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

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 calendar year 2009, or tax year beginning , and ending

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return  
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label Otherwise, print or type See Specific Instructions	Name of foundation <b>UD JC &amp; AJ BOWLING FOUNDATION</b>		A Employer identification number <b>31-1522458</b>
	Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number <b>203-327-2333</b>
	C/O BLAIR & POTTS, P.O. BOX 1214		C If exemption application is pending, check here <input type="checkbox"/>
	City or town, state, and ZIP code <b>STAMFORD, CT 06904</b>		D 1 Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ <b>1,988,702.</b> (Part I, column (d) must be on cash basis)		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	55,662.	55,662.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	<17,030.>			
	b Gross sales price for all assets on line 6a	176,514.			
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
Operating and Administrative Expenses	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	<13,201.>	<13,201.>	0.	STATEMENT 2
	12 Total. Add lines 1 through 11.	25,431.	42,461.	0.	
	13 Compensation of officers, directors, trustees, etc.	0.	0.	0.	0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees				
	c Other professional fees				
	17 Interest				
	18 Taxes	3,141.	0.	0.	0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
22 Printing and publications					
23 Other expenses	10,798.	10,798.	0.	0.	
24 Total operating and administrative expenses. Add lines 13 through 23	13,939.	10,798.	0.	0.	
25 Contributions, gifts, grants paid	144,200.			144,200.	
26 Total expenses and disbursements. Add lines 24 and 25	158,139.	10,798.	0.	144,200.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	<132,708.>				
b Net investment income (if negative, enter -0-)		31,663.			
c Adjusted net income (if negative, enter -0-)			0.		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash - non-interest-bearing				<3.>	<3.>
	2 Savings and temporary cash investments			111,700.	54,399.	54,399.
	3 Accounts receivable ▶					
	Less: allowance for doubtful accounts ▶					
	4 Pledges receivable ▶					
	Less: allowance for doubtful accounts ▶					
	5 Grants receivable					
	6 Receivables due from officers, directors, trustees, and other disqualified persons					
	7 Other notes and loans receivable ▶					
	Less: allowance for doubtful accounts ▶					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments - U.S. and state government obligations					
	b Investments - corporate stock STMT 5			1,665,530.	1,604,474.	1,896,565.
	c Investments - corporate bonds					
Liabilities	11 Investments - land, buildings, and equipment basis ▶					
	Less: accumulated depreciation ▶					
	12 Investments - mortgage loans					
	13 Investments - other STMT 6			93,297.	78,949.	37,741.
	14 Land, buildings, and equipment: basis ▶					
	Less: accumulated depreciation ▶					
	15 Other assets (describe ▶)					
	16 Total assets (to be completed by all filers)			1,870,527.	1,737,819.	1,988,702.
	17 Accounts payable and accrued expenses					
	18 Grants payable					
Net Assets or Fund Balances	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	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 ▶ <input type="checkbox"/>	24 Unrestricted					
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>					
	27 Capital stock, trust principal, or current funds			1,639,475.	1,639,475.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds			231,052.	98,344.	
	30 Total net assets or fund balances			1,870,527.	1,737,819.	
31 Total liabilities and net assets/fund balances			1,870,527.	1,737,819.		

## 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), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,870,527.
2 Enter amount from Part I, line 27a	2	<132,708.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	1,737,819.
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 (b), line 30	6	1,737,819.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a DEUTSCHE BANK TR. A/C 651429- SEE SCHEDULE</b>			<b>VARIOUS</b>	<b>VARIOUS</b>
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			<b>&lt;17,030.&gt;</b>
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>a</b>			<b>&lt;17,030.&gt;</b>
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	<b>2</b>	<b>&lt;17,030.&gt;</b>
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		<b>3</b>	<b>N/A</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	140,099.	2,308,489.	.060689
2007	141,116.	2,407,009.	.058627
2006	148,336.	2,426,987.	.061119
2005	135,197.	2,318,575.	.058310
2004	105,133.	1,663,900.	.063185

  

<b>2</b> Total of line 1, column (d)	<b>2</b>	<b>.301930</b>
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	<b>.060386</b>
<b>4</b> Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	<b>4</b>	<b>1,928,336.</b>
<b>5</b> Multiply line 4 by line 3	<b>5</b>	<b>116,444.</b>
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	<b>317.</b>
<b>7</b> Add lines 5 and 6	<b>7</b>	<b>116,761.</b>
<b>8</b> Enter qualifying distributions from Part XII, line 4 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>8</b>	<b>144,200.</b>

