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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 cal	endar year 2009, or tax year beginning	, 2009	and ending	,	
G Che	eck all that apply.   Initial return   Initial	al Return of a former pu	ublic charity	Fina	al return
	Amended return	Address c	hange Name c	hange	
I las Al	Name of foundation		IA	Employer identification nur	nber
Use the IRS lab		•		23-7025589	
Otherw		delivered to street address)	Room/suite B	Telephone number (see the	instructions)
prin	1 1 400 51	·	٦	(978) 887-246	·
or typ	e. 1420 Sheridan Road cific City or town	State	ZIP code C	If exemption application is	
Instructi					' " . H
	Wilmette			1 Foreign organizations, chec	
<b>н</b> Р	¬ ·· -	(c)(3) exempt private for		2 Foreign organizations meet here and attach computation	ing the 85% test, theth
	Section 4947(a)(1) nonexempt charitable tr		rivate foundation	If private foundation status	
l Fa		ounting method X Ca	ash	under section 507(b)(1)(A)	, check here
-		Other (specify)	F	If the foundation is in a 60	
<b>▶</b> \$		column (d) must be on	casn basis.)	under section 507(b)(1)(B)	, cneck nere
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	ıncome	ıncome	for charitable purposes
	sarily equal the amounts in column (a)				(cash basis only)
	(see the instructions) )				
	1 Contributions, gifts, grants, etc, received (att sch)	0.			
	2 Ck X if the foundn is <b>not</b> req to att Sch B				
	3 Interest on savings and temporary cash investments	876.	876.	876.	
	4 Dividends and interest from securities	175,753.	175,753.	175,753.	
	5a Gross rents	0.	0.	0.	
	b Net rental income or (loss)			REC	VENVED I
RE MAZ	6a Net gain/(loss) from sale of assets not on line 10			TVE (	PEIVEL
2 E	<b>b</b> Gross sales price for all				0
V	assets on line 6a 7 Capital gain net income (from Part IV, line 2)		115.	S MAR	1 5 2010
C E ≓ N	8 Net short-term capital gain .			0.	S
- 11	9 Income modifications .			0.	
₹E	10a Gross sales less returns and allowances 0.			OGD	EN, UT
≥	allowances 0.			<del></del>	
CANNED MAK	b Less Cost of goods sold 0.				
의 2	c Gross profit/(loss) (att sch)	0.		0.	
2	11 Other income (attach schedule)				
₹		0.	0.	0.	
<b></b>	12 Total. Add lines 1 through 11	176,629.	176,744.	176,629.	
	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages	0.	0.	0.	0.
	15 Pension plans, employee benefits	0.	0.	0.	0.
A D	16a Legal fees (attach schedule)	0.	0.	0.	0.
M	<b>b</b> Accounting fees (attach sch)	0.	0.	0.	0.
Ņ	c Other prof fees (attach sch) L-16c Stmt	540.	0.	0.	540.
PS	17 Interest .	0.	0.	0.	0.
OPERAT	18 Taxes (attach schedule)(see instr.) See Line 18 Stmt	2,230.	205.	205.	0.
A A	19 Depreciation (attach sch) and depletion	0.	0.	0.	
l i	20 Occupancy	0.	0.	0.	0.
N Ý G E	21 Travel, conferences, and meetings	0.	0.	0.	0.
A E	22 Printing and publications	598.	598.	598.	0.
A E N X D P	23 Other expenses (attach schedule)				
Ē	See Line 23 Stmt	532.	266.	266.	266.
Š	24 Total operating and administrative				
S	expenses. Add lines 13 through 23	3,900.	1,069.	1,069.	806.
	25 Contributions, gifts, grants paid	190,000.			190,000.
	26 Total expenses and disbursements.	102 000	1 000	1 060	190,806.
	Add lines 24 and 25	193,900.	1,069.	1,069.	130,000.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses				
	and disbursements .	-17,271.			
	b Net investment income (if negative, enter -0-)		175,675.		
	C Adjusted net income (if negative, enter -0-)			175,560.	
	or Privacy Act and Panerwork Reduction Act	Notice and the instance	tions TES	A0301 02/02/10	Form <b>990-PF</b> (2009

