see the instructions
a						
b				 		
		<u> </u>				<u> </u>
				+ +		
				+ +		
f						
_	contracts from government agencies	 		+		
	ip dues and assessments			14	137.	
	avings and temporary cash investments and interest from securities			111	137.	
	income or (loss) from real estate	· · · · -				
a Debt-finan						
	nanced property			 		
	come or (loss) from personal property					
	stment income			 		
) from sales of assets other than inventory			+		
	e or (loss) from special events					
	it or (loss) from sales of inventory					
11 Other reve			I.			,
d						
d e						
е	Add columns (b), (d), and (e)				137.	
e Subtotal / 13 Total. Add See worksheet	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c		hment of Evem	nt Purnos	13	13
Subtotal // 13 Total. Add See worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e)	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 13 Total. Add See worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	13
2 Subtotal // 3 Total. Adding worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 3 Total. Add see worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 3 Total. Add see worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 3 Total. Add see worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 3 Total. Add see worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 3 Total. Add see worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 3 Total. Add see worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
2 Subtotal // 3 Total. Adding worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
2 Subtotal // 3 Total. Adding worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 3 Total. Add see worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 3 Total. Add see worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 3 Total. Add see worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 13 Total. Add See worksheet art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 13 Total. Add See worksheet	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
Subtotal // 13 Total. Add See worksheet	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
e Subtotal // 13 Total. Add See worksheet	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	13
e Subtotal // 13 Total. Add See worksheet Part XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the
e Subtotal // 13 Total. Add See worksheet	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	13
e Subtotal // 13 Total. Add See worksheet	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) In the instructions for line 13 to verify c Relationship of Activities to the	ncome is reporte	hment of Exem	Part XVI-A co	es	to the

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

_		Excilipt	Organi	IZALIOIIS		<u> </u>								
	descr	ie organization ibed in section ng to political o	501(c) of	t the Code (otl	ngage in any o her than sectio	f the following w on 501(c)(3) orga	ith an nizati	y other ions) or	organization in section 52	27,			Yes	No
			-		a noncharitable	e exempt organiz	ation	of						
(1) Cash												1a (1)		x
(2) Other assets												1a (2)		х
b Other transactions														
(1) Sales of assets to a noncharitable exempt organization .												1 b (1)		x
(2) Purchases of assets from a noncharitable exempt organization											1 b (2)		x	
	• •	ental of facilitie				,aa.						1 b (3)		x
		eımbursement		•	assets							1 b (4)		x
		oans or loan gu	•					•				1 b (5)		x
		erformance of			n or fundraisin	ia solicitations						1b (6)		x
					•	s, or paid emplo	2001					1c		x
	Contain	ig or identics,	cquipino	int, maining no	13, 011101 23301	s, or paid emplo	yccs					10		
	the go	ods, other ass	ets, or se	ervices aiven l	ov the reporting	ollowing schedule g foundation If t (d) the value of	he fou	undation	n received les	s than fair i	market	value in	of	
(;) Line no	(b) Amount in				cempt organization	T T		escription of tran				aement	s
	,	,		- (-) riamo (, a anout	4110	mig wijul		-
				-					, ,			-		
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							\dashv							
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							+							
_							+					-		
														
	descr	foundation dire ibed in section s,' complete the	501(c) or	f the Code (otl	ited with, or re her than section	lated to, one or i	more i	tax-exer tion 527	mpt organiza 7?	tions	·	Yes	x	No
_		(a) Name of or	rganızatıd	on	(b) Ty	pe of organizati	วก		(0) Description	on of re	lationship		
_								_						
_						· ·····								
														
