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See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Department of the Treasury Internal Revenue Service

For calendar year 2009, or tax year beginning

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

, 2009, and ending

12/31

12/02

OMB No 1545-0052

2009

2009

G Check all that apply X Initial return Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number Use the DEVINE-MAJORS FOUNDATION IRS label. 27-1405032 Otherwise, C/O DAVIS GRABER PLOTZKER & WARD В Telephone number (see the instructions) print 150 EAST 58TH STREET 20FL NEW YORK, NY 10155 or type. See Specific С If exemption application is pending, check here Instructions D 1 Foreign organizations, check here Н Check type of organization X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated Fair market value of all assets at end of year Accounting method X Cash Accrual under section 507(b)(1)(A), check here. (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 3,545,478 (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements: Expenses (The total of amounts in expenses per books income for charitable income columns (b), (c), and (d) may not necessarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) 3,517,202 Contributions, gifts, grants, etc, received (att sch) if the foundn is not req to att Sch B Interest on savings and temporary cash investments N/A Dividends and interest from securities 1.722 1,722 5a Gross rents **b** Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule). Total. Add lines 1 through 11 1,722 3.518.924 13 Compensation of officers; directors, trustees, etc. Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) A D M **b** Accounting fees (attach sch) c Other prof fees (attach sch) 17 Interest RECEIVED 18 Taxes (attach schedule)(see instr.) Depreciation (attach Q sch) and depletion 0 2 2010 Occupancy 21 Travel, conferences, and meetings. Printing and publications 22 OGDEN. UT 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 0 0 0. 27 Subtract line 26 from line 12: a Excess of revenue over expenses 3,518,924 and disbursements 1,722 b Net investment income (if negative, enter -0-).

C Adjusted net income (if negative, enter -0-)

Dad	m	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		End c	of year
ran	SW I	Column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Valu	е	(c) Fair Market Value
	1	Cash - non-interest-bearing				
	٠2	Savings and temporary cash investments		2,0	06.	2,006.
	3	Accounts receivable				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable		<u> </u>		
		Less. allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach sch)				
S		Less: allowance for doubtful accounts ▶		-		
A S E T	8	Inventories for sale or use				
Ť	9	Prepaid expenses and deferred charges		<u> </u>		
S	10	 a Investments – U S. and state government obligations (attach schedule) 				
		b Investments — corporate stock (attach schedule)		3,125,0	<u>97.</u>	3,543,472.
		c Investments — corporate bonds (attach schedule)		-		
	11	Investments — land, buildings, and equipment basis				
		Less. accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans	_			
	13	Investments - other (attach schedule)				
	14	Land, buildings, and equipment basis.				
		Less accumulated depreciation (attach schedule)				
		Other assets (describe Total assets (to be completed by all filers — see instructions. Also, see page 1, item i)	0.	3,127,1	03.	3,545,478.
L	17		<u> </u>	3,12,,1		3,010,170:
Į	18	,				
A B	19					
- [20	Loans from officers, directors, trustees, & other disqualified persons				
ī	21	Mortgages and other notes payable (attach schedule)			\neg	
Ţ	22				$\neg \neg$	
Ė						
<u> </u>	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117 check here	0.		0.	
		and complete lines 24 through 26 and lines 30 and 31.				
N F E U T N	24	Unrestricted				
ĪŅ	25	Temporarily restricted				
A D	26	<u> </u>				
A B A L A S N		Foundations that do not follow SFAS 117, check here.				
EL	27	Capital stock, trust principal, or current funds		3,127,1	03.	
	28	Paid-in or capital surplus, or land, building, and equipment fund		<u> </u>		
O E	29	Retained earnings, accumulated income, endowment, or other funds				
RS	30	Total net assets or fund balances (see the instructions)	0.	3,127,1	03.	
	31	Total liabilities and net assets/fund balances (see the instructions)	0.	3,127,1	03.	
Paril		Analysis of Changes in Net Assets or Fund Balanc		3,32.,70		
		il net assets or fund balances at beginning of year - Part II, colu		aree with		
•	end-	of-year figure reported on prior year's return)	anni (a), mie 50 (mast a)	gree with	1	0.
2	Ente	er amount from Part I, line 27a			2	3,518,924.
3		Increases not included in line 2 (itemize)		3		
4		lines 1, 2, and 3	_	Ļ	4	3,518,924.
5		eases not included in line 2 (itemize) ► See Statement		_	5	391,821.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)) – Part II, column (b), I	ine 30	6	3,127,103.

