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Department of the Treasury

Return of Private Foundation

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

2009

OMB No 1545-0052

inter	nai ne	venue Service Mata. The Touridation may t				
For	calen		21, 2009	, and ending	DEC 31, 2009	
G	Check	all that apply X Initial return	· · · · · · · · · · · · · · · · · · ·	ormer public charity	Final return	
		Amended return	Address change	ge L.	Name change	
Use	the	IRS Name of foundation		s.	A Employer identification	number
	abel	Augustion exactly equal		27 0006202		
Oth	erwi:		27-0886303			
n	print r type		livered to street address)	Room/suite	B Telephone number 860–677–79	0.2
	Spe	pifie TIT WITTER A BICKETOE				
	ructio				C If exemption application is p	
ш ,	book		amat armeta famadation		D 1. Foreign organizations 2 Foreign organizations me check here and attach co	eting the 85% test,
<u>" </u>	_	type of organization X Section 501(c)(3) exction 4947(a)(1) nonexempt charitable trust	empt private foundation Other taxable private founda	ation		
 		irket value of all assets at end of year J Accounting		Accrual	E If private foundation state under section 507(b)(1)	
			her (specify)	Accidat	, ,, ,	•
	\$	104, 189 . (Part I, colu	· · · · · · · · · · · · · · · · · · ·	basis.)	F If the foundation is in a (under section 507(b)(1)	
P;	art l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	190,000.	1		
	2	Check ▶ ☐ If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	765.	765.	765.	STATEMENT 1
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)				
9	6a	Net gain or (loss) from sale of assets not on line 10				
e C	b	Gross sales price for all assets on line 6a				, , , , , , , , , , , , , , , , , , ,
Revenue	7	Capital gain net income (from Part iV, line 2)		0.		
	8	Net short-term capital gain		,		
	9	Income modifications Gross sales less returns				
	10a	and allowances				
		Less Cost of goods sold				
		Gross profit or (loss)				
	11	Other-income	100 765	7.65	7.65	
	12	Total. Add lines 1 through 11	190,765.	765.	765.	
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14	Other employee salaries and wages				
S	15	CTIMIT 2	6,576.	6,576.	0.	0.
sesue	16a	Accounting Ges EN UT	0,370.	0,570.	<u> </u>	0.
Exper	ם מ	Other professional fees				
ē E	ŀ	Interest				
aţį	18	Taxes				
istr	19	Depreciation and depletion			,	
nin	20	Occupancy				<u></u>
Operating and Administrative	21	Travel, conferences, and meetings				
ğ	22	Printing and publications				
ē G	23	Other expenses				
aţį	1	Total operating and administrative				
per		expenses. Add lines 13 through 23	6,576.	6,576.	0.	0.
Õ	25	Contributions, gifts, grants paid	80,000.			80,000.
	ı	Total expenses and disbursements				
		Add lines 24 and 25	86,576.	6,576.	0.	80,000.
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	104,189.			
	b	Net investment income (if negative, enter -0-)	-117	Û.		
2005	C	Adjusted net income (if negative, enter -0-)			765.	

