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OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service

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

				year beginning 01- —-			ding 12-31-			
G	Che	ck all that apply	Initial A mended re	_	eturn of a former pub Inge Nam			al return		
	the I	Name of foundation	on		inge i Nam	e cna	A Employer id 38-6071154	entification numbe	er	
o	herwis print r type Speci	Number and stree 867 BOYLSTON S		k number if mail is not deliver FLOOR	· 1	dress) Room/ suite B Telephone number (see page 10 of the instruction (617) 267-7747				
Inst	ructio	BOSTON, MA 021	16				•	application is pendin ganizations, check h	<u></u>	
				n 501(c)(3) exempt priv ible trust Other tax		on	check her	rganizations meeting e and attach comput	ation	
of y	ear <i>(f</i>	ket value of all assets From Part II, col (c), \$ 38,309,256	s at end	JAccounting method Other (specify) (Part I, column (d) mus	_	rual	under sectio	undation status was t n 507(b)(1)(A), chec ation is in a 60-mont n 507(b)(1)(B), chec	k here F	
Pai	t I	total of amounts in co	olumns (b), (and Expenses (The c), and (d) may not column (a) (see page 11 of	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, gran	nts, etc , rece	ived (attach schedule)	436,72	3				
	2	Check 🟲 🦵 If the found	dation is not	required to attach Sch B						
	3	Interest on savings	and tempo	orary cash investments						
	4	Dividends and inter	est from se	ecurities	856,86	9	856,637			
	5a	Gross rents								
	b	Net rental income o	r (loss)							
Revenue	6a	Net gain or (loss) fr	om sale of	assets not on line 10	-313,10	9				
	ь	Gross sales price for all a	assets on line	6a <u>3,009,676</u>						
	7			Part IV , line 2)			0			
	8	Net short-term cap	ıtal gaın .							
	9	Income modification	ns							
	10a	Gross sales less returns								
	Ь	Less Cost of goods								
				chedule)						
	11			e)			056 627			
	12					+	856,637		104.467	
	13	Compensation of off	•	·	208,33	-	104,166		104,167	
o di	14	• •		vages		-	25,119		142,342 86,394	
Ϋ́	15		•	fits		-	15,246		216	
Expenses	16a					+	1,065		6,035	
	Ь			h schedule)	<u> </u>		98,488		22,873	
tiv€	17	•	•	,	121,50	1	30,400		22,073	
Admını strative	17 18	Taxes (attach schedule)		4 of the instructions	24,03	5	3,553		20,482	
<u> </u>	19	·) and depletion		-	0		20,102	
ᄪ	20	•		, and depiction		-	18,893		107,063	
Ā	21			ings	·	-	6,622		6,622	
and	22				· · · · · · · · · · · · · · · · · · ·		ŕ		,	
) <u>(</u>	23			lule)	l- -	2	12,898		73,084	
atıı	24	Total operating and		•	_					
Operating					866,03	1	286,088		569,278	
ō	25	_		ıd					2,528,967	
	26	Total expenses and d			1,920,73	1	286,088		3,098,245	
	27	Subtract line 26 fro								
	а	Excess of revenue of	ver expens	ses and disbursements	-940,24	3				
	b	Net investment inco	ome (ıf neg	atıve, enter -0-)			570,549			
	С	Adjusted net incom	le (ıf negatı	ve, enter -0-)						

