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form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

For	calendar year 2009, or tax year beginning		, and ending		
G C	heck all that apply: Initial return	Initial return of a for		Final return	1
	Amended return	Address chang	e	Name change	
Use	the IRS Name of foundation			A Employer identification	number
!	abel.				
Oth	erwise, THE EGANWOOD FAMILY FO		1C •	26-1164937	
	Print Number and street (or P O box number if mail is not del			B Telephone number	
	Specific City of the part and AIR code	<u>MITH 1800 BYE</u>	BERRY 1100	215-947-21	.00
	ructions Gity of town, State, and Zip code			C If exemption application is p	
	HUNTINGDON VALLEY, PA	19006		D 1 Foreign organizations	
H_C	theck type of organization: X Section 501(c)(3) exe	• •		Foreign organizations me check here and attach co	enting the 85% test, emputation
<u>L</u>		Other taxable private foundat		E If private foundation sta	
	ir market value of all assets at end of year J Accountin	· *	Accrual	under section 507(b)(1))(A), check here
		ner (specify)		F If the foundation is in a	
			asis)	under section 507(b)(1	1 '
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
_	Contributions, gifts, grants, etc., received	854,585.		N/A	(cash basis only)
	2 Check I if the foundation is not required to attach Sch 8	001,000.		41/42	
	3 cash investments				
<u>}</u>	4 Dividends and interest from securities	1,699.	1,699.	<u> </u>	STATEMENT 1
) I	5a Gross rents	2,0331	2/0330		
1	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	719,556.			
Revenue	b Gross sales price for all 857,139.				
. ē	7 Capital gain net income (from Part IV, line 2)		719,556.		
ď	8 Net short-term capital gain				
1	9 Income modifications				
	Gross sales less returns 10a and allowances				
:	b Less Cost of goods sold				
:	c Gross profit or (loss)				
,	11 Other income				
	12 Total Add lines 1 through 11	1,575,840.	721,255.		
	13 Compensation of officers, directors, trustees, etc	0.	0.	-	0.
	14 Other employee salaries and wages				
so.	15 Pension plans, employee benefits				
enses	16a Legal fees				
ē	b Accounting fees				
Expe	c Other professional fees STMT 2	234.	234.		0.
ţ	17 Interest 18 Taxes ECEIVED COTMT 3	10 144			
stra	18 Taxes CEV STMT 3 19 Depreciation and depletion 20 Occupancy 7 200	10,144.	0.		0.
Ξ	19 Depreciation and depletion		 		
튬	20 Occupancy 7 2010 \000				
ΨÞ	21\ Travel, contenees, and meetings				<u> </u>
Operating and Administrative	22 Ather expenses DE				
ing					
erat.	24 Total operating and administrative	10 270	224		
ă	expenses. Add lines 13 through 23	10,378.	234.		0.
	25 Contributions, gifts, grants paid	25,082.		 	25,082.
	26 Total expenses and disbursements.	35 460	224		25 002
	Add lines 24 and 25	35,460.	234.		25,082.
	27 Subtract line 26 from line 12:	1 540 300			
	Excess of revenue over expenses and disbursements Not investment income (forestive color 0)	1,540,380.	721,021.		
	b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		141,041.	N/A	
	v Aujusteu net moonte (il negative, enter -0-)			14/43	<u> </u>