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		1	317.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		2	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		3	317.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
3 Add lines 1 and 2		5	317.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		6a	1,679.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		6b	
6 Credits/Payments:		6c	
a 2009 estimated tax payments and 2008 overpayment credited to 2009		6d	
b Exempt foreign organizations - tax withheld at source		7	1,679.
c Tax paid with application for extension of time to file (Form 8868)		8	
d Backup withholding erroneously withheld		9	
7 Total credits and payments. Add lines 6a through 6d		10	1,362.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		11	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax <input checked="" type="checkbox"/> 1,362. Refunded <input type="checkbox"/>			

**Part VII-A Statements Regarding Activities**

	Yes	No
1a 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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • 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 remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> NONE		
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	X	
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		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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**Part 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		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ► N/A

14 The books are in care of ► BLAIR & POTTS Telephone no. ► (203) 327-2333  
 Located at ► P.O. BOX 1214, STAMFORD, CT ZIP+4 ► 06904

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here ☐  
 and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
<b>1a</b> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here		X
<b>c</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes," list the years ► _____, _____, _____		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	
<b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____, _____, _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</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.)	N/A	
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
<b>b</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?		X

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**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(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 account, other allowances
ANN J. BOWLING				
3315 WINDSOR BLVD.				
VERO BEACH, FL 32963	0.00	0.	0.	0.
BELINDA BEWKES METZGER				
36 OX RIDGE LANE				
DARIEN, CT 06820	0.00	0.	0.	0.
NANCY BOWLING GRAMPS				
18 OAK PARK AVENUE				
DARIEN, CT 06820	0.00	0.	0.	0.
STEPHANIE B. ZIEGLER				
1 SUNWICH ROAD				
ROWAYTON, CT 06853	0.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). 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 account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

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**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	1,850,253.
b	Average of monthly cash balances	1b	107,449.
c	Fair market value of all other assets	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	1,957,702.
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	1,957,702.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	29,366.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,928,336.
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	96,417.

**Part XI** Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	96,417.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	317.
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	317.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	96,100.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	96,100.
6	Deduction from distributable amount (see instructions)	6	0.
7	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	96,100.

**Part XII** Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	144,200.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	144,200.
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	317.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	143,883.

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

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**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				96,100.
2 Undistributed 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	25,398.			
b From 2005	23,216.			
c From 2006	94,168.			
d From 2007	24,534.			
e From 2008	32,277.			
f Total of lines 3a through e	199,593.			
4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$	144,200.			
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				96,100.
e Remaining amount distributed out of corpus	48,100.			
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:	247,693.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
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 be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	25,398.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	222,295.			
10 Analysis of line 9:				
a Excess from 2005	23,216.			
b Excess from 2006	94,168.			
c Excess from 2007	24,534.			
d Excess from 2008	32,277.			
e Excess from 2009	48,100.			



**Part XV** Supplementary Information (continued)

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b> VARIOUS CHARITIES SEE ATTACHED	NONE	PUBLIC	GENERAL EXEMPT PURPOSE	144,200.
<b>Total</b>				<b>▶ 3a 144,200.</b>
<b>b Approved for future payment</b>  NONE				
<b>Total</b>				<b>▶ 3b 0.</b>





**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

UD JC &amp; AJ BOWLING FOUNDATION

31-1522458

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

☒

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 **General Rule** or a **Special Rule**.**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**

- ☐ 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) and 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 *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. ▶ \$ \_\_\_\_\_

**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 its 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).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

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

Name of organization

Employer identification number

UD JC &amp; AJ BOWLING FOUNDATION

31-1522458

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ANN J. BOWLING C/O BLAIR & POTTS, P.O. BOX 1214 STAMFORD, CT 06904	\$	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)



FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
DEUTSCHE BANK TRUST CO. AMERICA 651429	29,728.	0.	29,728.
DEUTSCHE BANK TRUST CO. AMERICA 651430	25,934.	0.	25,934.
TOTAL TO FM 990-PF, PART I, LN 4	55,662.	0.	55,662.