)a	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year			of year	
٠			(a) Book Value	(b) Boo			air Market Value
	1	Cash—non-interest-bearing	36,994		90,23	1	90,234
	2	Savings and temporary cash investments				┷	
	3	Accounts receivable 1,733,573					
		Less allowance for doubtful accounts -	165,868		1,733,57	3	1,733,573
	4	Pledges receivable					
		Less allowance for doubtful accounts 🕨				↓	
	5	Grants receivable				↓	
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see page 15 of the					
		ınstructions)					
	7	Other notes and loans receivable (attach schedule)					
		Less allowance for doubtful accounts 🕨					
		Inventories for sale or use				+-	
Š	8	<u> </u>				+-	
ᡏ	9	Prepaid expenses and deferred charges				+-	
	10a	Investments—U S and state government obligations (attach schedule)	3,000,000	05FT	2 702 21	_	2 702 215
	Ь	Investments—corporate stock (attach schedule)	3,000,000	<u>ත</u>	3,702,31	<u> </u>	3,702,315
	С	Investments—corporate bonds (attach schedule)				+-	
	11	Investments—land, buildings, and equipment basis					
		Less accumulated depreciation (attach schedule)				+-	
	12	Investments—mortgage loans		-ET			
	13	Investments—other (attach schedule)	28,272,150	<u> </u>	30,978,55) 	30,978,555
	14	Land, buildings, and equipment basis • 62,996		_			
		Less accumulated depreciation (attach schedule) 18,065	51,003		44,93		44,931
	15	,	1,692,888	<u> </u>	1,759,64	3 %	1,759,648
	16	Total assets (to be completed by all filers—see the					
		instructions Also, see page 1, item I)	33,218,903		38,309,25	5	38,309,256
	17	Accounts payable and accrued expenses	5,935		2,39	4	
	18	Grants payable	2,029,267		555,00	0	
۵	19	Deferred revenue					
[]	20	Loans from officers, directors, trustees, and other disqualified persons					
5	21	Mortgages and other notes payable (attach schedule)					
-	22	Other liabilities (describe)					
]	
	23	Total liabilities (add lines 17 through 22)	2,035,202		557,39	4	
		Foundations that follow SFAS 117, check here 🕨 🔽					
٨		and complete lines 24 through 26 and lines 30 and 31.					
or Fund Balances	24	Unrestricted	31,183,701		37,751,86	2	
티	25	Temporarily restricted					
ខ្ល	26	Permanently restricted					
ן⊒		Foundations that do not follow SFAS 117, check here ▶]	
3		and complete lines 27 through 31.					
5	27	Capital stock, trust principal, or current funds					
- 1	28	Paid-in or capital surplus, or land, bldg , and equipment fund				1	
100E	29	Retained earnings, accumulated income, endowment, or other funds				1	
- 1	30	Total net assets or fund balances (see page 17 of the				1	
ž		ınstructions)	31,183,701		37,751,86	2	
-	31	Total liabilities and net assets/fund balances (see page 17 of				1	
		the instructions)	33,218,903		38,309,25	6	
 Pa	rt II	_					
			(a) line 20 (
L		Total net assets or fund balances at beginning of year—Part II, column					21 102 704
		with end-of-year figure reported on prior year's return)					31,183,701
2		Enter amount from Part I, line 27a		ART.	2		-940,248
3		Other increases not included in line 2 (itemize)			3		7,508,409
4 -		Add lines 1, 2, and 3			4		37,751,862
5		Decreases not included in line 2 (itemize)			5		0
5		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), li	ne 30	6		37,751,862

	(a) List and describe the kind 2-story brick warehouse, or			(b) How acquired P—Purchase D—Donation	(c) D	ate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1 a	Securities and mutual funds				20	09-01-01	2009-12-31
b	HALL CAPITAL				20	07-12-31	2009-12-31
С							
d							
е							
(€	e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basıs xpense of sale			or (loss)) minus (g)
а	1,276,103			1,422,78	5		-146,682
b	1,733,573			1,900,00	0		-166,427
c							
d							
е							
Со	mplete only for assets showing	gain in column (h) and owne	d by the foundatio	n on 12/31/69	1 (I) Gains (Col	(h) gain minus
	FM V as of 12/31/69	(j) A djusted basis as of 12/31/69	(k) Ex	cess of col (ı) col (j), ıf any		l (k), but not	less than -0-) or om col (h))
а							-146,682
b							-166,427
С							
d							
е							
2	Capital gain net income or (n		If gaın, also enter If (loss), enter -0		2		-313,109
3	Net short-term capital gain o	r (loss) as defined in section	ns 1222(5) and (6	,			313,10
3	If gaın, also enter ın Part I, lı	ne 8, column (c) (see pages	13 and 17 of the	instructions)	}		
	If (loss), enter -0- ın Part I, l	ine 8			<u> </u>		
Part	V Qualification Under	Section 4940(e) for R	educed Tax o	n Net Investm	ent Ir	icome	
(For opt	tional use by domestic private f	oundations subject to the se	ection 4940(a) tax	on net investmen	incom	ne)	
Ifcacti	on 4940(d)(2) applies, leave th	ic nart hlank					
Was the	e foundation liable for the sectio "the foundation does not qualif	n 4942 tax on the distribute			erıod?		┌ Yes ┌ No
	ter the appropriate amount in ea				makın	g any entries	
	(a) e period years Calendar or tax year beginning in) Adju	(b) sted qualifying distributions	(c) Net value of noncha			(d) Distribution (col (b) divided	n ratio
7 (2008	3,947,861		41,882,815		((-)	0 094260
	2007	2,864,325		50,829,200			0 056352
	2006	2,254,367		48,076,542			0 046891
	2005	2,386,322		40,909,466			0 058332
	2004	2,583,763		39,402,007			0 065574
2	Total of line 1, column (d).				2		0 321409
3	A verage distribution ratio for			<u> </u>	_		0 321 103
	the number of years the foun				3		0 064282
4	Enter the net value of noncha	arıtable-use assets for 2009	from Part X, line	5	4		33,983,247
5	Multiply line 4 by line 3				5		2,184,51
6	Enter 1% of net investment i	ncome (1% of Part I, line 2	7b)	[6		5,705
7	Add lines 5 and 6				7		2,190,216
_	Fating and Control of the Control	form Dank WIT 1					2 222 2 : -
8	Enter qualifying distributions If line 8 is equal to or greater the Part VI instructions on n	than line 7 , check the box i			8 part u	sıng a 1% tax	3,098,245 crate See