Parl	11	End o	nd of year		
T all		Balance Sheets  Attached schedules and amounts in the 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	0.	0.	0.
	2	Savings and temporary cash investments	136,042.	114,629.	114,629.
	3				
		Less: allowance for doubtful accounts \0.	0.	0.	0.
	4		· · · · · · · · · · · · · · · · · · ·		
		Less allowance for doubtful accounts ▶0.	0.	0.	0.
	5		0.	0.	0.
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)	0.	0.	0.
	7	Other notes and loans receivable (attach sch)			· · · · · · · · · · · · · · · · · · ·
ŝ		Less: allowance for doubtful accounts	0.	0.	0.
A S S E T	8		0.	0.	0.
	9	Prepaid expenses and deferred charges .	0.	0.	0.
S	10	a Investments – U.S. and state government obligations (attach schedule)	0.	0.	0.
	1	b investments — corporate stock (attach schedule) L-10b Stmt	1,001,476.	1,005,733.	2,998,805.
		c Investments — corporate bonds (attach schedule) L-10c Stmt	1,345,000.	1,345,000.	1,363,993.
	11	Investments — land, buildings, and equipment: basis			}
	ļ	Less: accumulated depreciation			•
		(attach schedule)	0.	0.	0.
		Investments – mortgage loans .	0.	0.	0.
	13			0.	0.
	'*	Land, buildings, and equipment basis  Less accumulated depreciation			
		(attach schedule)	0.	0.	0.
		Other assets (describe	0.	0.	0.
	16	Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)	2,482,518.	2,465,362.	A A77 A27
	17		2,402,510.	2,403,302.	4,477,427.
Ī	18	· ·	0.	0.	
B	19	· ·	0.	0.	
I	20	Loans from officers, directors, trustees, & other disqualified persons	0.	0.	
<u>ī</u>	21	Mortgages and other notes payable (attach schedule)	0.	0.	
Ţ	22		0.	0.	
Ė	22	Takel liebilisies (add lease 17 Abranch 20)	0	0	
<u> </u>	23	· · · · · · · · · · · · · · · · · · ·	0.	0.	
	į	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24				
ŦŇ	25	Temporarily restricted			
A D	26			·	
A B A L A N		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds	2,482,518.	2,465,362.	
SNC	28	Paid-in or capital surplus, or land, building, and equipment fund	0.	0.	
O E	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
R S	30	Total net assets or fund balances (see the instructions)	2,482,518.	2,465,362.	
	31	Total liabilities and net assets/fund balances (see the instructions)	2,482,518.	2,465,362.	1
Part	111	Analysis of Changes in Net Assets or Fund Balance	es		
1	Tota	I net assets or fund balances at beginning of year Part II, colum of-year figure reported on prior year's return)	n (a), line 30 (must agre	ee with	2,482,518.
		er amount from Part I, line 27a		2	-17,271.
		increases not included in line 2 (itemize) ► Gain on sale o	f securities	3	115.
4		lines 1, 2, and 3		4	2,465,362.
5		ases not included in line 2 (itemize)		5	
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) –	- Part II, column (b), line	30 6	2,465,362.

	(a)  Base period years  Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Oistribution ratio b) divided by column (c))
	2008	233,526.	4,702,301.		0.049662
	2007	280,773.	5,685,245.		0.049386
	2006	261,789.	5,368,700.		0.048762
	2005	255,689.	5,170,932.		0.049447
	2004	246,702.	5,027,981.		0.049066
2	Total of line 1, column (d)			2	0.246323
3		he 5-year base period – divide the total n has been in existence if less than 5 ye		3	0.049265
4	Enter the net value of nonchar	ritable-use assets for 2009 from Part X,	line 5	4	3,932,858.
5	Multiply line 4 by line 3			5	193,752.
6	Enter 1% of net investment in	come (1% of Part I, line 27b)		6	1,757.
7	Add lines 5 and 6 .		ļ	7	195,509.
8	Enter qualifying distributions f	rom Part XII, line 4		8	190,806.

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

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Form 990-PF (2009)

	990-PF (2009) The Allyn Foundation, Inc. 23-7025		F	age 4
Parl		structions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here	-		,
	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,		3,	514.
	check here   ☐ and enter 1% of Part I, line 27b .			ŀ
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		<del></del>	ر م
3	Add lines 1 and 2		3	514.
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-		3 (	514.
6	Credits/Payments.			714.
_	2009 estimated tax pmts and 2008 overpayment credited to 2009 6a 4, 163.			
	· · · · · · · · · · · · · · · · · · ·			1
				1
_	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d	<del></del>	4,.	163.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<del></del>		<u> 549.</u>
<u>_11</u>	Enter the amount of line 10 to be Credited to 2010 estimated tax			
Pan	VII-A   Statements Regarding Activities	<del></del>		
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 Б		x
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
_	Did the foundation file Form 1120-POL for this year?	1 c		×
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	''	<u> </u>	<del>  ^-</del> -
	(1) On the foundation > \$ (2) On foundation managers			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			l .
	foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If 'Yes,' attach a detailed description of the activities	2		X
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3	_	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	. 4a		X
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		Х
	If 'Yes,' attach the statement required by General Instruction T			Γ .
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	<ul> <li>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?</li> </ul>	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see the instructions)			
	See States Registered In	_		,
b	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	_   8b	_ _ <b>X</b>	'
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)	(5) <b>9</b>		x
10	for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part X Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	'V   3		
BAA	and addresses	10 Form 99	0-PF	(2009)