FORM 990-PF	OTHER INCOME	STATEMENT	2
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DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
K-1 EXCELSIOR BUYOUT INVESTORS	<1,029.>	<1,029.>	0.
K-1 EXCELSIOR VENTURE INVESTORS III	<679.>	<679.>	0.
K-1 EXCELSIOR VENTURE INVESTORS III	<11,493.>	<11,493.>	0.
TOTAL TO FORM 990-PF, PART I, LINE 11	<13,201.>	<13,201.>	0.

FORM 990-PF	TAXES	STATEMENT	3
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
2008 EXTENSION	4,000.	0.	0.	0.
FOREIGN TAXES PAID	820.	0.	0.	0.
IRS TAX REFUNDS	<1,679.>	0.	0.	0.
TO FORM 990-PF, PG 1, LN 18	3,141.	0.	0.	0.

FORM 990-PF	OTHER EXPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADVISORY FEES HIRTLE CALLAGHAN MANAGEMENT	5,604.	5,604.	0.	0.	
DEUTSCHE BANK TRUST CO. AMERICA FEE	914.	914.	0.	0.	
BLAIR & POTTS FEES	4,280.	4,280.	0.	0.	
TO FORM 990-PF, PG 1, LN 23	10,798.	10,798.	0.	0.	

FORM 990-PF	CORPORATE STOCK		STATEMENT	5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
DEUTSCHE BANK	1,604,474.	1,896,565.		
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,604,474.	1,896,565.		

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
EXCELSIOR BUYOUT INVESTORS, LLC	FMV	20,036.	15,489.	
EXCELSIOR VENTURE INVESTORS III, LLC	FMV	0.	0.	
EXCELSIOR VENTURE INVESTORS III, LLC	FMV	58,913.	22,252.	
TOTAL TO FORM 990-PF, PART II, LINE 13		78,949.	37,741.	

# 2009 Tax Information Statement

Page 7 of 26

## Recipient's Name and Address

651429  
XX-XXX2458  
13-4941247  
(212)454-2603

Account Number:  
Recipient's Tax ID number:  
Payer's Federal ID number:  
Questions?

☐ 2nd TIN notice

Payer's Name and Address  
DEUTSCHE BANK TRUST CO. AMERICA  
280 PARK AVENUE  
NEW YORK, NY 10017

THE BOWLING FAMILY FOUNDATION  
PO BOX 1214  
STAMFORD, CT 06904-1214

## 2009 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS are Gross Proceeds less commissions and option premiums.

Number of shares (Box 5)	CUSIP (Box 1b)	Description (Box 7)	Date Acquired	Date of Sale (Box 1a)	Stocks, Bonds, etc. (Box 2)	Cost or other Basis	Net Gain or Loss	Federal Income Tax Withheld (Box 4)
<b>Long Term 15% Sales Reported on 1099-B</b>								
3693.7540	433565801	HIRTLE CALLAGHAN TR FIXED INCOME II PORTFOLIO	01/18/2008	03/03/2009	34,130.29	37,380.79	-3,250.50	0.00
4875.8870	433565207	HIRTLE CALLAGHAN TR GROWTH PORTFOLIO	01/18/2008	11/13/2009	55,000.00	59,290.79	-4,290.79	0.00
1956.9470	433565306	HIRTLE CALLAGHAN TR SMALL CAP PORTFOLIO	01/18/2008	11/13/2009	20,000.00	23,542.07	-3,542.07	0.00
2807.1830	433565306	HIRTLE CALLAGHAN TR SMALL CAP PORTFOLIO	01/18/2008	12/18/2009	29,700.00	33,744.91	-4,044.91	0.00
1429.9070	433565306	HIRTLE CALLAGHAN TR SMALL CAP PORTFOLIO	01/18/2008	12/21/2009	15,300.00	17,201.78	-1,901.78	0.00
<b>Total Long Term 15% Sales Reported on 1099-B</b>						<b>171,160.34</b>	<b>-17,030.05</b>	<b>0.00</b>