(a) List and describ	Losses for Tax on Investment the kind(s) of property sold (e.g., ruse, or common stock, 200 shares Muse, and the common stock, 200 shares Muse, and 200 s	eal estate.	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)	
1a N/A						
b `						
c						
d						
<u>e</u>	_					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m		
a						
b						
с						
d	<u> </u>					
e	1					
	wing gain in column (h) and owned by			(I) Gains (Col		
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		gain minus column (l an -0-) or Losses (fr	om column (h))	
ab						
c						
d						
е		-				
2 Capital gain net income or (ne	et capital loss) If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	. 2			
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)					
	• •	· · ·				
If gain, also enter in Part I, lir in Part I, line 8	ne 8, column (c) (see the instructions)) If (loss), enter -0-	3			
	er Section 4940(e) for Reduce	d Tax on Net Investme	ent Income	1		
If 'Yes,' the foundation does not qua	ection 4942 tax on the distributable an alify under section 4940(e) Do not co	mplete this part	· 	Yes	No	
1 Enter the appropriate amount	in each column for each year, see th	e instructions before makin	g any entries.	<u> </u>		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets (col	(d) Distribution umn (b) divided	ratio by column (c))	
2008						
2007		_				
2006						
2005						
2004						
2 Total of line 1, column (d)			2			
3 Average distribution ratio for t	the 5-year base period – divide the to	otal on line 2 by 5, or by the				
number of years the foundation	3					
4 Enter the net value of noncha	4		-			
5 Multiply line 4 by line 3						
6 Enter 1% of net investment in	6 Enter 1% of net investment income (1% of Part I, line 27b)					
7 Add lines 5 and 6			7			
8 Enter qualifying distributions f	from Part XII, line 4		8			
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						

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

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

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses See Statement 2

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8b X

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10

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enterprise at any time during the year?

b If 'Yes,' did it have excess business holdings in 2009 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

NVA 3ь 4a

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Form 990-PF (2009)

WAYNESBORO, VA 22980				
]			!
2 Compensation of five highest-paid employe	as (athor than those in	ludad on line 1 cas is	actructions) If none o	ntor 'NONE '
· · - · - · - · - · - · - · · · · ·	1	i e		
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances
None				
	<u> </u>			
	-			
Total number of other employees paid over \$50,00	0	<u> </u>	•	
BAA	TEEA0306L (07/06/09		Form 990-PF (2009

Form 990-PF (2009) DEVINE-MAJORS FOUNDATION 27-14	
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
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	(4)
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
	1
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 <u>N/A</u>	
2	
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 <u>N/A</u>	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0.

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see instructions.)	oreign i	oundations,
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	1 a	3,543,472.
b Average of monthly cash balances	1 b	2,006.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	3,545,478.
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	3,545,478.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	53,182.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,492,296.
6 Minimum investment return. Enter 5% of line 5 Short Year Modified Percentage 0.411 %	6	14,353.
Part Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper		undations
and certain foreign organizations check here ▶ □ and do not complete this pa	rt.)	_
1 Minimum investment return from Part X, line 6	1	14,353.
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.	2 c	34.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	14,319.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	14,319.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	14,319.
PartXII 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	1 a	
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 	3a	
b Cash distribution test (attach the required schedule).	3ь	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when qualifies for the section 4940(e) reduction of tax in those years	ther the f	oundation

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				14,319.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years 20, 20, 20		0.		
3 Excess distributions 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.			
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$				
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	,			0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears ın column (d), the same amount must be shown ın column (a))				
(-, ,				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.		·- ·	
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.		
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				14 210
distributed in 2010				14,319.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3)	0.			
(see instructions)				
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	0.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				1
c Excess from 2007				ĺ
d Excess from 2008				
e Excess from 2009				<u> </u>

