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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

FO	r cal	endar	year 2009, c	or tax year beg	inning	·		and ending		, 20
G	Che	ck all th	nat apply:	Initial retu		Initial return		ublic charity	· · · · · · · · · · · · · · · · · · ·	Final return
				Amended	return	Addres	ss change		Name change	
<b>.</b>			Name of four	ndation					A Employer identific	ation number
⊇)	Jse th lab	e IRS	OULTING MAY	N FAMILY F	~	TON			1	7010540
પ્ર (	other					. TON mail is not delivered to street	addrasel	Room/suite	B Telephone number (see p	7218543
_	pri		Hamber and	Street (OI 1 O DOX	number m	man is not denvered to street	20016337	noon saite	D Telephone number (see p	age to of the instructions)
<u>.</u> .	or ty		P O BOX	<u> 40200, </u>	FT.9 - 1 (	00-10-19			(87	7) 446-1410
_		ecific tions.		state, and ZIP co		70-10-17		····	C If exemption applicati	on is
	ıstruç	tions.		,					pending, check here  D 1 Foreign organization	
1 W			JACKSONV	/ILLE, FL	32203-	0200			2 Foreign organization	
<b>3</b> H	Che	k type				c)(3) exempt private for	oundation		85% test, check he computation	
OUTTAINING UPAIR	S	ection 4	947(a)(1) non	nexempt charitabl	e trust	Other taxable pri	vate foundat	on		
ā	Fair	market	value of all	assets at end	J Acco	unting method: X Ca	ash Acc	rual	E If private foundation : under section 507(b)	- I
3	of ye	ear (fro	m Part II, col.	l. (c), line	O	ther (specify)		. <b></b>	. F If the foundation is in	a 60-month termination
	16 <u>)</u>	▶ \$	3,17	75,840.	(Part I,	column (d) must be or	cash basis.)		under section 507(b)	(1)(B), check here .
P	art l			ue and Expens		(a) Revenue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements for charitable
		may n	ot necessarily	columns (b), (c), a equal the amoun	ts in	expenses per	incom		income	purposes
_		colum	n (a) (see page	il of the instruc	tions))	books				(cash basis only)
1	1	Contributi		etc , received (attach so		2,969,759.			·	
	_	Check	attach :	Sch B						
	3		_	temporary cash Inve		20 125		0 000		STMT
- 1	4			st from securities	• • • •	38,135.	3	8,066.		SIMI
			al income or (los			1,438.				<del></del>
e			or (loss) from s les price for all	ale of assets not on	line 10 , 508 .	1,430.				
Revenue	_		n line 6a				····-	1,438.		<u></u>
8		-	_	me (from Part IV,				1,130.		
			•	Igain 						
	10 a	Gross sa	les less returns							
			wances · · · · st of goods sold	1						
			•	(attach schedule)						
l				schedule)						
				ough 11 · · · ·		3,009,332.	3	9,504.		
	-					8,329.		4,165.		4,16
				directors, trustees						
ses	5	Pensior	plans, emplo	yee penefits						
Expenses	9	LeMaAYe	es lattack Udb	dedue ST!		18,055.		NONE	NONE	18,05
Ex	Ь	Accoun	ting fees (atta	ich schedule)ST	MŢ. 3	850.		NONE	NONE	85
	C	OMEG	ofessponal fee	er (attach schad)	陌. 4.	9,983.		9,983.		
Administrative		#HOF001	<del></del>	<del></del>		63.5				
nist				(see page 14 of the in		637.		622.	<del></del> -	
Ē			•	schedule) and de			<del></del>		<del></del>	
Ad	20	•	•					- +-		
힏				and meetings				<del></del>		
				ions		750.			<del>-</del>	75
Operating			-	cn schedule) Q 1) administrative e)		, 50.				, , , ,
Jere			-	23	-	38,604.	1	4,770.	NONE	23,82
ō			_	rants paid		256,200.	<u>_</u>			256,20
				sements Add lines 2		294,804.	1	4,770.	NONE	280,02
	27		t line 26 from		20					
				penses and disbursen	ents	2,714,528.				
- 1				me (if negative, e			2	4,734.		
				(if negative, ente						