Form	990-PF (2009) The Allyn Foundation, Inc.	23-	702558	9	F	age 5
Par	t VII-A Statements Regarding Activities Continued					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see 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	n?	13	X	
	Website address • N/A					
14	The books are in care of John W. Allyn, Jr. Telephor	ne no 🕨	_( <u>97</u> 8)_	887	-246	<u> </u>
15	Located at ► 119 Bare Hill Road, Boxford, MA ZIP + 4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	<u>019</u>	21			TT-
15	and enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b>	15			Ш
Parl	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
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			ĺ
	(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			1. 1. 2.
b	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruction	ons)?	_	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 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 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?	Yes	X No			1
	If 'Yes,' list the years 20, 20, 20					
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942( (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(	(a)(2) a)(2) to				
	all years listed, answer 'No' and attach statement - see the instructions )	, , .		2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	ere.	i	ł		i
	► 20 , 20 , 20 , 20					
3 a	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 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	i				   
	determine if the foundation had excess business holdings in 2009)			3ь		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		х
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

*:* ,

			ion, inc.		23-70	<u> 25589</u>		Page 6
Part VII-B   Statements Re	<u>gardi</u>	ng Activit	ies for Which Forn	1 4720 May Be Req	uired (continued)			
5a During the year did the four			•					1
(1) Carry on propaganda, o		•	5		∐ Yes X	No		İ
<ul><li>(2) Influence the outcome on, directly or indirectly</li></ul>	of any : , any v	specific publ voter registra	lic election (see section ation drive?	4955), or to carry	Yes X	No		
(3) Provide a grant to an ir	ıdıvıdu	al for travel,	study, or other similar p	ourposes? .	∐ Yes X	No		l
(4) Provide a grant to an o in section 509(a)(1), (2)	rganıza ), or (3	ation other th 3), or section	nan a charitable, etc, org i 4940(d)(2)? (see instru	ganization described ctions) .	Yes X	No		
(5) Provide for any purpose educational purposes, of	e other or for th	than religion he prevention	us, charitable, scientific, n of cruelty to children o	literary, or or animals?	Yes X	No		
b If any answer is 'Yes' to 5a described in Regulations se (see instructions)?	(1)-(5), ection 5	, did <b>any</b> of t 53 4945 or in	the transactions fail to q a current notice regard	ualify under the exceptions and disaster assistance	ons	. 5	b	
Organizations relying on a	current	t notice rega	rding disaster assistanci	e check here	▶ 🗌			Π
c If the answer is 'Yes' to que tax because it maintained e				mption from the	Yes	No		
If 'Yes,' attach the statemen	nt requ	ured by Regu	llations section 53 4945	-5(d).				
6a Did the foundation, during to on a personal benefit contra	he year act?	r, receive ar	ny funds, directly or indir	ectly, to pay premiums	Yes X	No	_	
<b>b</b> Did the foundation, during t	-	r, pay premi	ums, directly or indirectl	y, on a personal benefit	contract? .	6	b	X
If 'Yes' to 6b, file Form 887  7a At any time during the tax y		as the found	lation a narty to a probit	uted tax shelter transact	tion? Yes X	No		
<b>b</b> If yes, did the foundation re			•			7	b	1
Part VIII Information Ab							- 1	<u></u>
and Contractor	rs		<u> </u>					
1 List all officers, directors, t	rustee	s, foundatio	n managers and their c	ompensation (see instr	uctions).	<del></del>		
(a) Name and add	ress		(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) Exper	nse acc illowand	ount, ces
Margaret B. Allyn								
1420 Sheridan,			President, Dir.					
Wilmette	IL	60091	4.00	0.	0.	ļ		0.
John W. Allyn, Jr. 119 Bare Hill,		. <b></b>	Vice Pres., Dir.					
Boxford	MA	01921	3.00	٥.	0.			Ο.
Cynthia A. Stuhley	_ PIA	UIJEI		·	<u> </u>			
1216 Casey Key Road	·		Director			ĺ		
Nokomis	FL	34275	1.00	0.	0.			0.
Sharon A. Taylor								
539 Princeton,			Director		_	j		_
Hinsdale	_ <u>IL</u> _	60521	1.00		0.			0.
2 Compensation of five high								
(a) Name and address of ea paid more than \$50	ach em ),000	ipioyee	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exper	nse acc allowand	
None								
0								
0			<del> </del>			-		
0								
0		· <b></b>						
Total number of other employees	paid o	over \$50,000	I	·	<u> </u>	Faur f	ion DE	None

