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# Form **990-PF**

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service

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

For cal	endar year 2009, or tax year beginning	, 2009,	, and ending		<u>,                                 </u>	
G Che	eck all that apply X Initial return Initi	al Return of a former p	ublic charity		Fin	al return
	Amended return	Address of	hange Nam	ne chan	ne	
					nployer identification nui	nher
Use the	ne   				• •	
IRS lab		l			7-1539460	<del></del>
prin	, I 20 Tullway banc		į	<b>B</b> Te	lephone number (see the	instructions)
or typ	e.   FOXDOLO, MA 02033		1			
See Spe			1	C If	exemption application is	pending, check here > X
Instruct	ions		1	<b>D</b> 1 Fo	reign organizations, chec	k here
H C	heck type of organization X Section 501	(c)(3) exempt private f	oundation	<b>2</b> Fo	reign organizations meet	ing the 85% test, check
Ī	Section 4947(a)(1) nonexempt charitable t		private foundation	he	re and attach computation	n ►
1 F:	1737	ounting method X C		E If	private foundation status	was terminated
		•	asii		der section 507(b)(1)(A)	
•	· · · · · · · · · · · · · · · ·	Other (specify)	. – – ,– , – – 4		the foundation is in a 60	
<b>►</b> \$		column (d) must be or	r cash basis )	un	der section 507(b)(1)(B)	, check here
Part I		(a) Revenue and	(b) Net investmer	nt (	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in	expenses per books	income		ıncome	for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)					purposes
	(see the instructions))					(cash basıs only)
	1 Contributions, gifts, grants, etc, received (att sch)	50,000.	a. / a ##			
	2 Ck ► If the foundn is <b>not</b> reg to att Sch B	7 * *	* * * *			
	3 Interest on savings and temporary					> %
	cash investments					
	4 Dividends and interest from securities					*
	5a Gross rents					
	b Net rental income or (loss)	% ·	87 ' 33' W.	- ^		
R	6a Net gain/(loss) from sale of assets not on line 10				`	٠ ٨
È	<b>b</b> Gross sales price for all		20 2 100 1 100 100			
V	assets on line 6a	· · · · · · · · · · · · · · · · · · ·			,	· * · · ·
E N	7 Capital gain net income (from Part IV, line 2).  8 Net short-term capital gain		^,			* "
ΰ	9 Income modifications	· À	10 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			å. " <sub>v</sub>
Ě		,				3 %
	10 a Gross sales less returns and allowances.	7				"
í i	h Less Cost of	. 49	~ . <i>A</i>		. ;	, , , , ,
5	goods sold					
Ď	c Gross profit/(loss) (att sch)		^ · · · · · · ·			* * *
<u> </u>	11 Other income (attach schedule)					
<u>~</u>						` '
no A Z Z T T	12 Total. Admines 7 through 11 13 Compensation of officers, directors, trustees etc.	50,000.		0.	0.	· * * *
		0.				
⊑	14 Othercemployee salaries and wages 9					
	15 Pension plans remptoyed benefits					
A	16a Legal Tees (attach schedule) See St. 1	5,000.				
D	<b>b</b> Accounting fees (attach-sch)	·		1		
ï	b Accounting fees (attach:sch) c Other prof fees (attach:sch)					
	17 Interest			+		
EP S	18 Taxes (attach schedule)(see instr.)		<del></del>	-		
ŘŔ	19 Depreciation (attach			-		
A A	sch) and depletion			- 1		,
NV	20 Occupancy			<del>                                     </del>	· <del>-</del>	
N V G E	21 Travel, conferences, and meetings	· · · · · · · · · · · · · · · · · · ·				
A E	22 Printing and publications			$\dashv$		
A E N X D P	23 Other expenses (attach schedule)			$\dashv$		
E						
N S	24 Total operating and administrative			-		
Ē	expenses. Add lines 13 through 23	5,000.				
3	25 Contributions, gifts, grants paid	2,000.	<u> </u>	$\dashv$		
	26 Total expenses and disbursements.				, ,	
	Add lines 24 and 25.	5,000.		o.	0.	0.
	27 Subtract line 26 from line 12:			<del>-   -</del>		<u></u>
	a Excess of revenue over expenses		, , ,	-	* 1	
	and disbursements	45,000.				
	<b>b</b> Net investment income (if negative, enter -0-)	**		0.	** **	*
	C Adjusted net income (if negative, enter -0 )		4 ~ *		0.	,
====	or Brivery Act and Danonyork Poduction Ac					Form 900 PE (2000)