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions 9E1410 1 000 CTV123 E171 03/30/2010 12:10:41

Form 990-PF (2009)

Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	<u> </u>	d of year
	<del>-</del>	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ing	NONE	NOI	
2	Savings and temporary	cash investments	72,936.	42,76	5. 42,765
3	Accounts receivable				
	Less: allowance for dou	btful accounts ▶			
4	Pledges receivable				
	Less allowance for dou	btful accounts ▶			
5					
6		fficers, directors, trustees, and other		<del></del>	
		ach schedule) (see page 16 of the instructions)			
7		receivable (attach schedule)		* NOI	AB.
′		btful accounts	NONE	NOI	1
			NONE	1101	VII INOINI
sts 8		se		<del></del>	
Assets a s		deferred charges	NONE	3703	NONE
		e government obligations (attach schedule) .	NONE	NOI	
		stock (attach schedule)	NONE	2,741,998	
11 0	Investments - corporate	bonds (attach schedule)	NONE	NOI	NE NON!
1''	Investments - land, building and equipment basis				
	Less: accumulated deprect (attach schedule)	ation	NONE	NON	
12	Investments - mortgage	loans	NONE	NOI	1B
13	Investments - other (atta	ach schedule)	NONE	NOI	NE NON!
14	Land buildings and				
	Less accumulated depreci-	ation			
15	Other assets (describe	<b>&gt;</b>	NONE	NON	VE NONE
16		ppleted by all filers - see the			
'		page 1, item I)	72 936	2,784,763	3,175,840.
17				2,701,70	3,173,010
		accrued expenses			-
18				·	$\dashv$
Liabilities 20 21 21 22		· · · · · · · · · · · · · · · · · · ·			$\dashv$
블 20		The state of the s			<del></del>
[ 21		otes payable (attach schedule)			<del>-</del>
<b>-</b> 22	Other liabilities (describ	e ▶)			_
1					
23_		es 17 through 22)			4
		low SFAS 117, check here			
	•	24 through 26 and lines 30 and 31.			
န္မ 24	Unrestricted				_
25 26 26	Temporarily restricted				_
<u>e</u> 26	Permanently restricted	<i>.</i>			_
Fund	Foundations that do	not follow SFAS 117,			1
쾬	check here and com	plete lines 27 through 31. ▶ X			
<b>5</b> 27	Capital stock, trust princ	cipal, or current funds	72,936.	2,784,763	3.
		r land, bldg , and equipment fund			
S 29	Retained earnings, accumu	lated income, endowment, or other funds	NONE	NON	<u>1B</u>
¥ 30		d balances (see page 17 of the			7
Net Assets			72,936.	2,784,763	3 .
31		assets/fund balances (see page 17			7
			72,936.	2,784,763	<b>.</b>
Part II		anges in Net Assets or Fund B		2,104,103	<u></u>
		alances at beginning of year - Part II, co		agree with	<del></del>
					72 026
		I on prior year's return)			
z Ente	r amount from Part I, I	line 27a led in line 2 (itemize) ▶SEE_STAT		2	<del></del>
4 Add	lines 1, 2, and 3	line 2 (itemize) ▶ SEE STAT		4	
6 Tota	I net assets or fund ba	lances at end of year (line 4 minus line	5) - Part II, column (b)	, line 30 6	2,784,763.