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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 instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	(5) 55 (1) 55 (1)
Total number of others receiving over \$50,000 for professional services	None
Part IX-A Summary of Direct Charitable Activities	
	<del>,</del>
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 None	
<u></u>	0.
2	
3	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 None	
2	0.
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	None
ВАА	Form 990-PF (2009)

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Part X Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign foundation	
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		98,322. 94,427.
<b>b</b> Average of monthly cash balances	1c	
c Fair market value of all other assets (see instructions)		<u>0.</u> 92,749.
d Total (add lines 1a, b, and c) .	10 3,9	92, 149.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	_ 2	
2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d		02 740
	3 3,93	92,749.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	59,891.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 3,93	32,858.
6 Minimum investment return. Enter 5% of line 5 .	6 19	96,643.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► ☐ and do not complete this process.		ns
1 Minimum investment return from Part X, line 6	<del></del>	96,643.
2a Tax on investment income for 2009 from Part VI, line 5 . 2a 3, 514		
<b>b</b> Income tax for 2009 (This does not include the tax from Part VI)  2b  0		
c Add lines 2a and 2b	2 c	3,514.
3 Distributable amount before adjustments Subtract line 2c from line 1	3 19	93,129.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5 19	93,129.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7 1	93,129.
Part XII Qualifying Distributions (see instructions)		
<ul> <li>Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes.</li> <li>a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26</li> </ul>	1a 19	90,806.
b Program-related investments – total from Part IX-B	1 b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0.
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)		
	3a	0.
<b>b</b> Cash distribution test (attach the required schedule)	3b	0.
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4   19	90,806.

: .

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

BAA Form 990-PF (2009)

<u>5</u>

190,806.

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7				193,129.
2 Undistributed income, if any, as of the end of 2009:	<del></del>			133/123.
a Enter amount for 2008 only			0.	
<b>b</b> Total for prior years: 20, 20, 20				
3 Excess distributions carryover, if any, to 2009:				
a From 2004 0.				
<b>b</b> From 2005				
c From 2006	-			
d From 2007 0.	-			
e From 2008 3,583.	3,583.			
f Total of lines 3a through e 4 Qualifying distributions for 2009 from Part	3,363.			· · · · · · · · · · · · · · · · · · ·
XII, line 4: ► \$190, 806.				
a Applied to 2008, but not more than line 2a			0.	
••				
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus				
(Election required — see instructions)	0.			
<b>d</b> Applied to 2009 distributable amount .				189,546.
e Remaining amount distributed out of corpus	1,260.			
5 Excess distributions carryover applied to 2009	3,583.			3,583.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
,,,				
6 Enter the net total of each column as				
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,260.			
	1,200.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		<u></u>
e Undistributed income for 2008. Subtract line 4a from				
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2009 Subtract lines				
4d and 5 from line 1. This amount must be				0.
distributed in 2010 7 Amounts treated as distributions out of	<u> </u>			
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
·				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	1,260.			
10 Analysis of line 9.				
a Excess from 2005 0.				
<b>b</b> Excess from 2006 0.				
c Excess from 2007 0.				
d Excess from 2008 0.	-			
e Excess from 2009 . 1, 260.	l	L		5

1a If the foundation has received a ruling or de			VII-A, question perating foundation,		N/A
is effective for 2009, enter the date of the r	uling .	•	•	. •	1,045:11
<b>b</b> Check box to indicate whether the foundation		ating foundation de		4942(j)(3) or	4942(j)(5
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Tota
each year listed				<u> </u>	
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:			-		
a 'Assets' alternative test - enter		}			
(1) Value of all assets					
(2) Value of assets qualifying under					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X,			-		
line 6 for each year listed			<del></del>		
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		-			
art XV Supplementary Information assets at any time during th  1 Information Regarding Foundation Manage	<u>e year — see in</u> <sup>ers:</sup>	structions.)			
a List any managers of the foundation who had close of any tax year (but only if they have None	ave contributed moi contributed more th	re than 2% of the than \$5,000) (See	otal contributions red section 507(d)(2))	ceived by the foundat	ion before th
			· · · · · · · · · · · · · · · · · · ·		
<b>b</b> List any managers of the foundation who of a partnership or other entity) of which the finance	wn 10% or more of oundation has a 10	the stock of a corp % or greater intere	ooration (or an equal est	ly large portion of the	e ownership (
2 Information Regarding Contribution, Gran	t. Gift. Loan. Schola	arship, etc. Progra	ms:		
Check here X if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions	to preselected cha	ritable organizations		
a The name, address, and telephone number	of the nerson to wi	hom applications s	should be addressed		
N/A	or the person to wi	лонт аррпоацона з			
N/A					
	ubmitted and inform	nation and materia	Is they should includ	e·	
<b>b</b> The form in which applications should be s	20 20		-		
b The form in which applications should be s N/A				_	
N/A					