_			7 ! <u> </u>	1 4	<u> </u>									
	Under pena complete (alties of perjury, I de Declaration of prep	eclare/that I frer kother th	have examined in had itaxpayer or idd	is return, including luciary) is based or	accompanying sched all information of wh	ules and	d stateme	ents, and to the be any knowledge	est of my know	ledge and	belief, it is tru	e, correc	ct, and
			//	16211	A			11		^		4		
c	> /	1/1	/ -	A 11111	14.			1 /Un	nt 18901	$\mathcal{O}_{\mathcal{O}}$	es de			
S	Sign	ature of officer or tri	Tiee X	(1 (Date	0 100	Titla)	50	~ /		
G N		4		7 1 1				Date		1	Pre	parer's Identify	ing num	nher
Ħ	Paid	Preparer's signature	1	2						Check if self-	(Se	e Signature in	the inst	rs)
HERE	Pre-							11/1	13/10	employed ►	X			
	parer's Use	Firm's name (or yours if self-	DOUGI		RRER, CP	A				EIN ►				
	Only	employed), address, and		FAIRVIEW]				
_		ZIP code	CLARI	KS SUMMIT	<u>. </u>		PA	1841	11	Phone no	(5'	70) 586		
В	AA											Form 99	0-PF	(2009)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization		Employer Identification Manuel
LACKAWANNA INSTITUTE	23-2930930	
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) o	organization
	4947(a)(1) nonexempt charitable	e trust not treated as a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundate	tion
1 31111 333 1 1		e trust treated as a private foundation
	x 501(c)(3) taxable private foundate	· · · · · · · · · · · · · · · · · · ·
Check if your organization is covered by Note: Only a section 501(c)(7), (8), or (1	the General Rule or a Special Rule 0) organization can check boxes for both the	e General Rule and a Special Rule See instructions.
General Rule — X For an organization filing Form 990, 9 contributor (Complete Parts I and II)	990-EZ, or 990-PF that received, during the y	year, \$5,000 or more (in money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(A)(v ₁) and receive	filing Form 990 or 990-EZ, that met the 33-1/ ed from any one contributor, during the year, e 1h or (ii) Form 990-EZ, line 1 Complete P	/3% support test of the regulations under sections , a contribution of the greater of (1) \$5,000 or (2) 2% of the arts I and II
For a section 501(c)(7), (8), or (10) or aggregate contributions of more than prevention of cruelty to children or an	organization filing Form 990 or 990-EZ, that r \$1,000 for use <i>exclusively</i> for religious, chai nimals Complete Parts I, II, and III	received from any one contributor, during the year, ritable, scientific, literary, or educational purposes, or the
contributions for use <i>exclusively</i> for rethis box is checked, enter here the to	eligious, charitable, etc, purposes, but these ital contributions that were received during th	received from any one contributor, during the year, contributions did not aggregate to more than \$1,000. If ne year for an exclusively religious, charitable, etc, sorganization because it received nonexclusively.
religious, charitable, etc, contribution	s of \$5,000 or more during the year	▶ \$
990-PF) but it must answer 'No' on Part	ered by the General Rule and/or the Special R IV, line 2 of their Form 990, or check the box ne filing requirements of Schedule B (Form 9	Rules does not file Schedule B (Form 990, 990-EZ, or x on line H of its Form 990-EZ, or on line 2 of its Form 190, 990-EZ, or 990-PF)
BAA For Privacy Act and Paperwork Refor Form 990, 990EZ, or 990-PF.	eduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (200

Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
•	VANNA INSTITUTE	1 ' '	930930
Partil!	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	PAUL MANSOUR 544 JEFFERSON AVE SCRANTON PA 18510	\$250,000.	Person X 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)
(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)