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

Form **990-PF** (2009

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	Beginning of year		f year
Part II Balance Sheets column should be for end-of-year amounts only	(a) Book Value		(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing		0.	104,189.	104,189.
2 Savings and temporary cash investments				
3 Accounts receivable ►			, , , , , , , , , , , , , , , , , , , ,	
Less allowance for doubtful accounts		[
4 Pledges receivable				. n v
Less allowance for doubtful accounts ▶				
5 Grants receivable				
6 Receivables due from officers, directors, trustees, and other				
disqualified persons				
7 Other notes and loans receivable				
Less allowance for doubtful accounts		ı		
9 Prepaid expenses and deferred charges		\dashv	· · ·	
4 100 Investments - I.I.S. and state apparament abligations		- 		
10a Investments - U.S. and state government obligations				
b Investments - corporate stock		 -		
c Investments - corporate bonds				······································
11 Investments - land, buildings, and equipment basis				
Less accumulated depreciation				
12 Investments - mortgage loans				
13 investments - other	7 Come in terms of the comment			······································
14 Land, buildings, and equipment basis				
Less accumulated depreciation				
15 Other assets (describe	_)			
16 Total assets (to be completed by all filers)		0.	104,189.	104,189.
17 Accounts payable and accrued expenses				
18 Grants payable				
8 19 Deferred revenue				
Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Vorgages and other notes payable				
21 Mortgages and other notes payable				
22 Other liabilities (describe >)			
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.				
24 Unrestricted				
25 Temporarily restricted				
26 Permanently restricted				
Foundations that do not follow SFAS 117, check here	· · · ·			
and complete lines 27 through 31.				
27 Capital stock, trust principal, or current funds		0.	0.	A 24 4
28 Paid-in or capital surplus, or land, bldg, and equipment fund		0.	0.	
Temporarity restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances		0.	104,189.	
30 Total net assets or fund balances		0.	104,189.	
2 00 1012 1101 20000 01 14114 221411000		-	201,200	
31 Total liabilities and net assets/fund balances		0.	104,189.	
	 -			
Part III Analysis of Changes in Net Assets or Fund	Balances			
1 Total net assets or fund balances at beginning of year - Part II, column (a), ii	ne 30			
(must agree with end-of-year figure reported on prior year's return)	••			0.
2 Enter amount from Part I, line 27a			2	104,189.
3 Other increases not included in line 2 (itemize)	•		3	0.
4 Add lines 1, 2, and 3	· · · · · · · · · · · · · · · · · · ·		4	104,189.
5 Decreases not included in line 2 (itemize)			5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II	column (h) line 30			104,189.
- Tall II	- Column (D), mio OV	<u></u>		Form 990-PF (2009)

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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

Add lines 5 and 6

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Enter qualifying distributions from Part XII, line 4

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8

Form	990-PF (2009) CHENEVERT FAMILY FOUNDATION, INC.	27-0	886303	•	Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - :	see instr		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			0.
	of Part I, line 27b	- 1			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				•
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			<u>0.</u>
3	Add lines 1 and 2	3			0.
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			0.
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 6a				
b	Exempt foreign organizations - tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d	1			
7	Total credits and payments Add lines 6a through 6d	7			0.
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	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶	11			
Pa	rt 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 participate or intervene	ın		Yes	No
	any political campaign?		<u>1a</u>	ļ	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1 <u>b</u>		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or			
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		10		X
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers ► \$O.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	ļ	X
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	ſ			.,
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3_		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N7 /	4 <u>a</u>		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
_	If "Yes," attach the statement required by General Instruction T.		1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		1		
	By language in the governing instrument, or		-		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law		v	
_	remain in the governing instrument?		·· <u>6</u>	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	Α.	
٠.	If "Yes," complete Part II, col. (c), and Part XV.				
ga	Enter the states to which the foundation reports or with which it is registered (see instructions)		—		
	h If the appear is "Vos" to line 7, has the foundation furnished a copy of Form 000 PE to the Attorney Copyrel (or designate)				
D	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
^	of each state as required by General Instruction G? If "No," attach explanation			Х	
	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				Х
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	TMT	3 10	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S	****	3 10		

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had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form 990-PF (2009) CHENEVERT FAMILY FOUNDAT	ION, INC.	_ :	27-08863	03. F	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No		
(2) Influence the outcome of any specific public election (see section 4955), o			* [22] (10		
any voter registration drive?	it to ourly on, anoony or mone		s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		s 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)?	4000/1004 111 0004/011	☐ Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational numoses, or f				
the prevention of cruelty to children or animals?	or caucational parposes, or i		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	tor the excentions described i				
section 53 4945 or in a current notice regarding disaster assistance (see instru	· ·	ii iiogalationo	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	·		▶	-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined			
expenditure responsibility for the grant?		/A 🗆 Ye	s No		
If "Yes," attach the statement required by Regulations section 53.494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •		į		
a personal benefit contract?	pay promisino on	☐ Y _B	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	Х
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	s X No		
b If yes, did the foundation receive any proceeds or have any net income attribute			·	7b	
Post VIII Information About Officers, Directors, Trust		nagers, Highly			
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	1	[4-3-0	(d) 0	r	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expe account,	other
· · · · · · · · · · · · · · · · · · ·	to position	`enter'-0-)	compensation	allowar	ices
	CHAIRMAN AND	PRESIDENT			
8 ATWATER TERRACE	1 00		0		Λ
FARMINGTON, CT 06032	1.00 SECRETARY AND	0. TREASURE	0.	 	0.
DEBRA L. CHENEVERT 8 ATWATER TERRACE	SECKETAKI AND	IKEASUKE	K		
FARMINGTON, CT 06032	1.00	0.	0.		0.
PARMINGION; CI 00032	1:00		V -	<u> </u>	
			_		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		1	
(-) Alaman and address of a shared service and assess than #FO 000	(b) Title, and average		(d) Contributions to employee benefit clans	(e) Expo account,	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account,	ices
NONE					
				-	_
			· · · · · ·		
······································		[
		<u> </u>		<u> </u>	
Total number of other employees paid over \$50,000			▶ <u> </u>		0