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

For	m 99	O ¹ -PF (2009) THE EGANWOOD FAMILY FOU		26-	1164937 Page 2
P	art	II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
Ė			(a) Book Value	(b) Book Value	(c) Fair Market Value
	ı	Cash - non-interest-bearing	200 704	1 110 110	1 110 110
	ı	Savings and temporary cash investments	280,794.	1,119,118.	1,119,118.
	3	Accounts receivable -	-	,	
	١.	Less: allowance for doubtful accounts	 		
	4	Pledges receivable -	-{	,	
		Less: allowance for doubtful accounts	 		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
] _	disqualified persons	<u> </u>		
	7	Other notes and loans receivable	-		
	١.	Less: allowance for doubtful accounts	 		
Assets	l	Inventories for sale or use			
Ass	l l	Prepaid expenses and deferred charges	<u> </u>		
•	1	Investments - U.S. and state government obligations			
	ļ.	Investments - corporate stock	-		
	Į.	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	-{		
		Less accumulated depreciation	 		
	Ι.	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis	-	j	
	4.5		 -		
	10	Other assets (describe			
	16	Total assets (to be completed by all filers)	280,794.	1,119,118.	1,119,118.
_		Accounts payable and accrued expenses	200,194.	1,113,110.	1,113,110.
	18	Grants payable			
,	19	Deferred revenue	 		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ρij	21	Mortgages and other notes payable			
Ľ	ł .	Other liabilities (describe)			
		Onto habilities (associate >			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here	† -		
		and complete lines 24 through 26 and lines 30 and 31			
es	24	Unrestricted	1		
and	25	Temporarily restricted			
Bal	1	Permanently restricted			
pu		Foundations that do not follow SFAS 117, check here			
Ŧ		and complete lines 27 through 31			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	0.	0.	
sets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	280,794.	1,119,118.	
let	30	Total net assets or fund balances	280,794.	1,119,118.	
2,					
	31	Total liabilities and net assets/fund balances	280,794.	1,119,118.	
	art	III Analysis of Changes in Net Assets or Fund I			
<u>_</u>	ar t				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), lin	e 30		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	280,794.
_		r amount from Part I, line 27a		2	1,540,380.
		r increases not included in line 2 (itemize)	SEE STA	TEMENT 4 3	12,628.
4	Add	lines 1, 2, and 3		4	1,833,802.
5	Decr	eases not included in line 2 (itemize)	SEE STA	TEMENT 5 5	714,684.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30	6	1,119,118.
					Form 990-PF (2009)

Part IV Capital Gains	and Losses for Tax on In	ivestment	Income				
	cribe the kind(s) of property sold (e.g. arehouse; or common stock, 200 shs		,_,	(b) How P - Pu D - Do	acquired rchase nation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 14,849 SHS, WY	ETH PHARMACEUTIC	ALS			D	03/21/01	10/08/09
b 2,641 SHS, WYE	TH PHARMACEUTICA	LS			D	03/21/01	10/08/09
c CAPITAL GAINS	DIVIDENDS						
_d							
_e	· · · · · · · · · · · · · · · · · · ·			<u> </u>			<u></u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			(h) Gain or (loss (e) plus (f) minus	
a 727,707.			116,80	8.			610,899.
<u>b</u> 129,428.			20,77	75.			108,653.
<u>c</u> 4.							4.
_d							
e Complete of the control of		45 - 6 4-1	40/04/00				
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Ex	cess of col. (ı)			l) Gains (Col (h) gain l. (k), but not less tha Losses (from col (n -0-) or
	as of 12/31/69	over	col. (j), if any				
<u>a</u>							610,899.
<u>b</u>			-				108,653.
<u>C</u>							4.
<u>d</u>							
Capital gain net income or (net ca	I If gain, also enter apital loss) If (loss), enter -0-	r in Part I, line	7	} 2			719,556.
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) an		1				110,000.
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8				<u>}</u>		N/A	L
	Inder Section 4940(e) for e foundations subject to the section 4				ment Inc	come	
If "Yes," the foundation does not qua	his part blank. stion 4942 tax on the distributable am <u>llify under section 4940(e). Do not co</u> each column for each year; see instri	omplete this pa	rt.				Yes X No
(a) Base period years Calendar year (or tax year beginni	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncharitabl	e-use assets	Distril	(d) bution ratio vided by col (c))
2008	ing in)	0.			93,640	(00.11 (0) 0.11	.00000
2007		0.				0.	.000000
2006	*****						
2005							
2004							
2 Total of line 1, column (d)						2	.000000
	5-year base period - divide the total of	on line 2 by 5,	or by the number	r of years			
the foundation has been in existe	ence if less than 5 years					3	.000000
4 Enter the net value of noncharital	ble-use assets for 2009 from Part X,	line 5				4	517,581.
5 Multiply line 4 by line 3						5	0.
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6	7,210.
7 Add lines 5 and 6						7	7,210.
8 Enter qualifying distributions from	m Part XII, line 4					8	25,082.
·	n line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	ng a 1% ta	x rate.		
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_	rt VI Excise Tex Based on Investment Income (Section 4040(a), 4040(b), 4040(c),		-1104			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	4940	y - see	instru	Ctio	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	- 1	1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	ĺ				
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			7,2	<u>10.</u>
	of Part I, line 27b	ŀ				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	ł				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			7,2	<u> 10.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5			7,2	10.
6	Credits/Payments:	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 5, 04	0.				
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)		İ			
	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7	1		5,0	40.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9			2.1	70.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	_				
	rt VII-A Statements Regarding Activities	- , ,,	' 			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interv	ene in			Yes	No
	any political campaign?			1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public			<u> </u>		
	distributed by the foundation in connection with the activities					
^	Did the foundation file Form 1120-POL for this year?			10		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			- "		
·		0.				
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	<u> </u>				
-	managers. > \$ 0 .					
9	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
2	If "Yes," attach a detailed description of the activities					
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	n or				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	, oi		3		x
4.	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
			M/V	5		X
Э	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			3		
c	If "Yes," attach the statement required by General Instruction T Are the requirements of casting 508(a) (relating to sections 4041 through 4045) catefied either:					
0	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			l ,		
	By language in the governing instrument, or Dischard legislation that office with amount of the construment on the language in the government of the construment.					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the	state law			v	
_	remain in the governing instrument?			6	<u>X</u>	
1	Did the foundation have at least \$5,000 in assets at any time during the year?			7_	_ _ _	
_	If "Yes," complete Part II, col. (c), and Part XV			ĺ .		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NJ					
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b_	_X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	calendar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9_	_	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10_		<u>X</u>
			For	m 990	-PF	2009)