Part IV Capital Gains	s and Losses for Tax on Inv	estment Income		<del></del>	rage 3
(a) List and 2-story bi	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
1a SEE PART IV DETA			Donation		
_b					
_c					
_ <u>d</u>					
_e	(5) Dangaistics allowed	(g) Cost or other basis	<del>                                     </del>	(h) Coin an (la	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_b					
_ <u>c</u>					
_d				<del></del>	
Complete only for assets sho	wing gain in column (h) and owne	d by the foundation on 12/31/69		Cara- (Cal. (b) ar	<u> </u>
	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col. (h) ga (k), but not less t	
(i) F M V. as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	l (h))
_8					
_ <u>b</u>					
_c _d				· <del>-</del>	
_d _e				···	· · · · · · · · · · · · · · · · · · ·
2 Capital gain net income or	(not capital loce)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	· · · · · · · · · · · · · · · · · · ·	1,438.
	or (loss) as defined in sections 12.	22(5) and (6).			1,430.
	line 8, column (c) (see pages 13 ar				
	ine 8	ced Tax on Net Investment Inc	3	<del></del>	<del></del>
		outable amount of any year in the b	ase period	d? [	Yes X No
		see page 18 of the instructions be	fore maki	ng 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 ra (col (b) divided by	
2008	177,659.	71,677.			360541038
2007					
2006				<del></del>	<del></del>
2005					
2004			<del> </del>		
2 Total of line 1, column (d)			2	2.478	360541038
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
number of years the found	dation has been in existence if less	than 5 years	3	2.478	60541038
4 Enter the net value of non	charitable-use assets for 2009 from	m Part X, line 5	4		2,276,634.
5 Multiply line 4 by line 3			5		5,642,877.
6 Enter 1% of net investmen	at income (1% of Part I, line 27b)		6		247.
7 Add lines 5 and 6			7		5,643,124.
8 Enter qualifying distribution If line 8 is equal to or great VI instructions on page	ons from Part XII, line 4 eater than line 7, check the box ine 18.	in Part VI, line 1b, and complete t	8 hat part u	using a 1% tax	280,020. c rate. See the

Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	tructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1						
	Date of ruling or determination letter:(attach copy of ruling letter if necessary - see instructions)						
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		495.				
	here  and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%						
	of Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
3	Add lines 1 and 2		495.				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4		NONE				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		495.				
6	Credits/Payments:						
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1.						
	Exempt foreign organizations-tax withheld at source 6b NONE						
	Tax paid with application for extension of time to file (Form 8868) 6c NONE						
	Backup withholding erroneously withheld						
7	Total credits and payments. Add lines 6a through 6d		1.				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		494.				
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	•••					
	VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes No				
	participate or intervene in any political campaign?	1a	X				
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19						
_	of the instructions for definition)?	1ь	X				
	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						
_	Did the foundation file Form 1120-POL for this year?	1c	X				
	A = 1 A A A A A A A A A A A A A A A A A						
_	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation ▶\$						
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
·	on foundation managers > \$						
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						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	Х				
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Х				
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?						
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		_ X				
5	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
U	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?	6	x l				
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	7	X				
7	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	r '-	<del></del>				
8a	CITIATO A						
_	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		•				
b		0.	x				
•	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b					
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 on page	ا ۾ ا	X				
	27)? If "Yes," complete Part XIV	9_	<del>  ^</del>				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	х				
	names and addresses , , , , , , , , , , , , , , , , ,						

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

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

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

3a Did the foundation hold more than a 2% direct or indirect interest in any business

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? . . . . | 4b | X

Form 990-PF (2009)

X

X No

Part VII-E	Statements Regarding Activities for	Which Form 47	20 May Be Requi	red (continued)				
(1) C (2) In	g the year did the foundation pay or incur any amountary on propaganda, or otherwise attempt to influence the outcome of any specific public election of the contraction drive?	ce legislation (section (see section 4955); o	r to carry on,					
	directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No							
	rovide a grant to an organization other than a charita ection 509(a)(1), (2), or (3), or section 4940(d)(2)? (s			Yes X No	.			
	rovide for any purpose other than religious, charitable	·		,ies				
	urposes, or for the prevention of cruelty to children o			. Yes X No	,			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
-	ations section 53 4945 or in a current notice regard nizations relying on a current notice regarding disasti	-	· -		5b			
	answer is "Yes" to question 5a(4), does the foundation							
	ise it maintained expenditure responsibility for the gi			Yes No	,			
	s," attach the statement required by Regulations secti							
	ne foundation, during the year, receive any funds, dire		pay premiums					
	personal benefit contract?	•	• • •	, Yes X No	,			
b Did th	ne foundation, during the year, pay premiums, directly	y or indirectly, on a p	ersonal benefit contrac	t?	6b	X		
	s" to 6b, file Form 8870.							
	y time during the tax year, was the foundation a part				·			
	did the foundation receive any proceeds or have an					<u> </u>		
Part VIII	and Contractors	·						
1 List a	l officers, directors, trustees, foundation mar	,						
<del></del>	(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) Expens other all	e account, owances		
SEE STA	ATEMENT 11		8,329.	-0-		-0		
	ensation of five highest-paid employees (oth e, enter "NONE."	er than those incl	uded on line 1 - see		ructions).			
(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) Expens other allo			
NONE			NONE	NONE	Ŋ	ONE		
						_		
					- · · · · -			
Total num	ber of other employees paid over \$50,000 .			<u> </u>		NONE		