	990-PF (2009)						age 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b			e 18 of the	instruction	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here T and er						
	Date of ruling or determination letter (attach copy of lettinstructions)	ter if neo	cessary–see				
Ь							5,705
	here Fand enter 1% of Part I, line 27b						
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter		,				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	Others en	ter -0-)	2			0
3	Add lines 1 and 2			3			5,705
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	Others e	nter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or le	ss, ente	r-0	5			5,705
6	C redits/P ayments						
а	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	58,537				
b	Exempt foreign organizations—tax withheld at source	. 6b					
c	Tax paid with application for extension of time to file (Form 8868)	6с					
d	Backup withholding erroneously withheld	6d					
7	Total credits and payments Add lines 6a through 6d			7		5	8,537
8	Enter any penalty for underpayment of estimated tax. Check here \prod if Fo	rm 2220	ıs attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ow	ed	a a a a a 🖭	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the air	mount ov	verpaid 🟲	10		5	2,832
11	Enter the amount of line 10 to be Credited to 2010 estimated tax	52,832	Ref unded 🟲	11			0
Par	t VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, s	state, or	local legislation or d	ıd		Yes	No
	· · · · ·				1a		No
Ь	Did it spend more than \$100 during the year (either directly or indirectly)						
	the instructions for definition)?				. <u>1b</u>		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activity	ties and d	copies of any material	S			
	published or distributed by the foundation in connection with the activities				1c		
	c Did the foundation file Form 1120-POL for this year?						No
a	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation (2) On foundation managers (5)						
•	Enter the reimbursement (if any) paid by the foundation during the year for			nocod			
-	on foundation managers \blacktriangleright \$0	politica	rexpenditure tax imp	Joseu			
2	Has the foundation engaged in any activities that have not previously bee	n renorte	ed to the IRS?		2		No
_	If "Yes," attach a detailed description of the activities	пторопсо	.a to the INC		` -		
3	Has the foundation made any changes, not previously reported to the IRS.	. in its ac	overning instrument.	articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a	,	,		з		No
4a	Did the foundation have unrelated business gross income of \$1,000 or mo				. 4a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?					1	
5	Was there a liquidation, termination, dissolution, or substantial contractio						No
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through	h 4945)	satisfied either				
	By language in the governing instrument, or						
	ullet By state legislation that effectively amends the governing instrument s	o that n	o mandatory directio	ns			
	that conflict with the state law remain in the governing instrument? $\ .$				6	Yes	
7	Did the foundation have at least $$5,000$ in assets at any time during the year? If "Yes," co	mplete Pa	rt II, col (c), and Part X\	/	7	Yes	
8a	Enter the states to which the foundation reports or with which it is register	ed (see	page 19 of the				
	ınstructions) ▶MA, MI				-		
b	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 .		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within		_				
	or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 200	-		(IV on			
	page 27)? If "Yes," complete Part XIV				. 9	1	No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a sch	neaule listii	rig their names and addre	esses	10	<u> </u>	No

Pai	rt 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 page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►IACOCCAFOUNDATION ORG			
14	The books are in care of ▶The Foundation Telephone no ▶(617) 267-	7747	
	Located at ▶867 BOYLSTON STREET 6TH FLOOR BOSTON MA ZIP+4 ▶02116			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			► F
	and enter the amount of tax-exempt interest received or accrued during the year			·
Pai	rt VIII-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
1a	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundatıon 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 🔽 No			
ь	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)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
c	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?	1c		No
2	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))			
а	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?			
	If "Yes," list the years 🕨 20, 20, 20			
ь	Are there any years listed in 2a for which the foundation is not 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 page 20 of the instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
ь	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)	3ь		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
ь	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?	4b		No