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Pa	art 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_		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12	{-	<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	47 0	100	
14	The books are in care of PRESSMAN CIOCCA SMITH LLP Telephone no PRESSMAN CIOCCA SMITH LLP		100	
	Located at ► 1800 BYBERRY ROAD SUITE 1100, HUNTINGDON VALLEY, ZIP+4 ►1	9006		7
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	3.7	/ ⊅	
Pa	and enter the amount of tax-exempt interest received or accrued during the year Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required		/ <u>A</u> _	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		. (
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	ļ	. (
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	. [
	for the benefit or use of a disqualified person)?	(
	(6) Agree to pay money or property to a government official? (Exception Check "No"	į .		
	ıf the foundation agreed to make a grant to or to employ the official for a period after	į.		
	termination of government service, if terminating within 90 days.)	į.		
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	- 1		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	ł		
_	before the first day of the tax year beginning in 2009?	1c		<u>X</u>
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?			
	If "Yes," list the years ▶ , , , ,	-		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			ı
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2009) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		<u>X</u>
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Part VII-B Statements Regarding Activities for Which F		Required (contin	<u> 20-11049</u> ued)	<u> 3 / P</u>	2age 6
5a During the year did the foundation pay or incur any amount to:	Om 4720 May be 1	required (contin	ueu)		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1.4045(a)\2	[] v,	es X No	1	
(2) Influence the outcome of any specific public election (see section 4955); or	, ,,		3 (2) 110		
any voter registration drive?	to carry on, an oony or mane		s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	>		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?	. 4000/1000 000		s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?	ar a da da marian par parada, ar i		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru		· ·	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check hi	ere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined			
expenditure responsibility for the grant?	N	Γ/A □ Y€	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on				
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	_X_
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 📙		
b If yes, did the foundation receive any proceeds or have any net income attribute				7b	
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	y		
				<u> </u>	
List all officers, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Eyn	
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expe account,	other
	to position	`enter'-0-)	compensation	allowan	ices
SEE STATEMENT 6		0.	0.		0.
DE STRIEMENT 0			<u> </u>		<u> </u>
		 			
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	'		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expe	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, allowan	other ices
NONE					
					_
		<u> </u>			
otal number of other employees paid over \$50,000					0
			Form	990-PF (2	2009)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Con	npensation
NONE		
		
Total number of others receiving over \$50,000 for professional services		0
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.	Expense	s
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	
1 NONE		0
2		0.
All other program-related investments. See instructions.		
Total Add lines 1 through 3		