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Recipient (Name and Address)	Amount
University of Louisville Louisville, KY 40292	\$15,000.00
University of Louisville School of Medicine Louisville, KY 40202	\$2,000.00
Berea College CPO 2216 Berea, KY 40404	\$16,000.00
University of Kentucky 356 Peterson Service Building Lexington, KY 40506	\$17,000.00
Midway College 512 East Stephens Street Midway, KY 40347	\$15,000.00
Person-to-Person 1864 Post Road P.O. Box 3128 Darien, CT 06820	\$6,000.00
United Way of Indian River County P.O. Box 1960 Vero Beach, FL 32961	\$3,000.00
The Community Fund of Darien 701 Post Road P.O. Box 926 Darien, CT 06820	\$4,000.00
St. Luke's Life Works 141 Franklin Street Stamford, CT 06901	\$1,500.00
Columbia University Dept. of Ophthalmology 635 West 165th Street, Box 13 New York, NY 10032	\$1,000.00
Indian River Hospital Foundation 1000 36th Street Vero Beach, FL 32960	\$1,000.00

The Nature Conservancy Kentucky Chapter 642 West Main Street Lexington, KY 40508	\$1,000.00
Shaker Village of Pleasant Hill 3501 Lexington Road Harrodsburg, KY 40330	\$500.00
Paducah Junior College, Inc. 4801 Alben Barkley Drive P.O. Box 7380 Paducah, KY 42002-7380	\$1,000.00
Colgate University 13 Oak Drive Hamilton, NY 13346	\$2,000.00
Indian River Habitat for Humanity 4568 N. U.S. Highway 1 Vero Beach, FL 32967	\$700.00
The Hotchkiss School P.O. Box 800 Lakeville, CT 06039-0800	\$5,500.00
New Canaan Country School 645 Ponus Ridge P.O. Box 997 New Canaan, CT 06840	\$12,000.00
Lambda Chi Alpha Educational Foundation 8741 Founders Road Indianapolis, IN 46268-1389	\$500.00
Darien Library 1441 Post Road Darien, CT 06820	\$1,500.00
Boy Scouts of America 1325 West Walnut Hill Lane P.O. Box 152079 Irving, TX 75015-2079	\$300.00
Taylor Manor Nursing Home 300 Berry Avenue Versailles, KY 40383	\$500.00

Post 53 P.O. Box 2066 Darien, CT 06820	\$2,500.00
National Bible Association 405 Lexington Avenue, 26 <sup>th</sup> Floor New York, NY 10174	\$500.00
World Press Institute 3415 University Avenue St. Paul, MN 55114	\$300.00
Keep America Beautiful, Inc. 1010 Washington Boulevard Stamford, CT 06901	\$300.00
Sigma Kappa Foundation 8733 Founders Road Indianapolis, IN 46268	\$500.00
Rowayton Arts Center 145 Rowayton Avenue Rowayton, CT 06853	\$800.00
Doctors Without Borders/Medecins Sans Frontieres 333 Seventh Avenue, 2nd Floor New York, NY 10001	\$500.00
Convent of Saint Birgitta 4 Runkenhage Road Darien, CT 06820	\$500.00
Darien Land Trust, Inc. P.O. Box 1074 Darien, CT 06820	\$300.00
VNA & Hospice Foundation 1110 35th Lane Vero Beach, FL 32960	\$500.00
The Christophers 5 Hanover Square, 11th Floor New York, NY 10004	\$300.00

The Gideons International P.O. Box 140800 Nashville, TN 37214-0800	\$300.00
Fellowship of Christian Athletes 8701 Leeds Road Kansas City, MO 64129	\$200.00
American Red Cross Darien Chapter 39 Leroy Avenue Darien, CT 06820	\$300.00
Disabled American Veterans P.O. Box 14301 Cincinnati, OH 45250-0301	\$300.00
Robert Hampton Tapp Foundation, Inc. 38 E 37th Street P.O. Box 125 New York, NY 10016-3008	\$300.00
Darien Fire Department 848 Post Road Darien, CT 06820	\$300.00
Darien Police Association P.O. Box 53 Darien, CT 06820	\$1,300.00
Riverside Theatre 3250 Riverside Park Drive Vero Beach, FL 32963	\$300.00
Shakespeare on the Sound P.O. Box 15 Norwalk, CT 06853	\$300.00
Reagan Ranch Historical Trust 217 State Street Santa Barbara, CA 93101	\$300.00
The Salvation Army P.O. Box 509 Hartford, CT 06141	\$300.00