5a	During the year did the foundation	рау	or incur any amoun	t to							
	(1) Carry on propaganda, or other	WISE	attempt to influenc	e leg	ıslatıon (section 49	45(e))? T Yes F	No			
	(2) Influence the outcome of any specific public election (see section 4955), or 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 🔽 No										
	(4) Provide a grant to an organization other than a charitable, etc., organization described										
	ın section 509(a)(1), (2), or (3), o	r section 4940(d)(2)? (s	ee page 22 of the in	struc	tions) 🗆 Yes 🥫	No			
	(5) Provide for any purpose other	thar	n religious, charitabl	e,sc	ientific, literary, or						
	educational purposes, or for t	he p	evention of cruelty	to ch	ıldren or anımals?.		Yes 🗟	No			
b	If any answer is "Yes" to 5a(1)-(5), d	d any of the transac	tions	fail to qualify under	the	exceptions described in				
	Regulations section 53 4945 or i	nac	urrent notice regard	lıng d	ısaster assıstance	(see	page 22 of the instruction	ns)?	5b		
	Organizations relying on a curren	t not	ice regarding disast	eras	sistance check here	∍		_			
c	If the answer is "Yes" to question	5 a (1), does the foundat	ion cl	laım exemptıon from	the					
	tax because it maintained expend	iture	responsibility for th	ne gra	ant [,]		T Yes [_ No			
	If "Yes," attach the statement requi	red i	by Regulations sectio	n 53	4945-5(d)						
6a	Did the foundation, during the yea	r, re	ceive any funds, dire	ectly	or indirectly, to pay						
	premiums on a personal benefit co	ontra	nct?				TYes 🗟	No			
b	Did the foundation, during the yea	r, pa	y premiums, directl	yorı	ndırectly, on a perso	nal b	penefit contract?	•	6b		No
	If "Yes" to 6b, file Form 8870										
7a	At any time during the tax year, w	as t	he foundation a part	y to a	prohibited tax shel	tertr	ansaction? Yes	No			
ь	If yes, did the foundation receive								7b		
	Information About						n Managers, Highly		Emp	loye	es,
Pa	and Contractors		•		,				•		
1	List all officers, directors, trustees	, fo	undation managers a	and t	heir compensation (see p	page 22 of the instruction	ns).			
		(b)	Title, and average		C) Compensation		(d) Contributions to	(e) l	Expens	se acc	ount,
	(a) Name and address	l d	hours per week evoted to position	(1	f not paid, enter -0-)		nployee benefit plans deferred compensation	ot	her all	owanc	es
See	A ddıtıonal Data Table				- /						
2	Compensation of five highest-paid If none, enter "NONE."	emį	oloyees (other than	t hose	e included on line 1–	-see	page 23 of the instruction	ons).			
	II liolle, eliter NONE.						(d) Contributions to	I			
(a)	Name and address of each employ	ee	(b) Title, and aver hours per week		(a) Componentia	_	employee benefit	(e)	Expen:	se acc	ount,
	paid more than \$50,000		devoted to positi		(c) Compensation	'''	plans and deferred	01	theral	lowanc	es
	6 1 51 11						compensation				
	nfer L Phillips		operations manage 40 00	r	/8	,333	30,791				0
	boylston street on,MA 02116										
	na Saken		executive assistan	+	60	,177	15,283				0
			40 00			,1//	13,263				U
	boylston street on,MA 02116										
	,										
			1								
			-								
T-4-			+					1			_

Total. Add lines 1 through 3.

Part VIII Information About Officers, Directors, T and Contractors (continued)	rustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional serv	vices (see page 23 of the instructions). If none, o	enter "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ASPIRIANT	INVESTMENT MANAGEMENT	81,250
101 SECOND STREET SAN FRANCISCO,CA 94105		,
·		
	1	
	1	
Total number of others receiving over \$50,000 for professional serv	/ices	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Incli organizations and other beneficiaries served, conferences convened, research pape		Expenses
1	,	
2		
]
3		1
4		-
		1
Part IX-B Summary of Program-Related Investme	<u> </u>	
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	A mount
*		1
2		<u> </u> -
		1
All other program-related investments See page 24 of the instru	ctions	
3		-
		†

Form 990-F	PF (2009)
Part X	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations,
	see page 24 of the instructions.)

	see page 24 of the instructions.)		T
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	29,104,674
Ь	A verage of monthly cash balances	1b	136,999
c	Fair market value of all other assets (see page 24 of the instructions)	1c	5,259,085
d	Total (add lines 1a, b, and c)	1d	34,500,758
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	0
3	Subtract line 2 from line 1d	3	34,500,758
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	517,511
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V , line 4	5	33,983,247
6	Minimum investment return. Enter 5% of line 5	6	1,699,162
Par	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(, ,	, ,
	foundations and certain foreign organizations check here 🕨 📘 and do not complete t	his pa	
1	Minimum investment return from Part X, line 6	1	1,699,162
2a	Tax on investment income for 2009 from Part VI, line 5		
Ь	Income tax for 2009 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	5,705
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,693,457
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	1,693,457
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	1,693,457
Dar	Qualifying Distributions (see page 25 of the instructions)		
			T
1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	3,098,245
Ь	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,098,245
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	5,705
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,092,540
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	ner the	foundation qualifies for