ρ	a	_	۵	7

Part VIII Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see page 2		enter "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MONE		MONTE
NONE		NONE
		", , ,
Total number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	NON:
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ormation such as the number	Expenses
1 NONE		
2		
3		
· · · · · · · · · · · · · · · · · · ·		
Part IX-B Summary of Program-Related Investments (see page 23 of the instance Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a		Amount
1 NONE		
THOME		
2		<del> </del>
All other program-related investments. See page 24 of the instructions		
3 <u>NONE</u>		
Total Add lines a shown 2		<del></del>
Total Add lines 1 through 3		

Form 990-PF (2009)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundatio	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,613,177.
b	Average of monthly cash balances	1b	<u>698,127.</u>
C	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
d	<b>Total</b> (add lines 1a, b, and c)	1d	2,311,304.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	]	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	2,311,304.
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25		
		4	34,670.
5	of the instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,276,634.
6	Minimum investment return. Enter 5% of line 5	6	113,832.
_	Tt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ □ and do not complete this process.	te operating part.)	
1	Minimum investment return from Part X, line 6	1	113,832.
2 a	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.)	1	
c	Add lines 2a and 2b	1 2c	495.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	113,337.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	113,337.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1 · · · · · · · · · · · · · · · · · ·	7	113,337.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	280,020.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	<u> </u>
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	280,020.
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 page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	280,020.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating will		Indation

Form 990-PF (2009)

qualifies for the section 4940(e) reduction of tax in those years

Page 9

Pa	t XIII Undistributed Income (see page	26 of the instruction	rs)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				113,337.
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only			NONE	
b	Total for prior years: 20_07_, 20, 20		NONE		
3	Excess distributions carryover, if any, to 2009				
	From 2004 NONE				
	From 2005 NONE				
	From 2006 NONE				
ď	From 2007 NONE				
	From 2008				
	Total of lines 3a through e	175,100.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4· ▶ \$ 280,020.			NONE	
а	Applied to 2008, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years (Election		NONE		
	required - see page 26 of the instructions)		NONE		<del></del>
C	Treated as distributions out of corpus (Election	NONTE			
	required - see page 26 of the instructions)	NONB			112 227
	Applied to 2009 distributable amount	166,683.			113,337.
е 5	Remaining amount distributed out of corpus	NONE			NONE
5	(If an amount appears in column (d), the same	NONB			
	amount must be shown in column (a) )				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	341,783.			
	Prior years' undistributed income Subtract				
Ü	line 4b from line 2b		NONE		
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		NONE		
d	Subtract line 6c from line 6b. Taxable				
	amount - see page 27 of the instructions		NONE		
е	Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see page				
	27 of the instructions			NONE	······
f	Undistributed income for 2009. Subtract lines				
-	4d and 5 from line 1 This amount must be				MAN
7	distributed in 2010				NONE
′	to satisfy requirements imposed by section		•		
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the	NONE			
8	instructions)	NONB			
	applied on line 5 or line 7 (see page 27 of the	NONE			
	Instructions)	NONE			
9	Excess distributions carryover to 2010.	341,783.			
10	Subtract lines 7 and 8 from line 6a	J=1,70J.			·
	Analysis of line 9: Excess from 2005 NONE				
	Excess from 2006 NONE				
	Excess from 2007 NONE				
d	Excess from 2008 175, 100.				
	Excess from 2009 166, 683.				
					5 000 DE (0000)