Form **4562**

Name(s) shown on return

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

 OMB No 1545-0172

2009

Attachment Sequence No 6

LACKAWANNA INSTITUTE
Business or activity to which this form relates

Identifying number 23-2930930

	m 990-PF page 1							
Pai	t I Election To Exp Note: If you have a	pense Certain ny listed property,	Property Under Sec complete Part V before	ction 179 you complete Pa	rt I		_	
1	Maximum amount See the						1	\$250,000.
2	Total cost of section 179 p	roperty placed in s	service (see instructions))			2	
3	Threshold cost of section 1	79 property before	e reduction in limitation ((see instructions)			3	\$800,000.
4	Reduction in limitation Su	btract line 3 from	line 2 If zero or less, en	ter -0-		•	4	
5	Dollar limitation for tax yea separately, see instruction		from line 1 If zero or les	ss, enter -0- If m	arried filing]	5	
6	(a)	Description of property		(b) Cost (business	use only)	(C) Elected co	st	
	· · · · · · · · · · · · · · · · · · ·							
7					7			
8	Total elected cost of section), lines 6 and 7			8	
9	Tentative deduction. Enter						9	
10	Carryover of disallowed de		•		1		10	
11	Business income limitation		· ·			see instrs)	11	
	Section 179 expense dedu Carryover of disallowed de		·		▶ 13		12	
	: Do not use Part II or Part				- 13			
Par			ice and Other Depre		با مامنامینی	-11	/C	
rai	t ii Speciai Deprec	iation Allowan	ice and Other Depri	eciation (Do no	it include iii	stea property)	(See i	nstructions)
14	Special depreciation allow tax year (see instructions)	ance for qualified	property (other than liste	d property) place	d in servic	e during the	14	
15	Property subject to section	168(f)(1) election	1				15	
	Other depreciation (includi						16	
Pai	t III MACRS Depre	ciation (Do not i	nclude listed property) (See instructions)				
			Section	on A				
17	MACRS deductions for ass	ets placed in serv	rice in tax years beginnin	g before 2009			17	61,636.
18	If you are electing to group asset accounts, check here		ed in service during the ta	ax year into one o	or more ger	neral ► □		
			in Service During 2009	Tax Year Using t	he General	Depreciation	Syster	m
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Conventio	n (f) Method	i	(g) Depreciation deduction
19 a	3-year property							
	5-year property	1						
	7-year property	1						
	10-year property	1						
	15-year property	1						
	20-year property	1			<u> </u>			
	25-year property	1		25 yrs		S/I		
	Residential rental			27.5 yrs	MM	S/I		
	property			27.5 yrs	MM	S/I		
i	Nonresidential real	 - 		39 yrs	MM	S/I		
•	property	-			MM	S/I		
	<u> </u>	_ Assets Placed in	n Service During 2009 T	av Voar Using th				em
20.	Class life	Assets Flaced II	I Service Burning 2005 T	ax real Osing th	Aiternati	S/I		
	12-year	┪ 、		12 222		S/I		
		 		12 yrs	WW	S/I		
	t IV Summary (See II	actruotions \	L	40 yrs	MM	<u> </u>	<u> </u>	<u> </u>
							21	
	Listed property Enter amo		unos 10 and 20 : (-> -	end line 21 Fatau harr	and a-	}	21	· · · · · · ·
	Total. Add amounts from line 12 the appropriate lines of your retu				and on		22	61,636.
23	For assets shown above a the portion of the basis att	na piacea in servi ributable to sectio	ce auring the current yea n 263A costs	ır, enter	23			

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)

	Note: Fo columns	r any vehicle fo (a) through (c)	r which you ar of Section A,	e using to all of Sec	he standa ction B, a	ard mile nd Sect	age rate	e or de applic	educting able	lease exp	ense, co	omplete	only 24	la, 24b,	
	Sectio	n A – Deprecia	tion and Othe	r Informa	ition (Cau	ıtion: S	ee the i	nstruc	tions for	limits for	passeng	ger auto	mobiles)	
24 a	Do you have evident	ce to support the bu	isiness/investmen	t use claim	ed?		Yes	\square_{N}	o 24b I	f 'Yes,' is the	evidence	written?		Yes	No
Ту	(a) pe of property (list vehicles first)	(b) Date placed in service	(C) Business/ investment use percentage	(d) Cost other b	or	(busine	(e) or deprecia ss/investm se only)	tion ient	(f) Recovery period	y Me	(g) ethod/ vention	Depr	(h) eciation uction	Elé secti	(i) ected on 179 ost
25	Special depreci	ation allowance 50% in a quali	for qualified li	sted propuse (see	perty plac instructio	ed in s	ervice d	uring	the tax y	ear and	25				
26	Property used r														
											-				
27	Property used 5	0% or less in a	qualified busing	ness use				-							
	Add amounts in		_				e 21, pa	ige 1		<u> </u>	28				
29	Add amounts in	column (ı), lıne	e 26 Enter her		line 7, p. B – Infor						•		29	<u> </u>	
	plete this section our employees, find the section of the section	rst answer the control of the contro	questions in Se	ection C t			et an ex	ceptio		pleting th		n for the			
31	Total commuting m	•	he year									•			
32	Total other pers	sonal (noncomm	nuting)												
33	Total miles driv lines 30 through		ear Add						·						
34	Was the vehicle	a available for n	erconal use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty	hours? .							-	-					
	Was the vehicle than 5% owner	•							_						
36 ——	Is another vehic personal use?								_						
Ansv	ver these questic		C — Questions if you meet a		-					=			are no	t more t	han
	owners or related		-											Yes	No
37	Do you maintair by your employe		y statement th	at prohib	oits all pei	rsonal ι	use of ve	ehicles	s, includi	ing comm	uting,				
38	Do you maintair employees? Se	n a written polic e the instruction	y statement th	at prohib used by	ots person corporate	nal use e officer	of vehics, direc	cles, e tors, o	xcept co	mmuting, more owr	by your ers				
39	Do you treat all	use of vehicles	by employees	as perso	onal use?	•									
40	Do you provide vehicles, and re	more than five tain the informa	vehicles to you ation received?	ır employ	yees, obta	aın ınfoi	rmation	from y	our em	oloyees al	oout the	use of t	he		
41	Do you meet the Note: If your ar														
Păi	t VI Amorti	zation													
	Des	(a) (b) (c) (d) (e)					(f) Amortizatio for this yea								
42	Amortization of	costs that begin	ns during your	2009 tax	year (se	e instru	uctions)		r				1		
						+-			-		 		ļ		
43	Amortization o	f costs that beg	an before your	2009 tax	x year							. 43			
44	Total. Add amo	ounts in column	(f) See the in	struction	s for whe	re to re	port	_				44			