For	n 990-PF (2009)				Page 9
P	art XIII Undistributed Income (see page		ons)	Ţ	
		(a)	(b)	(c)	(d)
	Distributable assessment for 2000 from Bank VI. line 7	Corpus	Years prior to 2008	2008	2009
	Distributable amount for 2009 from Part XI, line 7				1,033,437
	Undistributed income, if any, as of the end of 2008 Enter amount for 2008 only			0	
	· • • • • • • • • • • • • • • • • • • •		0	•	
b	Total for prior years 20, 20, 20 Excess distributions carryover, if any, to 2009				
	From 2004				
b	From 2005				
_	From 2006				
d	From 2007				
e	From 2008				
f	Total of lines 3a through e	3,372,017			
	Qualifying distributions for 2009 from Part				
	XII, line 4 🕨 \$3,098,245				
а	Applied to 2008, but not more than line 2a			0	
ь	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)		0		
c	Treated as distributions out of corpus (Election	0			
	required—see page 26 of the instructions)				1,693,457
	Applied to 2009 distributable amount	1,404,788			1,093,437
	Remaining amount distributed out of corpus	1,404,760			0
5	Excess distributions carryover applied to 2009	0			
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
Ū	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,776,805			
ь	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 page 27 of the instructions		0		
e	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount—see page 27			0	
	of the instructions			-	
Т	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2010				0
7	A mounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27	0			
	of the instructions)				
•	applied on line 5 or line 7 (see page 27 of the				
	instructions)	663,593			
9	Excess distributions carryover to 2010.	,			
	Subtract lines 7 and 8 from line 6a	4,113,212			
	Analysis of line 9				
_	Excess from 2005				
Ь	Excess from 2006				
	Excess from 2007				
d	Excess from 2008				
e	Excess from 2009 1,404,788				

P	art XIV Private Operating Foun	ndations (see p	page 27 of the in	structions and Pa	rt VII-A, questior	า 9)
1a	If the foundation has received a ruling or d					
	foundation, and the ruling is effective for 2		_			
	Check box to indicate whether the organiz		perating foundation		on l 4942(j)(3) o	or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	yearlisted					
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly					
	for active conduct of exempt activities					
_	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)			1		
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
c	"Support" alternative test—enter					
	(1) Total support other than gross					
	<pre>investment income (interest, dividends, rents, payments</pre>					
	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					
Pa	rt XV Supplementary Information	on (Complete t	his part only it	f the organizati	on had \$5,000	or more in
	assets at any time during	the year—see				
1	Information Regarding Foundation Manag List any managers of the foundation who had		are than 20% of the	total contributions	esserved by the four	dation
а	before the close of any tax year (but only i					luation
	Lido A Iacocca					
b	List any managers of the foundation who of				lly large portion of t	he
	ownership of a partnership or other entity)	or which the found	ation has a 10% o	r greater interest		
2	Information Regarding Contribution, Gran	t, Gift, Loan, Schol	arship, etc., Progra	ıms:		
	Check here F if the foundation only ma	kes contributions t	to preselected cha	rıtable organızatıons	and does not acce	pt
	unsolicited requests for funds If the found	atıon makes gıfts,	grants, etc (see p	age 28 of the instru	ctions) to individua	ls or organizations
	under other conditions, complete items 2a	, b, c, and d				
а	The name, address, and telephone numbe	r of the person to v	vnom applications :	snould be addressed	1	
	KATHRYN IACOCCA HENTZ 867 boylston street 6th floor					
	boston, MA 02116					
	(617) 267-7747					
b	The form in which applications should be s	submitted and info	rmation and materi	als they should incl	ude	
	GRANT APPLICATION AT WWW IACOC	CAFOUNDATION	O RG			
c	Any submission deadlines					
	there are no submission deadlines					
d	Any restrictions or limitations on awards,	such as by geogra	iphical areas, chari	table fields, kinds o	f institutions, or oth	er
	factors					
	PRIMARILY CONCERNED WITH DIABET	ES RESEARCH -	RELATED ACTIVI	TIES		

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid	During the Year or Ap	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table				
Total				2,528,967
b Approved for future payment Marian High School 7225 Lahser Road Bloomfield Hills, MI 48301		public Charity		30,000
The Ronald Reagan Presidential Foundation 40 Presidential Drive Suite 200 Simi Valley, CA 93065		public Charity	unrestricted	25,000
St Margaret Episcopal School 31641 LaNovia San Juan Capistrano, CA 92675		public Charity	unrestricted	500,000
Total				555,000