Form	990-	PF (2009) Cannata Family Foundation		27-15	
Part	11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
- 410		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		45,000.	45,000.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶		<u> </u>	
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable		<del></del>	
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	,	Other notes and loans receivable (attach sch)	* · · · · · ·	<u> </u>	*
Α	<b>'</b>	Less allowance for doubtful accounts	<del></del>		<del></del> -
A S S E T	8	Inventories for sale or use			<del></del>
Ĕ		Prepaid expenses and deferred charges			
T S	9				
3		a Investments – U.S. and state government obligations (attach schedule)			
	l	nivestments — corporate stock (attach schedule)			
	l	: Investments — corporate bonds (attach schedule)	/W. « )		1
	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	<u> </u>	<u> </u>	
		Less. accumulated depreciation (attach schedule)			
	15				
	16	Total assets (to be completed by all filers – see instructions Also, see page 1, item I)	0.	45,000.	45,000.
Ļ	17	Accounts payable and accrued expenses		-	* * * /
Å	18	Grants payable			
В	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons.		<u></u>	
ļ	21	Mortgages and other notes payable (attach schedule)			
i	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			a . 🤰 💢 , 👼
		and complete lines 24 through 26 and lines 30 and 31.			
N F	24	Unrestricted		45,000.	
E U	25	Temporarily restricted			
D	26	Permanently restricted	·		
A S B S A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			* * * * *
EL	27	Capital stock, trust principal, or current funds			* * *
SN	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	<u> </u>		<u> </u>
ŘŠ	30	Total net assets or fund balances (see the instructions)	0.	45,000.	*
	31	Total liabilities and net assets/fund balances (see the instructions)	0.	45,000.	, ,
Part	ш	Analysis of Changes in Net Assets or Fund Balanc	1	45,000.	<u> </u>
1	I otal	l net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	ımn (a), line 30 (must a	gree with	0.
2		r amount from Part I, line 27a		2	45,000.
		increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		4	45,000.

5 Decreases not included in line 2 (itemize)

45,000.

5

6

(a) List and descri	be the kind(s) of property sold (e.g., use, or common stock, 200 shares M	real estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
		· · · · · · · · · · · · · · · · · · ·	D — Donation		<del>, ,</del>
b					
c					
d		<del></del>			
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa		(h) Gain or (e) plus (f) m	
a					
b					
с					
d					
<u>e</u>					
<del></del>	wing gain in column (h) and owned b	(k) Excess of column		(I) Gains (Coli gain minus column (I	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	over column (j), if a	ny th	an -0-) <b>or</b> Losses (fr	om column (h))
a					
<u>b</u>					
<u>c</u>				<del></del>	. <u> </u>
			-		
<u>e</u>			-		
. •	ret capital loss)		2		
in Part I, line 8	ne 8, column (c) (see the instructions	) ii (loss), eriter -o-	3		
Part V Qualification Und	er Section 4940(e) for Reduce	d Tax on Net Investm	ent Income		
If 'Yes,' the foundation does not qu	this part blank ection 4942 tax on the distributable ar alify under section 4940(e) Do not co t in each column for each year, see th	omplete this part.		Yes	☐ No
(a)  Base period years  Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:		<b>(d)</b> Distributior umn (b) divided	ı ratıo by column (c))
2008	<del>-  </del> -		<del></del> -		·
2007	<del>- </del>				
2006					
2005			-		
2004					
2 Total of line 1, column (d)			2		
	the 5-year base period – divide the to on has been in existence if less than		3		
4 Enter the net value of noncha	aritable-use assets for 2009 from Part	X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions	from Part XII, line 4		8		
. , -	than line 7, check the box in Part VI	, line 1b, and complete that	part using a 1%	6 tax rate See t	he
BAA				Forr	n <b>990-PF</b> (2009)