BAA

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Ye			· · · · · · · · · · · · · · · · · · ·	
Recipient	If recipient is an individual, show any relationship to any foundation manager or	status of		Amount
Name and address (home or business)	substantial contributor	recipient		······································
a Paid during the year				
ACCION USA		1		
56 Rowland Street, Suite 300		<u> </u> _		
Boston MA 02129		Exempt	Anti-poverty programs	1,000.
American Cancer Society		ĺ		
P.O. Box 22178		<u></u>	M-4-1	F 000
Oklahoma City OK 73123 American Heart Association		Exempt	Medical research	5,000.
7272 Greenville Ave.				
Dallas TX 75231		Evennt	Medical research	5,000.
American Lung Association		Exempt	Medical research	3,000.
1301 Pennsylania Ave. NW, Suite 800	,			
Washington DC 20004		Exempt	Medical research	3,000.
American Red Cross				3,000.
P.O. Box 4002018				
Des Moines IA 50340		Exempt	Family services	10,000.
Americares				
88 Hamilton Ave.				
Stamford CT 06902	Í	Exempt	Family services	2,000.
Art Institute of Chicago		_	-	
111 S. Michigan Ave.	<b>J</b>	ļ		
Chicago IL 60603		Exempt	Museum programs	3,000.
Associated Colleges of Illinois				
20 N. Wacker Dr., Suite 1456				
Chicago IL 60606		Exempt	Education programs	3,000.
Aurora Lakeland Medical Center				
W3985 County Road NN		<u> </u> .		
Elkhorn WI 53121		Exempt	Medical services	2,000.
See Line 3a statement	}	 		
				156,000.
				150,000.
Total			► 3a	190,000.
b Approved for future payment	<u> </u>	<u> </u>		200/200
ar pproved to return payment				
	Ì	!		
	}			
	}	!		
			-	
	]			
	1			
Total	I		► 3b	
Total				Form 000 PF (2000)

Part XVI-A Analysis of Income-Producing	Activities				
Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded by	section 512, 513, or 514	
Program service revenue:     a	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exemp function income (see the instruction
b	<del></del>	<del></del>	<del>                                     </del>		
c			<del>                                     </del>		
d					
е					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	876.	
4 Dividends and interest from securities			14	175,753.	
5 Net rental income or (loss) from real estate:			<u> </u>		
a Debt-financed property			1 -		
<b>b</b> Not debt-financed property .					
6 Net rental income or (loss) from personal property					
7 Other investment income			<del></del>		
8 Gain or (loss) from sales of assets other than inventory			<del>  </del>		
9 Net income or (loss) from special events		·	<del>                                     </del>		
10 Gross profit or (loss) from sales of inventory	<del> </del>		<del>                                     </del>		<del></del>
11 Other revenue.	<del> </del>		<del> </del>		
ab	<del></del>		<del>-  </del>		
· · · · · · · · · · · · · · · · · · ·	<del>-   </del>	<del></del>	<del>  </del>		
c	-		<del>                                     </del>		
e	<del>-    </del>		<del>                                     </del>		
12 Subtotal Add columns (b), (d), and (e)	<del></del>	<del></del>	<del>                                     </del>	176,629.	
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	176,6
See worksheet in the instructions for line 13 to verify c	alculations.)			•	
Part XVI-B Relationship of Activities to the		mont of Evenu	ot Durnoco		
Relationship of Activities to the				· <b>&gt;</b>	
Line No.  ▼ Explain below how each activity for which is accomplishment of the foundation's exemp	ncome is reported t purposes (other	in column (e) of P than by providing fi	art XVI-A cor unds for such	ntributed importantly purposes). (See the	to the instructions.)
None N/A					

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

BAA	TEEA0502 07/05/09	Form <b>990-PF</b> (2009)
<del></del>		
Mone	IN/A	
None	N/A	
Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed accomplishment of the foundation's exempt purposes (other than by providing funds for such purpose).	d importantly to the ses). (See the instructions.)