3 NONE

Total Add lines 1 through 3

All other program-related investments. See instructions

	"330-11 (2003) CHEMEVERT PARTIES FOOMDATION, INC.	2, 0,	700303 Fage 0
P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	<u> </u>
þ	Average of monthly cash balances	1b	79,523.
C	Fair market value of all other assets	10	
đ	Total (add lines 1a, b, and c)	10	79,523.
e	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	79,523.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,193.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	78,330.
6	Minimum Investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	1,427.
P	Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations are foreign organizations check here and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	1,427.
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	O.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,427.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,427.
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	1,427.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	80,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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 4	4	80,000.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	80,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for the	section

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Part XIII Undistributed	l Income	(see instructions)
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,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				_
line 7	9110			1,427.
2 Unaistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	,
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009			***************************************	
a From 2004				
b From 2005				
€ From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ►\$ 80,000.				
a Applied to 2008, but not more than line 2a			0.	
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.			
d Applied to 2009 distributable amount				1,427.
e Remaining amount distributed out of corpus	78,573.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
3 Corpus Add lines 3f, 4c, and 4e Subtract line 5	78,573.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line			_	
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2010		· · · · · · · · · · · · · · · · · · ·	H.H	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)	<u>U.</u>	·····		
8 Excess distributions carryover from 2004	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	78,573.			
10 Analysis of line 9.				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008	1			
e Excess from 2009 78,573.				
	<u></u>	1.1.2		Form 990-PF (2009)

	ERT FAMILY F				386303 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo		*	▶		
b Check box to indicate whether the found		g foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		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					
each year listed					
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			ì		
Cubbrack line Od from line Oc					
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					
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	i	1	i	! 	i i
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	<u> </u>				<u> </u>
Part XV Supplementary Info			if the foundatio	n had \$5,000 or m	ore in assets
at any time during	the year-see the i	nstructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi			ributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed i	more than \$5,000). (See s	ection 507(d)(2))			
SEE STATEMENT 4					
b List any managers of the foundation wi			(or an equally large por	tion of the ownership of a	partnership or
other entity) of which the foundation ha	is a 10% or greater interes	st			
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan,	Scholarship, etc., Pi	rograms:		
			•	not accept unsolicited rec	uests for funds If
the foundation makes gifts, grants, etc	•	•	•		
a The name, address, and telephone num	·	<u></u>			
SEE STATEMENT 5					
b The form in which applications should	be submitted and informat	tion and materials they sl	nould include.		
c Any submission deadlines		· · · · · · · · · · · · · · · · · · ·			
d Any restrictions or limitations on award	s such as by neographics	al areas, charitable fields	kinds of institutions of	r other factors	
,	, sac as ay goograpmor		mananananananananananananananananananan		
					5 000 DE (0000)

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
a Paid during the year SMILOW CANCER HOSPITAL PARK STREET NEW HAVEN, CT 06511	any foundation manager or substantial contributor	status of recipient CHARITY	FUNDING FOR MEDICAL RESEARCH AND HEALTH CARE	80,000.
				80,000.
Total			▶ 3a	80,000.
b Approved for future payment				
NONE				
Total			<u>▶ 3b</u>	0.
923611 02-02-10			F	orm 990-PF (2009)