Form **990-PF** (2009)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions)
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	72,069.
	Average of monthly cash balances	1b	72,069. 453,394.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	525,463.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	525,463.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,882.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	517,581.
6_	Minimum investment return. Enter 5% of line 5	_6	25,879.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	25,879.
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	7,210.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	18,669.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	18,669.
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	18,669.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	25,082.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	25,082.
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	5	7,210.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	17,872.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for	the section

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable	amount for 2009 from Part XI,				
line 7	amount of 2000 wom't arrivit,				18,669.
	ncome, if any, as of the end of 2009				2070051
a Enter amoun	-			0.	
b Total for price	· · · · · · · · · · · · · · · · · · ·	-	· · · · · · · · · · · · · · · · · · ·		
			0.		
3 Excess distri	butions carryover, if any, to 2009:				
a From 2004					
b From 2005					
c From 2006					
d From 2007					
e From 2008					
f Total of lines	3a through e	0.			
	stributions for 2009 from				-
Part XII, line					
	008, but not more than line 2a			0.	
	idistributed income of prior				
• •	on required - see instructions)		0.		
	stributions out of corpus				
	uired - see instructions)	0.			
•	109 distributable amount			-	18,669.
-	mount distributed out of corpus	6,413.			10,003.
	itions carryover applied to 2009	0,113.			0.
(If an amount a must be shown	opears in column (d), the same amount	•			0.
6 Enter the ne indicated be	t total of each column as low:				
& Corpus Add III	nes 3f, 4c, and 4e Subtract line 5	6,413.			
b Prior years' i	indistributed income. Subtract			-	
line 4b from	line 2b		0.		
undistributed deficiency ha	ount of prior years' I income for which a notice of is been issued, or on which 942(a) tax has been previously		0.		
d Subtract line	6c from line 6b. Taxable				
	instructions		0.		
e Undistribute	income for 2008. Subtract line				
	2a. Taxable amount - see instr.			0.	
f Undistributed	I income for 2009. Subtract				
lines 4d and	5 from line 1. This amount must			'	
be distribute	d in 2010				0.
7 Amounts tre	ated as distributions out of				
corpus to sa	tisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
	butions carryover from 2004				
not applied of	in line 5 or line 7	0.			
	butions carryover to 2010				
	s 7 and 8 from line 6a	6,413.		!	
O Analysis of li	ľ				
a Excess from					
b Excess from					
c Excess from			ļ		
d Excess from	<u> </u>				
e Excess from	2009 6,413.				

Form 990-PF (2009) THE EGA	NWOOD FAMII	Y FOUNDATIO	ON, INC.	26-11	L64937 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	r 2009, enter the date of	the ruling	>		
b Check box to indicate whether the found	lation is a private operati	ng foundation described	ın section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					1
each year listed					
b 85% of line 2a		<u></u>	<u> </u>		ļ
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	ļ				
exempt activities	ļ	ļ			
 Qualifying distributions made directly 					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon.		<u> </u>			
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	}	 	ļ		·-·
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)			ļ		<u> </u>
(3) Largest amount of support from					
an exempt organization		 	 		
(4) Gross investment income Part XV Supplementary Info	rmotion /Comple	to this part only	if the foundation	- bad \$5 000 ar -	lava in access
at any time during t			ii tile louridatio	11 11au \$5,000 01 111	ore iii assets
1 Information Regarding Foundatio					
List any managers of the foundation whyear (but only if they have contributed managers)	o have contributed more		tributions received by t	ne foundation before the clo	ose of any tax
WILLIAM C. EGAN					
b List any managers of the foundation wh other entity) of which the foundation has			(or an equally large por	tion of the ownership of a p	partnership or
NONE					
2 Information Regarding Contribution Check here ► 🗓 if the foundation o	nly makes contributions	to preselected charitable	organizations and does	s not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations	under other conditions,	complete items 2a, b, c, an	d d.
a The name, address, and telephone num	ber of the person to who	m applications should be	e addressed:		
b The form in which applications should b	e submitted and informa	ition and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kinds of institutions, o	r other factors:	