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

Line 18 Stmt

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
REAL ESTATE TAXES	35,885.	3,589.	3,589.	28,707.
REGISTRATION	81.	8.	8.	65.
	·		 	

Total ____35,966. 3,597. 3,597. 28,772.

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

Line 23 Stmt

Other expenses.	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
URBAN BEAUTIFICATION PROGRAM	1,607.			1,607.
HILL SECTION PARK PROJECT	15,487.			15,487.
WOOLWORTH HISTORIC SITE PROJECT	296.			296.
COMMUNITY HERB GARDEN	1,124.			1,124.
CITY TREE PROGRAM	7,516.			7,516.

Total <u>26,030.</u> <u>26,030.</u>

Form 990-PF, Line 19

Allocated Depreciation

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Lıfe	Current Depr	Net Invest Income	Adjusted Net Income
LAND - 538 JEPPERSON AVE	08/28/98	30000	0	0	0.00	0		
520/536 JEFFERSON AVE	11/25/97	107994	30698	SL	39.00	2773		
1998 RESTORATION	01/01/99	286277	73381	SL	39.00	7331		
1999 RESTORATION	01/01/00	449182	103624	SL	39.00	11503		
2000 RESTORATION	01/01/01	104627	21457	SL	39.00	2679		
2001 RESTORATION	01/01/02	269869	41909	SL	39.00	7114		
2002 RESTORATION	01/01/03	238904	36741	SL	39.00	6118		
2003 RESTORATION	01/01/04	228372	29266	SL	39.00	5849		
2005 RESTORATION	01/01/06	345987	26595	SL	39.00	8862		
933 PRESCOTT AVE (CHUR	01/05/07	250802	12594	SL	39.00	6431		
LAND - 841 MADISON AVE	09/04/07	46616	0	0	0.00	0		
VAN (2004 CHEVY)	05/24/07	15500	8060	200DB	5.00	2976		
LAND - 839 MADISON	03/05/09	110625	0	0	0.00	0		

Total

Form 990-PF, Page 2, Part II, Line 14

L-14 Stmt

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
LAND	187,241.	0.	187,241.
BUILDINGS	2,282,014.	434,924.	1,847,090.
EQUIPMENT	15,500.	11,036.	4,464.