Pa	rt XIV Private Oper	rating Foundations	(see page 27 of the	instructions and	Part VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or o	determination letter that	at it is a private o	perating	
	foundation, and the ruling	g is effective for 2009, en	iter the date of the ruling	9	▶	
b	Check box to indicate wh				1	(j)(3) or 4942(j)(5)
٥.		Tax year		Prior 3 years		T
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	or the minimum investment					
	return from Part X for each		}			
	year listed		<u> </u>	<del></del>		<del></del>
b	85% of line 2a		<del> </del>	<del></del>	· <del>   </del>	<del> </del>
C	Qualifying distributions from Part					
d	XII, line 4 for each year listed .			<u></u>		<del></del>
u	Amounts included in line 2c not used directly for active conduct			1		
	of exempt activities					
е	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					
а	"Assets" alternative test - enter		1			
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
þ	"Endowment" alternative test-					
	enter 2/3 of minimum invest- ment return shown in Part X,					
	line 6 for each year listed		İ			
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)			<del> </del>		<del></del>
	public and 5 or more					
	exempt organizations as provided in section 4942	}				
	(j)(3)(B)(m)					<del> </del>
	(3) Largest amount of sup- port from an exempt					
	organization			<del> </del>	<del>  · ·</del>	<del></del>
	(4) Gross investment income	1-1				
Рa		ary information (C during the year - se			ndation had \$5,000	or more in assets
_	Information Regarding			istructions.	<del></del>	
'_				o than 20/ of the t	otal contributions receiv	and by the foundation
а	before the close of any	tax vear (but only if the	nave contributed infor	more than \$5.000).	(See section 507(d)(2).)	ved by the loundation
		, , (	107 11010 001111100100		(000 000,000,000,000,000,000,000,000,000	
	N/A					
b					rporation (or an equall	y large portion of the
	ownership of a partner	rship or other entity) o	f which the foundation	n has a 10% or grea	ter interest.	
	,					
	N/A Information Regarding		<u> </u>	·		
2		•				
	Check here ► X if t	he foundation only i	makes contributions	to preselected ch	aritable organizations a	and does not accept
					age 28 of the instruction	ons) to individuals or
	organizations under ot	her conditions, compli	ete items 2a, b, c, and	ı a.		
a	The name, address, an	d telephone number o	of the person to whom	applications should	d be addressed <sup>.</sup>	
b	The form in which app	lications should be sul	bmitted and informati	on and materials the	ey should include:	
C	Any submission deadli	nes:				
	<del>_</del>					
ď		mitations on awards,	, such as by geogra	aphical areas, char	itable fields, kinds of	institutions, or other
	factors:					

Form 990-PF (20	<sup>09)</sup> <b>upplementary Information</b> (co	nntinued)			Page <b>1</b> 1
3 Grants	and Contributions Paid Durin	g the Year or Appr	oved for F	uture Payment	
0 0.0.00	Recipient	If recipient is an individual,			
Name a	nd 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
	ring the year	or substantial contributor			
SEE ST	TATEMENT 15				
				-	
			:		
			<u></u>	▶ 3a	256,200
b Approve	ed for future payment				
			<u> </u>		
Total		<u> </u>		▶ 3b	