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Y		Payment	- 	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year INSTITUTE FOR ETHNO-MEDICINE PO BOX 3464 JACKSON, WY 83001	NONE	ORGANIZATI	PAYMENTS FOR MEDICINAL RESEARCH	10,000.
STUART COUNTRY DAY SCHOOL OF THE SACRED HEART 7200 STUART ROAD PRINCETON, NJ 08540	NONE	1	SCHOLARSHIP SUPPORT	7,541.
WESTMINSTER SCHOOL 995 HOPEMEADOW STREET PO BOX 337 SIMSBURY, CT 06070	NONE	OTHER PUBLIC CHARITY	ANNUAL FUND	7,541.
			,	
	:			
Total			▶ 3a	25,082.
b Approved for future payment				
NONE				
Total		<u> </u>	▶ 3b	0.
Total				<u> </u>

Part XVI-A Analysis of Income-Producing Activities

Cata area and and and and and and and and and an	Unrelated b	usiness income	Excluded b	y section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d)	(e) Related or exempt function income
1 Program service revenue:	code		code	7 inoun	
a					
b	1 1		+		
<u> </u>	I I		 		
d	1 1		 		
e	-		┼─┼─		
g Fees and contracts from government agencies	-		 		
2 Membership dues and assessments			1	-	
3 Interest on savings and temporary cash			 -		
investments			1 1		
4 Dividends and interest from securities			14	1,699.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					····
6 Net rental income or (loss) from personal			 		
property					
7 Other investment income	-				
8 Gain or (loss) from sales of assets other					
than inventory			18	719,556.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			1 1		
b					
C					
d	1 1				
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		721,255.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	721,255.
(See worksheet in line 13 instructions to verify calculations.	.)				
Part XVI-B Relationship of Activities	s to the Accom	plishment of E	xempt Pu	ırposes	
Line No. Explain below how each activity for which in			A contributed	importantly to the accomp	olishment of
the foundation's exempt purposes (other th	an by providing funds	for such purposes).		- 	
		 -			
		·——-		· · · · · · · · · · · · · · · · · · ·	
				 	
				·	
					
	-				
923621					Form 990-PF (2009)

2a	Is the	foundation directly or indirect	lly affiliated with, or rela	ated to, one or more tax	k-exempt organizati	tions described	
	ın sec	tion 501(c) of the Code (other	than section 501(c)(3)) or in section 527?	, -		Yes X No
b		s," complete the following sche		••			
	(a) Name of organization			(b) Type	of organization	(c) Descrip	tion of relationship
		N/A					
							
							···
							· · · · · · · · · · · · · · · · · · ·
							· · · · · · · · · · · · · · · · · · ·
	Under p	enalties of perjury, I declare that I ha	ave enemined this return, ii	ncluding accompanying scl	nedules and statement	ts, and to the best of my knowled	ige and belief, it is true, correct,
1		plete Declaration of preparer (office					1
-		2 Juliania	(Mr. TIL	ر _ا ح	112/10	12 c : d	·T
စ	9	gnature of officer or trustee	sym es		ate	Title	<u>u.</u> 1
Here	01		 		Date	e Check if	Preparer's identifying number
Sign	ر د م	Preparer's	and/In	2015	~ / / / · · · ·	self-	[]
ŝ	Paid Preparer's Use Only	signature POPC		Zmil.		employed	<u> </u>
-	Paid spare se On	Firm's name (or yours PRES		_	P, CPA'S	EIN	
ı	కైప	if self-employed), 1800			1100		
1	_	address, and ZIP code HUNT	INGDON VAL	LEY, PA 19	<u>006-3523</u>	Phone no	o. 215-947- <u>2100</u> _

Form **990-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

Name of the organization

Employer identification number

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

T	HE EGANWOOD FAMILY FOUNDATION, INC.	26-1164937					
Organization type (check of	one)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a section 501(c)							
contributor Comp		, , , , , ,					
Special Rules		(1) nonexempt charitable trust not treated as a private foundation thical organization (2) exempt private foundation (1) nonexempt charitable trust treated as a private foundation (3) taxable private foundation (4) taxable private foundation (5) taxable private foundation (6) taxable private foundation (7) taxable private foundation (8) taxable private foundation (8) taxable private foundation (8) taxable private foundation (8) taxable private foundation (9) taxable private foundation (10) taxable private foundation (11) taxable private foundation (12) taxable private foundation (13) taxable private foundation (14) taxable private foundation (15) taxable private foundation (16) taxable private foundation (17) taxable private foundation (18) taxable private foundation (19) taxable private foundation (10) taxable private foundation (1					
509(a)(1) and 170(
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III							
contributions for u If this box is check purpose Do not c	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year						
but it must answer "No" on							

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF.