Form 990-PF (2009) DEVINE-MAJORS FO				27-1405032	
Part XIV Private Operating Foundat	ions (see instruc	tions and Part	VII-A, question 9	<u> </u>	N/A
1a If the foundation has received a ruling or is effective for 2009, enter the date of the	e ruling	•	_	*	-
b Check box to indicate whether the found		erating foundation o		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	<u> </u>	Prior 3 years		
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
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					<u>-</u>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			ļ		
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					
 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					
Part XV Supplementary Information assets at any time during t	n(Complete this he year — see in	part only if the structions.)	organization ha	d \$5,000 or mor	e in
1 Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they have None	have contributed m	ore than 2% of the than \$5,000) (See	total contributions resection 507(d)(2))	eceived by the found	lation before the
b List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more of foundation has a 1	of the stock of a cor 0% or greater inter	poration (or an equa est	illy large portion of t	he ownership of
2 Information Regarding Contribution, Gra Check here ► X if the foundation only requests for funds If the foundation mak complete items 2a, b, c, and d	makes contributions	to preselected cha	arıtable organizations	and does not accep inizations under other	ot unsolicited er conditions,
a The name, address, and telephone numb	per of the person to	whom applications	should be addressed		
b The form in which applications should be	submitted and infor	mation and materia	als they should include	de	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of i	nstitutions, or other	factors

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3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	N/A Amount		
Name and address (home or business)	substantial contributor	recipient				
a Paid during the year	Substanual contributor					
Total	•		► 3a			
b Approved for future payment			> 2h			

iter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	
. 1 Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions
a	 		 	<u> </u>	
b	 	_	 		
C	-		 		
d	 		+ +		
e	 		 		
g Fees and contracts from government agencies	 		 		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			- - - - - - - - - - 		
4 Dividends and interest from securities			14	1,722.	
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					
9 Net income or (loss) from special events					
Of Gross profit or (loss) from sales of inventory					L
11 Other revenue					
a	.				<u> </u>
b					<u> </u>
c			 		
d	+ +		 -		
e				1 722	
Total. Add line 12, columns (b), (d), and (e)				1,722.	1,722
See worksheet in the instructions for line 13 to verify c	alculations)			13	1,722
	· · · · · · · · · · · · · · · · · · ·			· ·	
art XXII:B Relationship of Activities to the	e Accomplish	nment of Exemp	ot Purpose	:S	
Explain below how each activity for which is accomplishment of the foundation's exempt	ncome is reporte purposes (othe	ed in column (e) of r than by providing	Part XVI-A co	ontributed important th purposes) (See t	ly to the he instructions)
N/A		·			
				 -	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
N/A	
	· · · · · · · · · · · · · · · · · · ·
-	

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

 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of 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 Cash Other assets Other transactions Sales of assets to a noncharitable exempt organization. Purchases of assets from a noncharitable exempt organization. Rental of facilities, equipment, or other assets Reimbursement arrangements Loans or loan guarantees. Performance of services or membership or fundraising solicitations 							1a (1) 1a (2) 1b (1) 1b (2) 1b (3) 1b (4) 1b (5) 1b (6)	Yes	X X X X X X X		
_	d If the	ng of facilities, equip answer to any of th oods, other assets, or ransaction or sharing	e above is 'Yes,' or services given g arrangement, s	complete the follo	wing schedule	Column e foundat	ion received	d less than fair n	narket value in	ue of	X
_	a) Line no	(b) Amount involved	d (c) Name	of noncharitable exempt	organization	(d) [escription of tr	ansfers, transactions	s, and sharing arrar	gement	<u>s</u>
<u>_N</u>	I/A	-									
_											
			- 						-		
_									-		
_											
_	-										
_	-							_			
											