Part XVI-	A Analysis of Income-Produ	cing Activ	rities			
	amounts unless otherwise indicated		ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
_	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions.)
a	i service revenue.					
. —						
_						
е				ļ		
f	<u> </u>					
-	and contracts from government agencies					
	ship dues and assessments					
	n savings and temporary cash investments			1.4	38,135.	
	ds and interest from securities	<del></del>		14		
	al income or (loss) from real estate t-financed property					
	debt-financed property					
	I income or (loss) from personal property	<del></del>				
	vestment income					
	oss) from sales of assets other than inventory			18	1,438.	
9 Net inco	me or (loss) from special events					
10 Gross pr	ofit or (loss) from sales of inventory					
11 Other re	evenue a	ļ. <u>.</u>				<u> </u>
b						
c						
d						
e				<u> </u>	39,573.	
	Add columns (b), (d), and (e)					
	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28 ti			• • • • • •		37,313.
Part XVI-				empt Purp	oses	<del> </del>
Line No.	Explain below how each activi					tributed importantly to
	the accomplishment of the fo	oundation's	exempt purposes (ot	ther than	by providing funds for	such purposes). (See
•	page 29 of the instructions)					
			· · · · · · · · · · · · · · · · · · ·		. <del></del>	
					<del></del>	
				······································		
			<u></u>			<del> </del>
			NOT APPLICABLE	E		
			<del> </del>			
			<del></del>			<del> </del>
			<del></del>			
				-		<del></del>
					<del></del>	
	<del> </del>					
						Form <b>990-PF</b> (2009)

Form 990	0-PF (2009)	ı				34-	7218543			Pa	ige 13
Part >	(VII	Information Exempt Orga	Regarding Tra	ansfers To an	d Transact			ips With	Nonc		
ın	section	501(c) of the C	y or indirectly er ode (other than s undation to a nonch	section 501(c)(3)	organizations)					Yes	No
(1 (2	l) Cash .	ssets									X
(2	) Purchas	es of assets from a	aritable exempt orga noncharitable exen ent, or other assets	npt organization .					. 16(2)		X X X
(4 (5	) Reimbu i) Loans o	rsement arrangeme r loan guarantees	ents						. 1b(4)		X X X
d If va	the ansi	wer to any of t ne goods, other	, mailing lists, other the above is "Ye assets, or service sharing arranger	s," complete the s given by the	following sch- reporting foun	edule Colu dation. If t	mn <b>(b)</b> should he foundation	always sh received le	ow the ss than	fair n	narket
(a) Line	no (b)	Amount involved	(c) Name of non	charitable exempt org	anization	(d) Descriptio	n of transfers, trans	sactions, and s	haring arra	ngemei	nts

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    Value   V	2a		•		·	·
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    3/31/10   Co-Instecting   Title	_ k	o If "Yes	s," complete the following schedule			
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    3/3//10   Co-/nustee			(a) Name of organization	(b) Type of organization		(c) Description of relationship
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    3/3//10   Co-/nustee						
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    3/3//10   Co-/nustee			<del>-</del>			
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    3/3//10   Co-/nustee			<del></del>	····		<del></del>
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    3/3//10   Co-/nustee						
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    3/3//10   Co-/nustee						
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    3/3//10   Co-/nustee						
Preparer's signature signature   Salf-employed   Preparer's signature   Preparer's signatur						information of which preparer has any knowledge
Preparer's signature signature   Salf-employed   Preparer's signature   Preparer's signatur	e e	Sı	gnature of officer or trustee		Date	Title
Firm's name (or yours(if p.O. BOX 40200, FL9-100-10-19	Sign Her	id arer's Only	Preparer's AQQ	Date 3/3/3/		f number (See Signature on page 30 of the instructions)
361-Chiproyedi, addiess, P.O. BOX 40200, Ph9-100-10-19		Se Pa		F AMERICA, N. A.	7	EIN ▶ 94-1687665
and ZIP code		₹ ⊃	self-employed), address, P.O. Bo	OX 40200, FL9-100-10	-19	
		<u> </u>	and ZIP code JACKSOI	NVILLE, FL	32203-02	00   Phone no 877-446-1410

## 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

**Employer identification number** Name of the organization 34-7218543 STUTZMAN FAMILY FOUNDATION Organization type (check one): Section: Filers of: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 | 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 331/3% 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 Ш 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 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).