Schedule B (F	orm 990, 990-EZ, or 990-PF) (2009)		Page 1 of 1 of Part I		
Name of org	ganization	Er	nployer identification number		
THE E	GANWOOD FAMILY FOUNDATION, INC.		26-1164937		
Part I	Contributors (see instructions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution		
1	WILLIAM & PAULINE EGAN 120 PROVINCE LINE ROAD SKILLMAN, NJ 08558	\$\$ <u>854,58</u>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)		
923452 02-0		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution) orm 990, 990-EZ, or 990-PF) (2009		

THE EGANWOOD FAMILY FOUNDATION. INC.

26-1164937

	GANWOOD FAMILY FOUNDATION, INC.		-1164937
art II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	17,802 SHARES OF WYETH PHARMACEUTICALS		
		\$854,585.	09/25/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
	1-10		90, 990-EZ, or 990-PF) (

FORM 990-PF DI	VIDENDS ANI	O INTER	EST FROM	SECUF	RITIES	STATEMENT	1
SOURCE		GROSS	CAPITAL GAINS AMOUNT DIVIDENDS			COLUMN (A) AMOUNT	
PNC BANK, N.A. (HAWTHOF	1,703.			4.	1,699.		
TOTAL TO FM 990-PF, PAF	RT I, LN 4		1,703.		4.	1,69	
FORM 990-PF	OTHER	PROFES	SIONAL FI	EES		STATEMENT	2
DESCRIPTION	EXP	(A) ENSES BOOKS	(B) NET INVI MENT INC	EST-			
INVESTMENT MANAGEMENT F (PNC)	PEES	234.		234.			0.
TO FORM 990-PF, PG 1, I	IN 16C	234.		234.			0.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXP	(A) ENSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
PAYMENT WITH 2008 RETURN		5,104.		0.			0.
FIRST QUARTER ESTIMATED PAYMENT)	5,040.	0.			0.	
TO FORM 990-PF, PG 1, I	IN 18	10,144.		0.			0.
FORM 990-PF OTHER INC	CREASES IN 1	NET ASS	ETS OR F	UND BA	LANCES	STATEMENT	4
FORM 990-PF OTHER INC	CREASES IN	NET ASS	ETS OR F	UND BA	ALANCES	STATEMENT	4
						 	

FORM 990-PF OTHER DECREASES IN	NET ASSETS OR F	UND BALANCES	S STAT	EMENT 5
DESCRIPTION			A1	MOUNT
ADJUSTMENT FROM FMV TO COST BASIS SECURITIES ACCRUED INCOME ADJUSTMENT	OF CONTRIBUTED	MARKETABLE		714,549. 135.
TOTAL TO FORM 990-PF, PART III, I	INE 5			714,684.
	ST OF OFFICERS, D FOUNDATION MANA		STAT	EMENT 6
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
WILLIAM C. EGAN 120 PROVINCE LINE ROAD SKILLMAN, NJ 08558	DIRECTOR 0.25	0.	0.	0.
PAULINE WOOD EGAN 120 PROVINCE LINE ROAD SKILLMAN, NJ 08558	DIRECTOR 0.25	0.	0.	0.
KATHERINE EGAN GILBANE 78 BEACON STREET BOSTON, MA 02108	DIRECTOR 0.10	0.	0.	0.
WILLIAM MACDOUGALL EGAN 802/1A TUSCULUM POTTS POINT, NEW SOUTH WALES, CANADA	DIRECTOR 0.10	0.	0.	0.
JANE EGAN BERTELSON 389 EAST 89TH STREET, APT. 12-F NEW YORK, NY 10128	DIRECTOR 0.10	0.	0.	0.
TIMOTHY WOOD EGAN 89 BEACON STREET APT. 3 BOSTON, MA 02108	DIRECTOR 0.10	0.	0.	0.
EMILY CHRISTINE EGAN 1641 THIRD AVENUE #11D NEW YORK, NY 10128	DIRECTOR 0.10	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.