_				-	_					•••	
_											
	descr	foundation directly ibed in section 501(i s,' complete the folk	c) of the Code (c	ated with, or relate ther than section 5	ed to, one or m 501(c)(3)) or in	ore tax-e section 5	xempt orgar 27?	nizations	Yes	X	No
_		(a) Name of organiz	zatıon	(b) Type o	of organization			(c) Description o	of relationship	_	
<u>N</u>	I/A										
_											
_					<u> </u>						
_			•					_			
_	Under pena complete	alties of perjury, I declare the Declaration of preparer (oth	hat I have examined the than taxpayer or fix	lis return, including accor fuciary) is based on all in	npanying schedules iformation of which	and statement preparer has	ents, and to the any knowledge	best of my knowledge Presid		e, correct	t, and
SIGN	Sign	ature of officer or trustee)			Date	-1/10	Title	C11 C		
N						Date		1	Preparer's Identify	no numb	er
H	Paid	Preparer's signature	CANA DAVITO					Check if self-	(See Signature in	the instre	s)
HERE	Pre-	G11	ENN DAVIS	D1 C 1	Mand IID			employed >	N/A		
_	parer's Use	yours if self-		Plotzker & 1				EIN N/A	<u> </u>		
	Only	employed), address, and	w York, NY	Street, 20'	in Proor			⊢	(212) 222	200	0
_	^^	ZIP code NEV	W TOLK, IVI	10133	 -		· · · · · ·	Phone no	(212) 230	_	_
0	AA								Form 99	U-Ft (2	_ひひり)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization DEVINE-MAJORS F	Employer identification number					
C/O DAVIS GRAB	ER PLOTZKER & WARD	27-1405032				
Organization type (check 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						
Check if your organization is covered by the Note: Only a section 501(c)(7), (8), or (10) or	General Rule or a Special Rule organization can check boxes for both the General Rule	and a Special Rule See instructions				
General Rule –						
X For an organization filing Form 990, 990 contributor (Complete Parts I and II)	-EZ, or 990-PF that received, during the year, \$5,000 or	more (in money or property) from any one				
Special Rules –						
509(a)(1)/170(b)(1)(A)(vi) and received from	g Form 990 or 990-EZ, that met the 33-1/3% support tes any one contributor, during the year, a contribution of the grea h or (ii) Form 990-EZ, line 1 Complete Parts I and II	t of the regulations under sections ter of (1) \$5,000 or (2) 2% of the				
For a section 501(c)(7), (8), or (10) orga aggregate contributions of more than \$1 prevention of cruelty to children or anima	nization filing Form 990 or 990-EZ, that received from a ,000 for use <i>exclusively</i> for religious, charitable, scientifals Complete Parts I, II, and III	ny one contributor, during the year, c, literary, or educational purposes, or the				
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 <i>exclusively</i> 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 <i>exclusively</i> 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	f \$5,000 or more during the year	▶ \$				
Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						
BAA For Privacy Act and Paperwork Redu for Form 990, 990EZ, or 990-PF.	ction Act Notice, see the Instructions	chedule B (Form 990, 990-EZ, or 990-PF) (2009				

tame of org DEVINI	-MAJORS FOUNDATION	' '	of 1 of Part I r identification number 405032	
Part I	Contributors (see instructions)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
1	WILLIAM F MAJORS 3 LOLLY'S WELL ROAD SMITHS, FL07 Bermuda	\$3,517,202.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
			Person	

Payroll Noncash

(Complete Part II if there is a noncash contribution)

Page

of 1 of F
Employer identification number

of Part II

Name of organization
DEVINE-MAJORS FOUNDATION

27-1405032

Part 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
	VARIOUS SECURITIES		
		\$ 3,517,202.	12/15/09
(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
		 _\$	
BAA		edule B (Form 990, 990-EZ	000 DEV (0000

BAA

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

of 1

of Part III

Name of organization DEVINE-MAJORS FOUNDATION

Employer identification number 27-1405032

Part III	Exclusively religious, charitable, e organizations aggregating more the	etc, individual contribution an \$1,000 for the year.(C	ns to section	on 501(c)(7), (8), or (10) (a) through (e) and the following line entry)		
	For organizations completing Part III, enter contributions of \$1,000 or less for the year.	total of <i>exclusively</i> religious, ch. (Enter this information once —	haritable, etc, see instructio	ons) ►\$ N/A		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	N/A					
		(e)				
	Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e)				
	Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
Part I			_			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
BAA		-	Schedi	ule B (Form 990, 990-EZ, or 990-PF) (2009)		

2009

Federal Statements DEVINE-MAJORS FOUNDATION

Page 1

Client 3781-02

C/O DAVIS GRABER PLOTZKER & WARD

27-1405032

8/04/10

09 00AM

Statement 1 Form 990-PF, Part III, Line 5 **Other Decreases**

UNREALIZED GAIN ON CONTRIBUTED SECURITIES

391,821. 391,821.