Form 990-PF (2009) Part XVI-A Analysis of Income-Produc	ing Activitio				Page 1 2	
•	nter gross amounts unless otherwise indicated Unrelated business income				(e)	
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemption function income (See page 28 of	
a			14	-313,109		
b c d e 12 Subtotal Add columns (b), (d), and (e). 13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions on page 2 Part XVI-B Relationship of Activities to the accomplishment of the organization page 28 of the instructions)	28 to verify calc the Accom ich income is re	ulations) plishment of E ported in column(Xempt Purpos e) of Part XVI-A co	es ontributed importa	543,760 ntly to	

Form 99	0-PF (2	009)									Pa	ge 13
Part >	XVII	Information Re Noncharitable				l Transa	ctions a	nd Relat	ionships With			
1 Did th	ne organiz	ation directly or indirectly				other organiz	zatıon descri	bed in section	1		Yes	No
501(c) of the (Code (other than section	501(c)(3)	organızatı	ons) or in section 527	7, relating to	political orga	nızatıons?				
a Tran	sfers fro	om the reporting four	ndation to	o a nonc	harıtable exempt	organizatio	on of					
(1)	Cash.									. 1a(1)		No
(2)	O ther a	ssets								1a(2)		No
b Othe	er transa	actions										
(1)	Sales o	fassets to a noncha	rıtable e:	xempt o	rganızatıon					. 1b(1)		No
(2)	Purchas	ses of assets from a	nonchari	table ex	empt organizatio	n				1b(2)		No
(3)	Rental	of facilities, equipme	nt, or oth	nerasse	ts					. 1b(3)		No
(4)	Reımbu	rsement arrangemen	nts							. 1b(4)		No
(5)	Loans o	r Ioan guarantees.								. 1b(5)		No
(6) P	erforma	ance of services or m	nembersl	nıp or fui	ndraising solicita	tions				. 1b(6)		No
c Shar	ing of fa	cılıtıes, equipment, i	mailing li	sts, oth	er assets, or paid	lemployee	s			. 1c		No
of the	e goods	r to any of the above , other assets, or se action or sharing arra	rvices gi angemen	ven by t t, show	he reporting foun in column (d) the	dation Iftl value ofth	ne foundat	ion receive	ed less than fair m	arket value		
(a) Line N	No ((b) Amount involved	(c) Nam	e of nonch	naritable exempt orga	anization	(d) Descri	iption of trans	sfers, transactions, and	d sharing arra	ingemer	nts
desc	rıbed ın es," con	ation directly or inding section 501(c) of the section 501 of the section section of the section	ne Code (schedule	other th	an section 501(c		section 57				es N	, No
	the be	penalties of perjury, st of my knowledge a on all information of ****	and belief	f, it is tri	ue, correct, and c	omplete D	eclaration		-			
	Sig	nature of officer or to	rustee				Date		Title			
Sign Here	er's nly	Preparer's THOMAS WASHBURN CPA			Date	10-09-13	Check if self- employed ▶	Preparer' Identifyin number (s Signature 30 of the I	g see son pa	_		
	Paid Preparer's Use Only	Firm's name (or you if self-employed),	urs	ALEXA	NDER ARONSO	N FINNING	 & CO PC	:	EIN ►			
		address, and ZIP c	ode	21 EA	ST MAIN STREE	Т			-	1266 615		
				\ME C T !	3ORO,MA 0158	. 1			Phone no (508) 366-9100			
1				VV □ ⊃ [JURU, MA UIS8	· т			i			

Schedule B Schedule of Contributors		OMB No 1545-0047						
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	990-PF) ► Attach to Form 990, 990-EZ, or 990-PF. 20							
Name of organization IACOCCA FAMILY FOUNDATION	DN	Employer id	entification number					
		38-607115	4					
Organization type (ch	eck 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	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							
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more ny one contributor. Complete Parts I and II	(in money or						
under sections s	1(c)(3) organization filing Form 990 or 990-EZ, that met the 33 ¹ /3% support test of the 609(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, 000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, lin	ar, a contribut						
during the year,	1(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any oraggregate contributions of more than \$1,000 for use exclusively for religious, charitar, or educational purposes, or the prevention of cruelty to children or animals. Complete	able,						
during the year, not aggregate to the year for an applies to this or	1(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any organization for use <i>exclusively</i> for religious, charitable, etc., purposes, but these compression of this box is checked, enter here the total contributions that were exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless ganization because it received nonexclusively religious, charitable, etc., contributions or the contributions of the parts unless ganization because it received nonexclusively religious, charitable, etc., contributions or the contributions of the parts unless ganization because it received nonexclusively religious, charitable, etc., contributions or the contributions of the parts unless ganization because it received nonexclusively religious, charitable, etc., contributions or the contributions of the parts unless ganization because it received nonexclusively religious, charitable, etc., contributions or the contributions of the parts unless ganization because it received nonexclusively religious, charitable, etc., contributions or the contributions of the parts unless ganization because it received nonexclusively religious, charitable, etc., contributions or the contributions of the parts unless ganization because it received nonexclusively religious, charitable, etc., contributions or the contributions of the parts unless ganization because it received nonexclusively religious, charitable, etc., contributions or the contributions of th	ontributions d received dur ss the Gener s of \$5,000 or	lid ing al Rule · more					
990-EZ, or 990-PF), but	on that is not covered by the General Rule and/or the Special Rules does not file Schoot must answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-PF, to certify that it does not meet the filing requirements of Schedu	ng of its						