Page 13

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

									Yes	No
1	Did t	he organization directly ( ribed in section 501(c) o	or indirectly er	ngage in any of the	following with an	y other organization	on 527			
	relati	ing to political organizati	ons?	nei than section 50	ri(c)(3) organizad	ons) or in section	527,		}	
	a Trans	sfers from the reporting	foundation to a	a noncharitable exe	empt organization	of				
	(1)		•					1 a (1)		Х
	(2)	Other assets						1 a (2)		X
	<b>b</b> Othe	r transactions:								
	(1) 5	Sales of assets to a nonc	charitable exer	mpt organization				1 b (1)		x
		Purchases of assets from		· <del>-</del>	ation	•		1 b (2)		×
	• •	Rental of facilities, equip				••		1 b (3)		×
	` '	Reimbursement arranger		<b>u</b> 330(3 .			•	1 b (4)		X
		oans or loan guarantees						1 b (5)		X
		Performance of services		n or fundraising col	, ligitations		•			X
	• •			,		• •		1 b (6)	$-\dashv$	
	c Snar	ing of facilities, equipme	nt, mailing iis	is, other assets, or	paid employees	• •	•	1c		<u>X</u>
	the a	answer to any of the ab oods, other assets, or se ransaction or sharing are	ervices aiven l	ov the reportina fou	indation If the fou	indation received l	less than fair market v	ket value alue in	of	
(a)	Line no	(b) Amount involved		of noncharitable exempt			ransfers, transactions, and	haring arran	gement	
٧٠/	20 110	/w/ / smount involved	(C) Hallie (		or garnzation	Cay Description of t	. a.i.o.o.o, a angaodono, and :	uring arrai	gonient	
		<del> </del>	<del></del>	· <del></del>	<del></del>					
		<del> </del>	<del></del>	<del></del>	<del></del>					
		<del>                                     </del>				· · · · · · · · · · · · · · · · · · ·				
		<del>                                     </del>		··						
		<u> </u>	<del></del>	<del></del>						
		<b></b>								
		ļ			<del>_</del>	·				
		<u> </u>								
			<u> </u>							
						<u> </u>				
				<del></del>						
	desci	e foundation directly or in tibed in section 501(c) of s,' complete the followin	f the Code (oth	ted with, or related ner than section 50	to, one or more t 1(c)(3)) or in sect	ax-exempt organizion 527?	zations	Yes	X	No
		(a) Name of organization		<b>(b)</b> Type o	f organization		(c) Description of rela	tionship		
							····			
U	nder pen omplete	alties of perjury, I declare that I Declaration of preparer (other th	have examined the	s return, including accomuciary) is based on all inf	npanying schedules and formation of which prep	I statements, and to the arer has any knowledge	best of my knowledge and b	elief, it is true	e, correct	, and
,	<b>-</b>	XXWIII	<b>**</b>			3/10/10	► Vice Pres	ident		
	Sian	acure of officer or trustee	<del>//                                   </del>			Date	Title			
i  -		1	<del></del>	<del></del>		Date	<del>. ,</del>	rer's Identify	ng numt	er
	aid re-	Preparer's signature					Check if self- employed ► (See	Signature in	the instr	5)
	arer's Ise	Firm's name (or yours if self-	· · · · · · · · · · · · · · · · · · ·				EIN ►			
	nse Only	employed), Non-F	Paid Prep	arer			_			
$\perp$		address, and ZIP code					Phone no			
3A/	\			<del></del>				Form 99	0-PF (	2009)

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

#### Line 18 Stmt

Taxes (see the instructions) 2009 Form 990-PF estimated tax 2009 Delaware franchise tax	Rev/Exp Book 2,000. 25.	Net Inv Inc 0. 0.	Adj Net Inc 0. 0.	Charity Disb 0.
2009 Foreign taxes on dividends	205.	205.	205.	0.
Total	2,230.	205.	205.	0.

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
Mail	224.	112.	112.	112.
Office supplies	168.	84.	84.	84.
Safe deposit box	115.	58.	58.	58.
Filing fees	25.	12.	12.	12.
Amortization	0.	0.	0.	0.

266. Total 266. 266.

Form 990-PF, Page 4, Part VII-A, Line 8a

#### States Registered In

IL - Illinois

DE - Delaware

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

#### Line 3a statement

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year  Aurora University  P.O. Box 210, 350 Constance Blvd.  Williams Bay WI 53191  Big Brothers Big Sisters of Chicago  560 W. Lake St.  Chicago IL 60661  Boys & Girls Clubs of Chicago  550 W. Van Buren St., Suite 350		Exempt	Youth programs	Person or Business X  5,000. Person or Business X  3,000. Person or Business X
Chicago IL 60607 Chicago History Museum 1601 N. Clark St. Chicago IL 60614		Exempt Exempt		3,000.  Person or