		1333				age 4
Par		the ins	struction	ns)		<del></del>
1 a	a Exempt operating foundations described in section 4940(d)(2), check here	-				i
	Date of ruling or determination letter: (attach copy of letter if necessary · see instr.)					_
t	Domestic foundations that meet the section 4940(e) requirements in Part V,	1				<u>0.</u>
	check here ► ☐ and enter 1% of Part I, line 27b		•			
•	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		:			į
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				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				
6	Credits/Payments		•	,		
	a 2009 estimated tax pmts and 2008 overpayment credited to 2009  Exempt foreign organizations — tax withheld at source  6b					
						·
	Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  6d  6d					
_		7				0.
7	Total credits and payments Add lines 6a through 6d  Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8				<del></del>
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.	11				
	t VII-A Statements Regarding Activities	<u> </u>				
·			1		res	No
1 a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		-	1 a		X
				$\neg$		
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1 b	š	X
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials pu or distributed by the foundation in connection with the activities	blished	d .*		3	<u>*</u>
	Did the foundation file Form 1120-POL for this year?			1c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		n .	e	à	
	(1) On the foundation \$ 0. (2) On foundation managers \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	0D	<del></del>	* }'	[	
•	foundation managers $\Rightarrow$ \$ 0.	• • •			*	·*************************************
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If 'Yes,' attach a detailed description of the activities		25.48	₹ %	Ĩ.	* 1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	s.	33.43.		`_`	
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3		<u>X</u>
4 a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		_X
t	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		<u> </u>	4ь	N	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u>
	If 'Yes,' attach the statement required by General Instruction T		~		٠,	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				ι,	
	By language in the governing instrument, or			T		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that c	onflict		-		
	with the state law remain in the governing instrument?				Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		<u> </u>	7	X	
8 a	■ Enter the states to which the foundation reports or with which it is registered (see the instructions)  MA		-  , ,	<b>(</b>	. *	, 1
t	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		- <u>                                    </u>			ş
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8b	X	<del></del> -
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	4942(	))(5) 🖳	_ -		
	for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete		XIV	9	$\dashv$	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their is and addresses. See Statement	names 2	1	0	$\mathbf{x}$	
BAA				_		2009)

	n 990-PF (2009) Cannata Family Foundation	27-15394	60	P	age <b>5</b>
Par	t-VII-A Statements Regarding Activities Continued				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		_ <u>x</u> _
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	е	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exercise website address  N/A	mption application?	13	_X	<u> </u>
14	The books are in care of ► Iris H. Cannata Tele	phone no			
	Located at ► 25 Fairway Lane Foxboro MA ZIP	+4 ► 02025			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check	here	N/A	<b>&gt;</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Require	ed			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		۸ ~	Yes	No
1 8	a During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No	14.73.3		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No	1877	Ç.	•
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	. ,	3	-
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			3.4
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No		^	
				1	,
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )	Yes X No			
I	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions describ Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the ins	ed in structions)?	1 b	N	/ /A
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗌			<del>,</del> ;
(	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted that were not corrected before the first day of the tax year beginning in 2009?	acts,	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	s a		,`	; ;-
í	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No	,	,	
	If 'Yes,' list the years ► 20, 20, 20, 20				, - n
I	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section <b>all</b> years listed, answer 'No' and attach statement — see the instructions)		2h	- N	 /A
	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the y	ears here	2b	7	<del></del> .
`	► 20, 20, 20, 20	rears riere.	,		`.
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No	3,3		4, 4
ı	b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the found or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period apply the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beques (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, determine if the foundation had excess business holdings in 2009)	proved t. or	3b	N.	
<b>Δ</b> :	a Did the foundation invest during the year any amount in a manner that would jeopardize its		30	147	
70	charitable purposes?		4a	<b>"</b> ,	X
I	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?	f	4b		<u>X</u>
BAA		F	orm <b>99</b>	0-PF (	2009)