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491264004010

Name of organization IACOCCA FAMILY FOUNDATION

Employer identification number

38-6071154

Part I	Contributors (see Instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	IACOCCA CLUT FBO ARIANNA ASSAD C/O COMERICA DETROIT, MI 48226	\$ \$	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
2	IACOCCA CLUT FBO PARKER LEE HENTZ C/O COMERICA BANK DETROIT, MI 48226	\$ \$ 	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
3	LEE IACCOCA 867 BOYLSTON STREET BOSTON, MA 02116	\$251,335	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 Payroll Payroll
(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

Part II Noncash Property (see Instructions)

Name of organization IACOCCA FAMILY FOUNDATION Employer identification number

38-6071154

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	Apple Stock	\$ <u>251,335</u>	2009-12-31
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization IACOCCA FAMILY FOUNDATION Employer identification number

38-6071154

ag Fo	cclusively religious, charitable, etc., inc ggregating more than \$1,000 for the ye or organizations completing Part III, enter the ontributions of \$1,000 or less for the year	ar. (Complete columns (a) through total of exclusively religious, char	(e) and the follow ing line entry) itable, etc.,
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rela	tionship of transferor to transferee
n) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rela	tionship of transferor to transferee
a) No. From Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rela	tionship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ _	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rela	tionship of transferor to transferee

Software ID: 09000028

Software Version: 2009.04020

EIN: 38-6071154

Name: IACOCCA FAMILY FOUNDATION

Form 990PF Part VIII Line 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
Lido A Iacocca	Chairman	0	0	0
867 Boylston Street 6th Floor Boston, MA 02116	3 00			
Kathryn Iacocca Hentz	President	208,333	31,152	0
867 Boylston Street 6th Floor Boston, MA 02116	40 00			
JOHN GERAce	Trustee 2 00	0	0	0
867 Boylston Street 6th Floor Boston, MA 02116				
edward bousa	Trustee 1 00	0	0	0
867 Boylston Street 6th Floor Boston, MA 02116				
Louis E Lataif	secretary 1 00	0	0	0
867 Boylston Street 6th Floor Boston, MA 02116				
Lia Iacocca-Assad	Trustee	0	0	0
867 Boylston Street 6th Floor Boston, MA 02116	1 00			
Desmond Heathwood	Trustee	0	0	0
867 Boylston Street 6th Floor Boston, MA 02116	1 00			
ken anderson	trustee	0	0	0
867 Boylston Street 6th Floor boston, MA 02116	1 00			
ginny king	trustee	0	0	0
867 Boylston Street 6th Floor boston, MA 02116	1 00			

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Baylor College of MedicineOne Baylor Place Houston,TX 77090		public Charity	unrestricted	300,000
The University of Vermont208 South Park Drive Colchester, VT 05446		public Charity	unrestricted	99,999
University of California San Francisco 513 Parnassus Avenue San Francisco,CA 94143		public Charity	unrestricted	100,000
Medical College of Wisconsin8701 Watertown Plank Road Milwaukee, WI 53226		public Charity	unrestricted	78,190
Dana-Farber Cancer Institute44 Binney Street Boston, MA 02115		public Charity	unrestricted	169,950
Los Angeles Children's Hospital4650 Sunset Blvd MS 35 Los Angeles,CA 90027		public Charity	unrestricted	125,000
Mt Sınaı School of MedicineOne Gustave L Levy Place New York,NY 10029		public Charity	unrestricted	125,000
University of Pennsylvania415 Curie Blvd Philadelphia,PA 19105		public Charity	unrestricted	137,500
Mayo Clinic Rochester200 First Street SW Rochester, MN 55905		public Charity	unrestricted	252,628
University of Minnesota Medical SchoolMMC 280 420 Delaware Street SE Minneapolis, MN 55455		public Charity	unrestricted	50,000
St John's High School378 Main Street Shrewsbury, MA 01545		public Charity	unrestricted	5,000
Lehigh University111 Research Drive Bethleham,PA 18015		public Charity	Restricted for global village	19,500
St Sebastian's School1191 Greendale Avenue Needham,MA 02492		public Charity	Unrestricted	250,000
St Joseph Parish1382 Highland Avenue Needham,MA 02492		public Charity	unrestricted	25,000
Dana Hall School45 Dana Road PO Box 9010 Wellesley,MA 024829010		public Charity	unrestricted	25,000
Total				2,528,967