Statement 2 Form 990-PF, Part VII-A, Line 10 Substantial Contributors During the Tax Year

Name of Substantial Contributor Address of Substantial Contributor

WILLIAM F MAJORS

3 LOLLY'S WELL ROAD SMITHS, FL07 Bermuda

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 4-2009)

Department of the Treasury Internal Revenue Service

If you are	filing for an Automatic 3-Month	Extension, complete only Part I and check the	his box		<u> </u>
If you are	filing for an Additional (Not Aut	omatic) 3-Month Extension, complete only Pa	art II (on page 2 of the	s form)	_
Do not comp	lete Part II unless you have alrea	dy been granted an automatic 3-month exten	ision on a previously f	iled Form 8868	
Parti /	Automatic 3-Month Extens	ion of Time. Only submit original (no	copies needed).		
A corporation	required to file Form 990-T and	requesting an automatic 6-month extension -	 check this box and of 	complete Part I only	, ►
All other corp		, partnerships, REMICS, and trusts must use	Form 7004 to request	t an extension of tin	ne to file
returns noted the additional Form 990-T	below (6 months for a corporation below (6 months for a corporation below (6 month extens)	ectronically file Form 8868 if you want a 3-m on required to file Form 990-T) However, you on or (2) you file Forms 990-BL, 6069, or 887 y completed and signed page 2 (Part II) of Fo e-file for Charities & Nonprofits	i cannot file Form 886 70, group returns, or a	8 electronically if (1 composite or cons) you want olidated
	Name of Exempt Organization			Employer identification	number
Type or	DEVINE-MAJORS FOUNDA	TION			
print	C/O DAVIS GRABER PL			27-1405032	
File by the due date for	Number, street, and room or suite number	If a P O box, see instructions	<u> </u>		
filing your return See	150 EAST 58TH STREET				
instructions	City, town or post office, state, and ZIP cod	e For a foreign address, see instructions			
	NEW YORK, NY 10155				
_ ′.	of return to be filed (file a separate	¬ ''			
Form 990	<u> </u>	Form 990-T (corporation)	☐ Form 472		
Form 990	<u> </u>	Form 990-T (section 401(a) or 408(a) trust)			
Form 990	 -	Form 990-T (trust other than above)	Form 606		
[X] Form 990)-PF	Form 1041-A	Form 887	'0	
	are in the care of ► GLENN D				
· ·	No. ► 212-230-2610	FAX No ►			
_		or place of business in the United States, ch			▶ 📗
		anization's four digit Group Exemption Numbe			
		he group, check this box 🕒 🔲 and attach a	a list with the names a	nd EINs of all mem	bers
	sion will cover				
untıl _ The ext	$8/15$, 20 _10, to file ension is for the organization's re	ns for a corporation required to file Form 990- the exempt organization return for the organi eturn for	•		
	calendar year 20 or tax year beginning _12/02	, 20 <u>09</u> , and ending <u>12/31</u>	, 20 <u>09</u>		
2 If this ta	ax year is for less than 12 months	s, check reason Initial return F	Final return C	hange in accounting	g period
	pplication is for Form 990-BL, 99 ndable credits See instructions	0-PF, 990-T, 4720, or 6069, enter the tentativ	re tax, less any	3a \$	34.
	pplication is for Form 990-PF or nclude any prior year overpayme	990-T, enter any refundable credits and estim nt allowed as a credit	nated tax payments	3ь\$	0.
deposit	Due. Subtract line 3b from line with FTD coupon or, if required, tructions	Ba Include your payment with this form, or, if by using EFTPS (Electronic Federal Tax Payr	f required, ment System)	3c \$	34.
Caution. If yo		c fund withdrawal with this Form 8868, see Fe	orm 8453-EO and For	m 8879-EO for	

FIFZ0501L 03/11/09

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