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Part VII-B   Statements Regarding Activiti		1 4720 May Be Req	uired (continued)		<del></del>
5a During the year did the foundation pay or incu	•			a.	
(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	on (section 4945(e))?	∐ Yes ∑	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	n 4955), or to carry		No	, s.
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	∐ Yes ∑	∐ No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section			Yes X	No	^
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes	No	
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of described in Resulations section 53 4945 or in	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions	>> 5b	N/A
(see instructions)?  Organizations relying on a current notice rega	rdına dısaster assıstanı	ce check here	▶ [	7	
, ,	•		L	<b>-</b>	**
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Region 1.	sibility for the grant?	•	N/A Yes	No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?			S Yes []	No No	6
<b>b</b> Did the foundation, during the year, pay premi	iums, directly or indirec	ctly, on a personal bene		6b	X
If 'Yes' to 6b, file Form 8870				. «	/
7a At any time during the tax year, was the found	dation a party to a proh	iibited tax shelter transa	iction? <b>Υes</b> Σ	No 🔣	. }
<b>b</b> If yes, did the foundation receive any proceed				7ь	N/A
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	jers, Highly Paid	<b>Employees</b>	,
and Contractors			4!\		
1 List all officers, directors, trustees, foundation				(a) E	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
See Statement 3			000000000000000000000000000000000000000		
Bee Bearemong of Landau and a		0.	0		0.
			-		
2 Compensation of five highest-paid employee	! es (other than those inc	luded on line 1— see in	structions). If none.	enter 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
None					
				-	
Total number of other employees paid over \$50,000	) TEE 003061 (	07/06/00	<u> </u>	Form 990	0 <b>)-PF</b> (2009)

# Form 990-PF (2009) Cannata Family Foundation 27-1539460 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 F	Five highest-paid independent contractors for professional services — (see instruction enter 'NONE.'	s). If none,	
		Type of service	(c) Compensation
None		_	
Total n	number of others receiving over \$50,000 for professional services.	<b>•</b>	Č
Park	XA Summary of Direct Charitable Activities		
	foundation's four largest direct charitable activities during the tax year. Include relevant statistical information sitions and other beneficiaries served, conferences convened, research papers produced, etc.	uch as the number of	Expenses
1 <u>N</u>	N/A		
2 _			
3 _			
4 _			
[Parti	Summary of Program-Related Investments (see instructions)		
Descri	be the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2	Amount
	N/A		
2 _ _			
All oth	her program-related investments. See instructions		<del></del>
<b>-</b>	·		
Total	Add lines 1 through 3	<b>.</b>	0.
BAA	Add lines I tillough S		Form <b>990-PF</b> (2009

Part X   Minimum Investment Return (All domestic foundations must complete this see instructions.)	part. Foreign four	ndations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purpose a Average monthly fair market value of securities	es <b>1a</b>	
<b>b</b> Average of monthly cash balances	1b	4,167.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	4,167.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	4,167.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3		·
(for greater amount, see instructions)	4	63.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,104.
6 Minimum investment return. Enter 5% of line 5	6	205.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) priva		dations
and certain foreign organizations check here ► and do not complete	<del></del>	205.
1 Minimum investment return from Part X, line 6	1	205.
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	205
3 Distributable amount before adjustments Subtract line 2c from line 1	3	205.
4 Recoveries of amounts treated as qualifying distributions	4	205
5 Add lines 3 and 4	5	205.
6 Deduction from distributable amount (see instructions)	6	205
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	_ 7	205.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes		
<b>a</b> Expenses, contributions, gifts, etc — total from Part 1, column (d), line 26.	1a	
<b>b</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, purpos	es <b>2</b>	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
<b>b</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, III	ne 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 calculated qualifies for the section 4940(e) reduction of tax in those years	ating whether the four	ndation