Total <u>2,484,755.</u> <u>445,960.</u> <u>2,038,795.</u>

Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

OMB No. 1545-1709

If you are	filing for an Automatic 3-Month	Extension, complete	only Part I and che	eck this box .				X
	filing for an Additional (Not Aut							
	<i>lete Part II unless</i> you have alrea					d Form 886	8	
·但以1	Automatic 3-Month Extens	sion of Time. Only	submit origina	al (no copie	s needed).			
							,	_
	required to file Form 990-T and	-				•	•	Ш
All other corp income tax re	porations (including 1120-C filers) eturns.	, partnerships, REMIC	S, and trusts mus	t use Form 700)4 to request a	n extensioi	of time to file	
the additiona Form 990-T	ling (e-file). Generally, you can e below (6 months for a corporation (not automatic) 3-month extens instead, you must submit the full of www.irs gov/efile and click on a	on required to file Form on or (2) you file Form a completed and signe	า 990-T). However าร 990-BL, 6069, (d page 2 (Part II)	, you cannot fil or 8870, group	le Form 8868 e returns, or a c	electronical omposite o	y if (1) you want r consolidated	
	Name of Exempt Organization					Employer ide	ntification number	_
Type or								
print	LACKAWANNA INSTITUT	Ξ				23-293	0930	
File by the due date for	Number, street, and room or suite number	If a P O box, see instruction	ns					
filing your return See	544 JEFFERSON AVE							
instructions	City, town or post office, state, and ZIP co	de For a foreign address, se	e instructions					_
	SCRANTON					PA	18510	
Check type of	f return to be filed (file a separa	te application for each	return):					
X Form 990)	Form 990-T (corpoi	ration)		Form 472	0		
Form 990)-BL	Form 990-T (sectio	n 401(a) or 408(a)	trust)	Form 522	7		
Form 990		Form 990-T (trust o	ther than above)		Form 606	9		
Form 990)-PF	Form 1041-A			Form 887	0		
Telephon If the org. If this is f check this the exten	e No enization does not have an office or a Group Return, enter the organism box. is box. iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	or place of business in anization's four digit Gi he group, check this b	roup Exemption Notes and a	umber (GEN) ttach a list with	. If the names ar	this is for t		
	ug 16 , 20 10 _ , to file		•	•				
The ext	ension is for the organization's re	eturn for						
► X	calendar year 20 <u>09</u> or tax year beginning							
▶	tax year beginning	, 20 , and	endina	. 20				
2 If this ta	ax year is for less than 12 month	s, check reason:	Initial return	Final ret		hange in a	ccounting period	
3a If this a nonrefu	pplication is for Form 990-BL, 99 ndable credits See instructions	0-PF, 990-T, 4720, or	6069, enter the te	ntative tax, les	s any	3a \$	_	0.
b If this a made	pplication is for Form 990-PF or nclude any prior year overpayme	990-T, enter any refun nt allowed as a credit	dable credits and	estimated tax	payments	3ь\$		0.
deposit	Due. Subtract line 3b from line with FTD coupon or, if required, tructions	3a Include your paym by using EFTPS (Elec	ent with this form, tronic Federal Tax	or, if required Payment Syst	em)	3c \$		0.
Caution. If you payment inst	ou are going to make an electron ructions.	c fund withdrawal with	this Form 8868, s	see Form 8453	-EO and Form	8879-EO 1		
BAA For Pri	acy Act and Paperwork Reduct	on Act Notice, see ins	structions.			Fori	n 8868 (Rev. 4-20)09)

Form 8868	(Rev 4-2009) LACKAWANNA INSTITUTE	23-2930930 Page 2
• If you a	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and cl	
Note. Only	complete Part II if you have already been granted an automatic 3-month extension on a pre	eviously filed Form 8868.
● If you a	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	
	Additional (Not Automatic) 3-Month Extension of Time. Only file the or	ginal (no copies needed).
Type or print	Name of Exempt Organization LACKAWANNA INSTITUTE	Employer identification number
File by the extended due date for filing the	Number, street, and room or suite number If a P O. box, see instructions 544 JEFFERSON AVE	For IRS use only
return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	SCRANTON PA 18510	
X Form 9 Form 9 Form 9	e of return to be filed (File a separate application for each return): 990 Form 990-PF Form 990-BL Form 990-T (section 401(a) or 408(a) trust)	5227
		previously med to thi cooc.
	oks are in care of ►	
If this is whole ground	organization does not have an office or place of business in the United States, check this both is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) up, check this box. If it is for part of the group, check this box and attach at the extension is for	If this is for the
5 For c6 If this7 State	uest an additional 3-month extension of time until Nov 15 , 20 10. calendar year 2009 , or other tax year beginning , 20 , and each stax year is for less than 12 months, check reason. Initial return Final return in detail why you need the extension FORMATION NEEDED TO COMPLETE THE RETURN IS NOT AVAILABLE	Change in accounting period
nonre	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less efundable credits. See instructions	8a \$O.
paym	s application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and es nents made. Include any prior year overpayment allowed as a credit and any amount paid p Form 8868	timated tax reviously 8b \$ 0.
c Balar with b	nce Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See	deposit surstrs . 8c \$ 0.
	Signature and Verification	
Under penaltic correct, and co	es of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the be omplete, and that I am authorized to prepare this form	
Signature -	Title CPA	Date ► 5/15/10