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

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

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

Page	of	of Part I

Schedule B (10111 350, 350-12, 01 350-17 / 250-37	rageor
Name of organization	Employer identification number
STUTZMAN FAMILY FOUNDATION	34-7218543

STUTZ	MAN FAMILY FOUNDATION		34-7218543
	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	STUTZMAN CHARITABLE LEAD TRUST  800 LAUREL OAK DR., STE 600  NAPLES, FL 34108	\$ 2,969,759.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME								
Kind of Property		Description			ο̈́D	Date acquired	Date sold	
Gross sale	Depreciation	Cost or	FMV as of	Adj. basis	Excess of FMV over		Gain or	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	adı basıs	Ц	(loss)	
		1370.43 COL			UCTURING		01/22/2009	02/10/2009
39,208.00		PROPERTY TY 37,646.00	PE: SECURIT	IES			1,562.00	
		1251.49 PIM PROPERTY TY			UNHEDGED		01/23/2009	03/19/2009
10,300.00		10,424.00	II. DECORTI				-124.00	:
TOTAL GAIN(L	OSS)			• • • • • • • • • • • • • • • • • • • •			1,438.	
	•							
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NET INVESTMENT INCOME	11,768. 14,569. 2,228. 3,649. 3,649. 2,699. 2,302. 38,066.
REVENUE AND EXPENSES PER BOOKS	11,768. 14,569. 2,228. 495. 3,649. 356. 2,699. 2,302. 
DESCRIPTION	ARTIO INTL EQUITY FUND II CL I COLUMBIA SHORT TERM BOND FUND CLASS Z SH COLUMBIA CASH RESERVES TRUST CLASS COLUMBIA INTERMEDIATE BOND FUND CLASS Z COLUMBIA CONTRARIAN CORE FUND CLASS Z SH COLUMBIA VALUE AND RESTRUCTURING FUND CL ISHARES MSCI EMERGING MKTS INDEX FUND JOHN HANCOCK FDS III INTL GROWTH FD I PIMCO FOREIGN BOND FUND UNHEDGED INSTL C

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CHARITABLE PURPOSES	18,055.  18,055. ===========
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	18,055. 18,055. ===================================
	TOTALS
DESCRIPTION	LEGAL FEES

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REVENUE AND EXPENSES INV PER BOOKS	FEE
NET ADJUSTED INVESTMENT NET INCOME	NONE NONE NONE =========================
CHARITABLE PURPOSES	850. IE 850.

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NET INVESTMENT INCOME	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	9,983.	9,983.
REVENUE AND EXPENSES PER BOOKS	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	9,983.	9,983.
		FEES	TOTALS
N	ı	INVESTMENT MANAGEMENT	
DESCRIPTION	 	INVESTMENT	

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NET INVESTMENT INCOME	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	377. 245 622.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15. 377. 245. 
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	EXCISE TAX - PRIOR YEAR FOREIGN TAXES ON QUALIFIED FOREIGN TAXES ON NONQUALIFIED

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REVENUE AND EXPENSES	PER BOOKS	1 1 1 1 1 1 1 1	750.	750.
				TOTALS
	DESCRIPTION		OTHER CHARITABLE EXPENSES	

750. 750. CHARITABLE PURPOSES

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FORM	990PF,	PART	III	-	OTHER	INCREASES	IN	NET	WORTH	OR	FUND	BALANCES
=====	======	=====	====	===	=====	========	===	====	=====	===	:====	=======
DESCR	RIPTION									AMO	TNUC	

TAX EFFECTIVE DATE ADJUSTMENT 120.

TOTAL 120.

FORM 990PF,	PART III -	OTHER	DECREASES	IN NET	WORTH	OR	FUND	BALANCES
========	========	=====:		======	======	====	=====	=======

DESCRIPTION AMOUNT

TAX EFFECTIVE DATE ADJUSTMENT 2,745.

COST ADJUSTMENT 76.

TOTAL 2,821.

STATE(S) WHERE THE FOUNDATION IS REGISTERED FL

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

STUTZMAN CHARITABLE LEAD TRUST 800 LAUREL OAK DR., STE 600 NAPLES, FL 34108

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

ANDREW KRAUSE

ADDRESS:

C/O STUTZMAN FOUNDATION

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 5

COMPENSATION ..... 8,329.

OFFICER NAME:

WALTER STUTZMAN

ADDRESS:

C/O STUTZMAN FOUNDATION

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 5

TOTAL COMPENSATION:

8,329.