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Form **990-PF** (2009)

Page 9

## Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7				205.
2 Undistributed income, if any, as of the end of 2009			<del>,</del>	
a Enter amount for 2008 only			0.1	
<b>b</b> Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2009.				
<b>a</b> From 2004				
<b>b</b> From 2005				 
<b>c</b> From 2006				ļ
<b>d</b> From 2007				<u>'</u>
e From 2008				
f Total of lines 3a through e	0.			i
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$	*			
a Applied to 2008, but not more than line 2a	*		0.	1
<b>b</b> Applied to undistributed income of prior years	<i>*</i>			
(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 in column (d), the same amount must be shown in column (a) )		•	* * ,	*
Same amount must be snown in column (a) )	v			
6 Enter the net total of each column as	* *	*	* * * *	. "
indicated below:		*	c 291 9	› »,
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b	*	0.	, , , , , ,	» * *y *
c Enter the amount of prior years' undistribut-		***	- <u> </u>	, m² % 3
ed income for which a notice of deficiency	*			· · · · · · · · · · · · · · · · · · ·
has been issued, or on which the section 4942(a) tax has been previously assessed	*	0.		) ) (m) (n)
· · ·				· * *
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.	<u> </u>	> % ~ *	0.	*
	\$ \$	* * *		
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be	·			
distributed in 2010	*		*	205.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)	0.			-
8 Excess distributions carryover from 2004 not				,
applied on line 5 or line 7 (see instructions).	0.			
9 Excess distributions carryover to 2010.	_			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9 a Excess from 2005				
b Excess from 2006			,	
<del> </del>				
c Excess from 2007	,			
d Excess from 2008	,			
e Excess from 2009	<u> </u>	<u> </u>		

Form <b>990-PF</b> (2009) Cannata Family Fo				27-153946	0 Page <b>10</b>
Part XIV   Private Operating Foundation			··············	<del></del>	<u> </u>
1 a If the foundation has received a ruling or of is effective for 2009, enter the date of the	ruling	•	,	_	4042(3/5)
<b>b</b> Check box to indicate whether the foundat		erating toundation of		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					<u> </u>
c 'Support' alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	(0 1 1 11 1			1.45.000	•
Part XV Supplementary Information assets at any time during th	(Complete this e year — see ir	structions.)	organization n	ad \$5,000 or moi	re in
Information Regarding Foundation Managers a List any managers of the foundation who is close of any tax year (but only if they have None	nave contributed m	nore than 2% of the than \$5,000) (See	total contributions section 507(d)(2))	received by the foun	dation before the
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the	own 10% or more of foundation has a 1	of the stock of a cor 10% or greater inter	poration (or an equest	ially large portion of	the ownership of
None					
2 Information Regarding Contribution, Gran Check here In the foundation only not requests for funds. If the foundation make complete items 2a, b, c, and d	nakes contributions	s to preselected cha	rıtable organizatior		
<b>a</b> The name, address, and telephone number	r of the person to	whom applications	should be addresse	ed	
<b>b</b> The form in which applications should be s	submitted and info	rmation and materia	als they should incli	ude	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	such as by geogra	ohical areas, charita	ible fields, kinds of	institutions, or other	factors

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	ıt	N/A
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year	SUBSTANTIAL CONTRIDUTOR			
Total	1	T	► 3a	
b Approved for future payment  Total			► 3b	