За

Continued

Form 990-PF, Page	11, Part XV,	line 3
Line 32 statement		

Recipient  Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year				
Chicago Symphony Orchestra				Person or
220 S. Michigan Ave.				Business X
Chicago IL 60604		Exempt	Music programs	3,000. Person or
Children's Home & Aid Society 125 S. Wacker Dr., 14th Floor				Business X
Chicago IL 60606		Exempt	Youth services	5,000.
Children's Memorial Hospital		BACKET	TOUCH BOLVIOUS	Person or
2300 Children's Plaza, Box 4				Business X
Chicago IL 60614		Exempt	Medical services	5,000.
City Year				Person or
287 Columbus Ave.				Business X
Boston MA 02116		Exempt	Service programs	1,000.
Common Threads				Person or
5979 Siggelkow Rd.				Business X
McFarland WI 53558		Exempt	Family services	5,000. Person or
Cystic Fibrosis Foundation				Business X
220 N. Main St., Suite 104 Natick MA 01760			Medical research	1,000.
Daniel Murphy Scholarship Fund		Exempt	Medical research	Person or
228 S. Wabash St., Suite 600				Business X
Chicago IL 60604		Exempt	Scholarships	1,000.
Evans Scholars				Person or
1 Briar Rd.				Business X
Golf IL 60029		Exempt	Scholarships	1,000.
Fund for Johns Hopkins Medicine				Person or
100 N. Charles St., Suite 400				Business X
Baltimore MD 21201		Exempt	Medical research	
Girl Scouts of Chicago				Person or Business X
222 S. Riverside Plaza, Suite 2120 Chicago IL 60606	<b></b>		Youth programs	3,000.
Gulf Coast Heritage Association		EXCIL	Touch programs	Person or
337 N. Tamiani Trail				Business X
Osprey FL 34229		Exempt	Museum programs	2,000.
Hadley School for the Blind				Person or
700 Elm St., Box 299				Business X
Winnetka IL 60093		Exempt	Medical research	10,000.
Heartland Alliance				Person or
208 S. LaSalle St., Suite 1818				Business X
Chicago IL 60604		Exempt	Social services	
Illinois Institute of Technology				Person or X
10 W. 35th St., Suite 1700		Fyemot	Education programs	Business X 3,000.
Chicago IL 60616 Illinois Masonic Hospital		EVERIBL	Educación programs	Person or
205 W. Touhy Ave, Suite 225		<b></b>		Business X
Park Ridge IL 60068		Exempt	Medical services	

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

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year	ļ			
Infant Welfare Society of Evanston				Person or
2200 Main St.				Business X
Evanston IL 60202		Exempt	Youth services	5,000.
Jumpstart				Person or
308 Congress St., 6th Floor				Business X
Boston MA 02210		Exempt	Youth services	1,000.
Junior Achievement of Chicago				Person or
651 W. Washington St., Suite 404				Business X
Chicago IL 60606	[	Exempt	Youth programs	3,000.
Juvenile Diabetes Foundation				Person or
500 N. Dearborn St., Suite 305				Business X
Chicago IL 60610		Exempt	Medical research	3,000.
Kishwauketoe Nature Conservancy				Person or
118 Circle Pkwy.				Business X
Williams Bay WI 53191		Exempt	Environmental programs	1,000.
Lincoln Park Zoo				Person or
2001 N. Clark St.		1		Business X
Chicago IL 60614		Exempt	Zoo programs	3,000.
MA Soc For Prev of Cruelty to Animals				Person or
350 S. Huntington Ave.				Business X
Boston MA 02130		Exempt	Animal protection	1,000.
MA Soc For Prev of Cruelty to Children				Person or
99 Summer St.				Business X
Boston MA 02110		Exempt	Youth services	1,000.
Make A Wish Foundation	 		 	Person or
One Bullfinch Place, 2nd Floor	 			Business X
Boston <u>MA</u> 02114		Exempt	Family programs	2,000.
Midwest Palliative & Hospice Care				Person or
2050 Claire Court				Business X
Glenview IL 60025		Exempt	Elderly services	3,000.
Museum of Science and Industry				Person or
5700 S. Lake Shore Drive				Business X
Chicago IL 60637		Exempt	Museum programs	3,000.
Music Institute of Chicago				Person or
517 Green Bay Rd.				Business X
Wilmette IL 60091		Exempt	Music programs	1,000.
National Multiple Sclerosis Society				Person or
P.O. Box 4527				Business X
New York NY 10063	<del>-</del>	Exempt	Medical research	3,000.
North Shore Senior Center				Person or
161 Northfield Rd.	<b>-</b>			Business X
Northfield IL 60093	- <del> </del>	Exempt	Elderly services	1,000.
NorthShore University HealthSystem				Person or
1033 University Place, Suite 450				Business X
Evanston IL 60201	L	Exempt	Medical services	10,000.