Education Foundation of Indian River County, Inc P.O. Box 7046 Vero Beach, FL 32961	\$200.00
Special Olympics Connecticut 2666 State Street, Suite 1 Hamden, CT 06517	\$300.00
McKee Botanical Garden 350 U.S. Highway 1 Vero Beach, FL 32962	\$200.00
Make-A-Wish Foundation P.O. Box 97104 Washington, DC 20090	\$300.00
Lyon County Historical Society P.O. Box 811 Eddyville, KY 4203	\$200.00
The Leadership Institute Steven P.J. Wood Building 1101 North Highland Street Arlington, VA 22201	\$200.00
Children's Aid Society 105 East 22nd Street, Suite 504 New York, NY 10010	\$300.00
Mental Health Association in Indian River County 820 37th Place Vero Beach, FL 32960	\$300.00
Christian Appalachian Project 2610 Palumbo Drive Lexington, KY 40509	\$500.00
Covenant House 5 Penn Place New York, NY 10001	\$500.00
Feed The Children P.O. Box 36 Oklahoma City, OK 73101-0036	\$500.00



The Fresh Air Fund 633 Third Avenue New York, NY 10017	\$300.00
Toys for Tots Foundation 18251 Quantico Gateway Drive Triangle, VA 22172	\$500.00
The Alliance of Guardian Angels 982 East 89th Street Brooklyn, NY 11236	\$200.00
Eaglebrook School Pine Nook Road Deerfield, MA 01342	\$3,000.00
Skidmore College 815 North Broadway Saratoga Springs, NY 12866	\$3,000.00
Tepper School of Business Carnegie Mellon University GSIA 213 - Advancement 5000 Forbes Avenue Pittsburgh, PA 15213	\$1,000.00
The Noroton Heights Fire Department 209 Noroton Avenue Darien, CT 06820	\$2,000.00
The Wee Burn Scholarship Fund The Wee Burn Country Club P.O. Box 1046 Darien, CT 06820-1046	\$4,000.00
The Depot P.O. Box 2381 Darien, CT 06820	\$500.00
The Susan G. Komen Breast Cancer Foundation P.O. Box 224523 Dallas, TX 75222-4523	\$1,000.00
The Lustgarten Foundation 1111 Stewart Avenue Bathpage, NY 11714	\$1,000.00

Hamilton Fire Department  
121 Lebanon Street  
Hamilton, NY 13346

\$1,000.00

King & Low-Heywood Thomas School  
1450 Newfield Avenue  
Stamford, CT 06913-0671

\$1,000.00

St. Luke's Parish  
1864 Post Road  
Darien, CT 06820

\$1,000.00

Cumberland College  
816 Walnut Street  
Williamsburg, KY 40769

\$1,000.00

Coalition for the Homeless  
129 Fulton Street  
New York, NY 10038

\$1,000.00

Joshua House Fund, Inc.  
P.O. Box 1792  
Darien, CT 06820

\$500.00

Stamford Health Foundation  
1315 Washington Boulevard, Suite 202  
Stamford, CT 06902

\$500.00

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\$144,200

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- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3 month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

<b>Part II Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed)		
Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization	Employer identification number
	UD JC & AJ BOWLING FOUNDATION	31-1522458
	Number, street, and room or suite no. If a P.O. box, see instructions	For IRS use only
	C/O BLAIR & POTTS, P.O. BOX 1214	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	STAMFORD, CT 06904	

**Check type of return to be filed** (File a separate application for each return)

- ☐ Form 990    ☐ Form 990-EZ    ☐ Form 990-T (sec 401(a) or 408(a) trust)    ☐ Form 1041-A    ☐ Form 5227    ☐ Form 8870  
☐ Form 990-BL    ☒ Form 990-PF    ☐ Form 990-T (trust other than above)    ☐ Form 4720    ☐ Form 6069

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

### BLAIR & POTTS

- The books are in the care of ☒ **P.O. BOX 1214 - STAMFORD, CT 06904**

Telephone No ☒ **(203) 327-2333**

FAX No ☐

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**

5 For calendar year **2009**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension

**ALL THE INFORMATION NECESSARY FOR A COMPLETE AND ACCURATE RETURN HAS NOT YET BEEN RECEIVED.**

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$	<b>291.</b>
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	<b>8b</b>	\$	<b>1,679.</b>
<b>c Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	<b>8c</b>	\$	<b>0.</b>

### Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☒

Title ☒ **TRUSTEE**

Date ☒

Form **8868** (Rev. 4-2009)