## Part XVI-A Analysis of Income-Producing Activities

Ente	r aross	amounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	
	-	am service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
						_	
•							
•							
•	·						
1			ļ		<b> </b>		
		and contracts from government agencies					
_		pership dues and assessments.					
3		t on savings and temporary cash investments			1		
4		ends and interest from securities				,	
5		ental income or (loss) from real estate financed property	<u> </u>	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
		ebt-financed property			<del> </del>		
6		ntal income or (loss) from personal property					
7		investment income					
8		(loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11		revenue		1. <del>1</del> . 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		₩ , · {₩ × %	* * * * * * * * * * * * * * * * * * * *
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ŧ							
•	:			·			
•	i						
•	•	<u></u>	4.			<del></del>	
		otal Add columns (b), (d), and (e)					
13	Total.	Add line 12, columns (b), (d), and (e)			1, 41	13	0.
<b>13</b> (See	Total. works	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca	alculations)		. 41		0.
<b>13</b> (See	Total. works	Add line 12, columns (b), (d), and (e)	alculations)	hment of Exemp	t Purpo		0.
13 (See Pår	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify care.  Relationship of Activities to the	alculations)  Accomplis			oses	
13 See Pår Lin	Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca	alculations)  Accomplis			oses	
13 See Pår Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify care.  Relationship of Activities to the	alculations)  Accomplis			oses	
13 See Pår Lin	Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify care.  Relationship of Activities to the	alculations)  Accomplis			oses	
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13 See Pår Lin	Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify care.  Relationship of Activities to the	alculations)  Accomplis			oses	
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13 See Pår Lin	Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify care.  Relationship of Activities to the	alculations)  Accomplis			oses	

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	Exempl Organ	IIZaliUIIS								
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?						Yes	No			
a Transfers from the reporting foundation to a noncharitable exempt organization of										
(1	) Cash							1a (1)		_X_
(2	) Other assets							1a (2)		X
<b>b</b> O	ther transactions									
(1	) Sales of assets to a nor	icharitable exe	mpt organization					1 b (1)		X
(2	<ul><li>Purchases of assets from</li></ul>	m a noncharita	ible exempt organization					1 b (2)		X
•	) Rental of facilities, equip		r assets					1b (3)		X
•	) Reimbursement arrange							1b (4)		X
•	) Loans or loan guarantee							1b (5)	-	X
•	Performance of services		•					1b (6)		X
c S	haring of facilities, equipm	ent, mailing lis	sts, other assets, or paid	employee	es			1c		<u>X</u>
<b>d</b> If th	the answer to any of the a e goods, other assets, or s ny transaction or sharing a	above is 'Yes,' services given	complete the following so by the reporting foundati	chedule on If the	Column foundate	(b) should alw tion received leading other assets.	ays show the ess than fair r	fair market vali narket value in ceived	ue of	
(a) Line	· · · · · · · · · · · · · · · · · · ·		of noncharitable exempt organiza					s, and sharing arrar	ngement	.s
N/A		(3,232	<u>-</u>				,	,	<u> </u>	
			<del></del>							
			· ·							
							· · · · · · · · · · · · · · · · · · ·			
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		ļ								
-		1								
		<u>i</u>								
	the foundation directly or escribed in section 501(c) ('Yes,' complete the follows		ated with, or related to, of ther than section 501(c)(	one or mo 3)) or in s	ore tax-e section 5	exempt organiz 527?	zations	Yes	X	No
	(a) Name of organizati		(b) Type of organ	nization		(c	) Description (	of relationship		
N/A	(-/ · · · · · · · · · · · · · · · · · · ·		\					•		
	<u> </u>									
		-								
Under	penalties of perjury, I declare that ete Declaration of preparer (other	I have examined the than taxpayer or find	nis return, including accompanying fuciary) is based on all information	schedules a n of which p	and statem reparer ha	ents, and to the be s any knowledge	est of my knowledg	e and belief, it is true	e, correc	t, and
	, // . )/	( -	<u>'</u> _		10	12-10	► Presid	lon+		
S I G N	Signature of officer or trustee	agenore			Date	טון די זין	Title	ient		
N	Signature of officer of trustee	•			Date		THE	Preparer's Identify	ina num	her
H Paid R Pre-	Preparer's signature Kath	erine M.	Sheehan	1	-	9/27/10	Check if self-employed	(See Signature in		
paic	voure if colf.									
Use	, employed). One									
ــــــــــــــــــــــــــــــــــــــ	ZIP code Quin	cy, MA 02	2169				Phone no	(617) 472		
BAA								Form <b>99</b>	0-PF (	(2009)