===========

RECIPIENT NAME:

SARAH LAWRENCE COLLEGE

ADDRESS:

1 MEADWAY

BRONXVILLE, NY 10708

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL - GENERAL FUNDS

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 1,250.

RECIPIENT NAME:

SOUTHERN CONNECTICUT

STATE UNIV. FDN

ADDRESS:

501 CRESCENT ST.

NEW HAVEN, CT 06515

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL - VARIOUS PROGRAMS

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

RECIPIENT NAME:

BOARD OF EDUCATION OF THE

OSSINING UNION FREE SCHOOL DISTRICT

ADDRESS:

190 CROTON AVE.

OSSINING, NY 10562-4599

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

AMOUNT OF GRANT PAID ...... 40,000.

RECIPIENT NAME:

POMONA COLLEGE

ADDRESS:

550 NORTH COLLEGE AVE.

CLAREMONT, CA 91711

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

RECIPIENT NAME:

FIRST BAPTIST CHURCH OF

WALLINGFORD

ADDRESS:

13 FAWN DR.

WALLINGFORD, CT 06492

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

RELIGIOUS - GENERAL FUNDS

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

RECIPIENT NAME:

UNITED NATIONS FOUNDATION

ADDRESS:

1800 MASSACHUSETTS AVE NW, STE 400

WASHINGTON, DC 20036

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

AIDS IN AFRICA PROGRAM

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 1,250.

13

FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

CHAI LIFELINE

ADDRESS:

151 WEST 30TH ST.

NEW YORK, NY 10001

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

MEDICAL - GENERAL FUNDS

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

RECIPIENT NAME:

SOLAR COOKERS INTERNATIONAL

ADDRESS:

1919 21ST ST, STE 101

SACRAMENTO, CA 95811

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL WELFARE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 1,250.

RECIPIENT NAME:

DONORS CHOOSE

ADDRESS:

347 W. 36TH ST., STE. 503

NEW YORK, NY 10018

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

14

RECIPIENT NAME:

MAKE IT RIGHT FOUNDATION

ADDRESS:

PO BOX 58009

NEW ORLEANS, LA 70158

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL WELFARE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

RECIPIENT NAME:

ACADEMY FOR JEWISH

RELIGION

ADDRESS:

6301 RIVERDALE AVENUE

RIVERDALE, NY 10471

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

RELIGIOUS

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

RECIPIENT NAME:

TEMPLE BETH TIKVAH

ADDRESS:

PO BOX 1269, 169 DURHAM RD

MADISON, CT 06443

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PUBLIC CHARITY

TOTAL GRANTS PAID:

256,200.

=============

## IM STUTZMAN FAMILY FOUNDATION 34-7218543 Balance Sheet

12/31/2009

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Cusip	Asset	Units	Basis	Market Value
04315J837	ARTIO INTL EQUITY FUND II	19852.871	200,000 00	233,866 82
19765H362	COLUMBIA SHORT TERM BOND FUND	95098 469	925,000 00	939,572.87
19765N468	COLUMBIA INTERMEDIATE BOND FUND	1266.234	9,750.00	11,130 20
19765P406	COLUMBIA CONTRARIAN CORE FUND	43180 002	450,000.00	535,000.22
19765P596	COLUMBIA SMALL CAP GROWTH I	3915.602	75,000.00	94,287.70
19765Y514	COLUMBIA VALUE AND	631 754	17,354.28	27,032 75
19765Y589	COLUMBIA SELECT SMALL CAP FUND	6862.499	75,000.00	93,673.11
19765Y688	COLUMBIA SELECT LARGE CAP	52711.834	450,000.00	534,498 00
464287234	ISHARES MSCI EMERGING MKTS	5605.000	189,893 80	232,607 50
47103C795	JANUS INVT FUND	4077 070	150,000 00	191,663 06
47803T627	JOHN HANCOCK FDS III	13230.862	200,000 00	239,743 22
	Cash/Cash Equivalent	42764.820	42,764.82	42,764 82
-		Totals.	2,784,762 90	3,175,840 27