Part XVI-A	Analysis	of Income-	Producing	Activities
Part AVI-A	Anaiysis	or income-	Producing	ACTIVITIE

	lin-sisk- 4	huamane income	1		
Enter gross amounts unless otherwise indicated	(a) Business	business income (b) Amount	(C) Exclu- sion	(d) Amount	(ë) Related or exempt function income
1 Program service revenue	code		code	Aillouit	
<u> </u>	-		+		
b	-		1 1		
			+		
<u> </u>		<u></u>	+ +		
f			+		
g Fees and contracts from government agencies	_				
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash					
investments			14	765.	
4 Dividends and interest from securities			ii		
5 Net rental income or (loss) from real estate				7	
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					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a	_		\perp		
b	_		_		
C	_				
d	_				
9	_			765.	0.
12 Subtotal Add columns (b), (d), and (e)	<u> </u>		•1	· · · · · · · · · · · · · · · · · · ·	765.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations	\			13	703.
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	ncome is reported in	column (e) of Part XVI			plishment of
▼ the foundation's exempt purposes (other th	an by providing fund	ls for such purposes)			
					
				-	
	· ·	-		· · · · · · · · · · · · · · · · · · ·	
	<u>-</u>				
			· · ·		
	· · · · · · · · · · · · · · · · · · ·			 	
	•				
				·	
					Form 990-PF (2009)

860-678-9200

Form **990-PF** (2009)

Phone no

Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Dio the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1a(1) (2) Other assets 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 16(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 10 d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? X No Yes b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A including accompanying schedules and statements, and to the best o<u>f my kn</u>owledge and belief, it is true, correct, Signature of officer or trustee Check if Preparer's identifying number Preparer's Paid reparer's Jse Only signature employed 🕨 LUFKIN & BUGGY, LLP SASLOW, EIN ▶ TEN TOWER LANE if self-employed).

923622 02-02-10 address, and ZIP code

AVON,

CT

06001

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization	Employer identification number						
	27-0886303						
Organization type (chec	k 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						
	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special I	Rule. See instructions.					
General Rule							
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mplete Parts I and II.	money or property) from any one					
Special Rules							
509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re (0(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
aggregate contr	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For a section 501(c)(7), (8), or (10) 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. If 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"	n that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•					
LHA For Privacy Act ar for Form 990, 990	·	B (Form 990, 990-EZ, or 990-PF) (2009)					

Name of organization

Employer identification number

CHENEVERT FAMILY FOUNDATION, INC.

27-0886303

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CHENEVERT FAMILY 8 ATWATER TERRACE FARMINGTON, CT 06032	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(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) No.	(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) No.	(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) -No.	(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) No.	. (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 9,90-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH IN	NVESTMENTS S	TATEMENT	1	
SOURCE		AMOUNT 765.				
INTEREST INCOME						
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	LUMN A		76	65.	
FORM 990-PF	LEGAL	FEES	S	PATEMENT	2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI		
LEGAL FEES	6,576.	6,576.	0.	0.		
TO FM 990-PF, PG 1, LN 16A	6,576.	6,576.	0.			
	F SUBSTANTIA PART VII-A,	L CONTRIBUTORS	S S'	TATEMENT	3	
NAME OF CONTRIBUTOR	ADDR	ESS				
CHENEVERT FAMILY	Y 8 ATWATER TERRACE FARMINGTON, CT 06032					
FORM 990-PF	S'	TATEMENT	4			

NAME OF MANAGER

LOUIS R. CHENEVERT DEBRA L. CHENEVERT

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LOUIS R. CHENEVERT 8 ATWATER TERRACE FARMINGTON, CT 06032

TELEPHONE NUMBER

860-677-7982

FORM AND CONTENT OF APPLICATIONS

NO SPECIAL FORM REQUIRED. LETTER TO FOUNDATION MANAGER WILL SUFFICE.

ANY SUBMISSION DEADLINES

NONE.

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE PRIMARY ACTIVITIES OF THE FOUNDATION SHALL BE THE MAKING OF GRANTS TO DOMESTIC ORGANIZATIONS WHICH QUALIFY AS CHARITABLE, EDUCATIONAL AND/OR RELIGIOUS ORGANIZATIONS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND WHICH SHALL BE TAX EXEMPT UNDER SECTION 501(A), AND CONTRIBUTIONS TO WHICH SHALL BE TAX DEDUCTIBLE UNDER SECTION 170(C)(2).