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

Department of the Treasury Internal Revenue Service

**Schedule of Contributors** 

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

OMB No 1545-0047

2009

Name of the organization		Employer identification number			
Cannata Family Foundation		27-1539460			
Organization type (check one)					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust <b>not</b> treated 527 political organization	as a private foundation			
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a 501(c)(3) taxable private foundation	a private foundation			
Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule</b> Note: Only a section 501(c)(7), (8), or (10) 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-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)					
Special Rules —					
For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II					
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 <i>exclusively</i> 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 <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 <b>General Rule</b> applies to this organization because it received nonexclusively					
religious, charitable, etc, contributions of \$5	,000 or more during the year	<b>►</b> \$			
<b>Caution:</b> 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 <b>must</b> 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 Reduction for Form 990, 990EZ, or 990-PF.	on Act Notice, see the Instructions Sch	nedule B (Form 990, 990-EZ, or 990-PF) (2009)			

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I	
Name of org	anization ca Family Foundation	' '	539460	
Part I				
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
1	Iris H. Cannata  25 Fairway Lane  Foxboro, MA 02035	\$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	

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

Employer identification number

of Part II

Name of organization

Cannata Family Foundation

27-1539460

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
	N/A		
<del> </del>			
		\$	
		٣	
(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
-			
		  \$	
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
		<b> *</b>	

BAA

(a) No. from Part I

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

(d) Date received

(c) FMV (or estimate) (see instructions)

(b)
Description of noncash property given

Name of organization

Employer identification number

Cannata Family Foundation 27-1539460

Partill Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete cols (a) through (e) and the following line entry )

(a) from	(b) Purpose of gift			
art I N/A	3		Description of how gift is held	
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee	
(a)	(b)	(c)	(d)	
from art I	Purpose of gift	Use of gift	Description of how gift is held	
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee	
a) from art 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) from art I	(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held	
		(e) Transfer of gift		
	Transferee's name, addres		Relationship of transferor to transferee	

2009	Federal Statements	Page 1
Client CANNATA	Cannata Family Foundation	27-1539460
8/12/10  Statement 1 Form 990-PF, Part I, Line 16a Legal Fees		11 18AM
Legal Fees Paid to Cody & Co	\$ 5,000.	(c) (d) Adjusted Charitable Net Income Purposes  \$ 0. \$ 0.
Statement 2 Form 990-PF, Part VII-A, Line 10 Substantial Contributors During th		antial Contributor
Name of Substantial Contribu	25 Fairway Lane Foxboro, MA 02035	
Statement 3 Form 990-PF, Part VIII, Line 1		
List of Officers, Directors, Trustees	Title and Average Hours Compe	
Name and Address Iris H. Cannata 25 Fairway Lane Foxboro, MA 02025	<u>Per Week Devoted</u> <u>sati</u> President \$ 1.00	on <u>EBP &amp; DC</u> <u>Other</u> 0. \$ 0. \$ 0.
Iris H. Cannata 25 Fairway Lane Foxboro, MA 02025	Director 0	0. 0. 0.
Lisa E. Cannata 25 Fairway Lane Foxboro, MA 02025	Treasurer 1.00	0. 0. 0.
Lisa E. Cannata 25 Fairway Lane Foxboro, MA 02025	Secretary 0	0. 0. 0.
Lisa E. Cannata 25 Fairway Lane Foxboro, MA 02025	Director 0	0. 0. 0.
	Total \$	0. \$ 0. \$ 0.