Continued

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

	<del></del>			
Recipient	If recipient is	Foun-	Purpose of	Person or
	an individual,	dation	grant or contribution	Business
Name and address	show any	status		Checkbox
(home or business)	relationship to	of re-		
	any foundation	cipient		Amount
	manager or			
	substantial			
	contributor	ł		
	<del> </del>		·	
a Paid during the year	}	}		
Northwestern University Settlement				Person or
1400 Augustana Blvd.		<u> </u>	<u> </u>	Business X
Chicago IL 60622	<u> </u>	Exempt	Family services	3,000.
Parkinson's Disease Foundation				Person or
1359 Broadway Ave., Suite 1509		<u> </u>		Business X
New York NY 10018		Exempt	Medical research	3,000.
Pillars Community Services 333 N. LaGrange Rd.				Person or Business X
LaGrange Park IL 60526		Exempt	Family services	2,000.
Ravinia Festival Association	<del> </del>	Pyembr	Luminy SCIVICES	Person or
418 Sheridan Rd.				Business X
Highland Park IL 60035		Exempt	Music programs	3,000.
Ray Graham Association			,	Person or
2801 Finley Rd.				Business X
Downers Grove IL 60515		Exempt	Disability services	2,000.
Reading Is Fundamental				Person or
1825 Connecticut Ave. NW, Suite 400				Business X
Washington DC 20009		Exempt	Education programs	2,000.
Rehabilitation Institute of Chicago				Person or
345 E. Superior St.				Business X
Chicago IL 60611		Exempt	Medical services	5,000.
Rush Presbyterian St. Lukes Hospital		l_ <b>_</b>		Person or
1700 W. Van Buren St., Suite 250				Business X
Chicago IL 60612		Exempt	Medical services	5,000.
Save The Children		Í		Person or
54 Wilton St.				Business . X
Westport CT 06880		Exempt	Child poverty programs	2,000.
Sierra Club Foundation		<b>-</b>		Person or
85 Second St., Suite 750				Business X
San Francisco CA 94105		Exempt	Environmental programs	5,000.
Teach For America				Person or
315 W. 36th St., 6th Floor	<b>-</b>			Business X
New York NY 10018		Exempt	Education programs	5,000.
The Boston Foundation				Person or
75 Arlington St., 10th Floor				Business X
Boston MA 02116		Exempt	Community services	2,000.
The Field Museum				Person or Business X
1400 S. Lake Shore Dr. Chicago IL 60605		Exempt	Museum programs	3,000.
The Wetlands Initiative			1145Cam programs	Person or
53 W. Jackson Blvd., Suite 1015				Business X
Chicago IL 60604		Exempt	Environmental programs	1,000.
United Cerebral Palsy		•		Person or
547 W. Jackson Blvd., Suite 225				Business X
Chicago IL 60661	- <b></b>	Exempt	Medical research	

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

Line 3a statement

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year University of Michigan Trauma Burn Center Room UH-1C435 Ann Arbor MI 48109 Urban Gateways 205 W. Randolph St., Suite 1700 Chicago IL 60606		Exempt		Person or Business X 1,000. Person or Business X 3,000.
Volunteer Center of the New Trier Township 520 Glendale Ave., Suite 13 Winnetka IL 60093		 Exempt		Person or Business X
Walworth County Arts Council P.O. Box 1121 Williams Bay WI 53191		 Exempt	Community services	Person or Business X 1,000.
Year Up  93 Summer St., 5th Floor Boston MA 02110		 Exempt	Youth services	Person or Business X 1,000.

Total

156,000.

Form 990-PF, Page 1, Part I Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CT Corporation System	Representation	540.	0.	0.	540.
Total		540.	0.	0.	540.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year	
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value
2100 shs Altria Group common	9,146.	41,223.
3720 shs America Movil SAB common	14,387.	174,766.
3350 shs Apartment Investment & Management Co. common	72,978.	77,180.
4460 shs BP PLC common	15,772.	258,546.
1702 shs Bank of America common	22,086.	25,632.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Continued

	End of Year	
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value
1800 shs Bank of New York Mellon Corp. common	15,712.	50,346.
502 shs ConocoPhillips common	15,265.	25,637.
600 shs International Business Machines common	8,063.	78,540.
1453 shs Kraft Foods common	9,387.	39,493.
1410 shs PepsiAmericas Inc. common	2,056.	41,257.
10200 shs Pfizer Inc. common	33,245.	185,538.
2100 shs Philip Morris International common	20,842.	101,199.
2480 shs Telefonos de Mexico SA common	13,597.	41,118.
2480 shs Telmex Internacional Series L common	9,449.	44,020.
800 shs Time Warner Inc. common	24,950.	23,312.
200 shs Time Warner Cable common	8,798.	8,278.
16680.79 shs Vanguard 500 Index Fund	620,000.	1,712,617.
4865.865 shs Vanguard Total International Stock Fund	90,000.	70,103.
Total	1,005,733.	2,998,805.

Form 990-PF, Page 2, Part II, Line 10c

#### L- 10c Stmt

1	End of Year		
Line 10c - Investments - Corporate Bonds:	Book Value	Fair Market Value	
152,914.042 shs Vanguard Long-Term Investment Grade Bond Fund	1,345,000.	1,363,993.	
Total	1,345,000.	1,363,993.	