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Dover and sherborn Education Fund PO Box 421 Dover, MA 02030		public Charity	unrestricted	5,000
Nantucket Boys and Girls ClubPO Box 269 Nantucket, MA 02554		public Charity	unrestricted	500
The Nantucket School of Design and the ArtsBox 1848 Nantucket Island, MA 02554		public Charity	unrestricted	500
Saint Francis Chapel800 Boylston Street Suite 1001 Boston,MA 02199		public Charity	unrestricted	500
Saint Sebastian's School1191 Greendale Avenue Needham,MA 02492		public Charity	unrestricted	25,000
Boston POPS on Nantucket57 Prospect Street Nantucket Island, MA 02554		public Charity	unrestricted	15,000
AIGA164 Fifth Avenue New York,NY 10010		public Charity	unrestricted	1,200
Cranbrook Schools 520 Lone Pine Road PO Box 801 Bloomfield Hills, MI 483030801		public Charity	Unrestricted	10,000
ALS- The Pinstripes FundPO Box 32861 Charlotte,NC 28232		public Charity	unrestricted	2,500
Care for Vrindavan135 Hathaway Rd Schuylerville,NY 12871		public Charity	unrestricted	5,000
Children First4350 Von Karman Fourth Floor Newport Beach, CA 92660		public Charity	unrestricted	2,500
Desert Cancer Foundation45480 Portola Avenue Palm desert, CA 92260		public Charity	unrestricted	1,000
Hoag Hospital FoundationPO Box 6100 Newport Beach, CA 92658		public Charity	unrestricted	7,500
Human OptionsPO Box 53745 Irvine,CA 92619		public Charity	unrestricted	5,000
Levantine Cultural Center5998 W Pico Blvd Los Angeles, CA 90035		public Charity	unrestricted	1,000
Total	·			2,528,967

frecipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient public Charity public Charity public Charity public Charity	Purpose of grant or contribution unrestricted unrestricted unrestricted unrestricted	10,000 1,000 25,000 20,000
	public Charity public Charity public Charity public Charity	unrestricted unrestricted unrestricted	1,000 25,000 20,000
	public Charity public Charity public Charity	unrestricted unrestricted unrestricted	1,000 25,000 20,000
	public Charity public Charity public Charity	unrestricted unrestricted unrestricted	1,000 25,000 20,000
	public Charity public Charity	unrestricted	25,000
	public Charity	unrestricted	20,000
	public Charity	unrestricted	5,000
	public Charity	unrestricted	25,000
	public Charity	unrestricted	5,000
	public Charity	unrestricted	5,000
	public Charity	unrestricted	2,500
	public Charity	unrestricted	7,500
	public Charity	unrestricted	1,000
	public Charity	unrestricted	500
	public Charity	unrestricted	4,000
	public Charity	unrestricted	2,500
	public Charity	unrestricted	2,500
		public Charity public Charity public Charity public Charity public Charity public Charity public Charity	public Charity unrestricted public Charity unrestricted

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
	show any relationship to any foundation manager	status of	contribution	
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Make it Right Foundation1055 St Charles Ave Suite 500 New Orleans, LA 70158		public Charity	unrestricted	7,500
Los Angeles Regional Food Bank1734 E 41st Street Los Angeles, CA 90058		public Charity	unrestricted	2,500
Planet Hope4335 Van Nuys Blvd 4335 Sherman Oaks,CA 91403		public Charity	unrestricted	14,500
Canyon Club Inc20456 Laguna Canyon Road Laguna Beach, CA 92651		public Charity	unrestricted	2,500
Promises Foundation11340 West Olympic Blvd Suite 242 Los Angeles, CA 90064		public Charity	unrestricted	1,500
Sweet Relief4952 Warner Avenue Suite 100 Huntington Beach,CA 92649		public Charity	unrestricted	2,500
Believe in Sobriety30025 Alicia Parkway 195 Laguna Niguel,CA 93677		public Charity	unrestricted	3,000
Marıan Hıgh School7225 Lahser Road Bloomfield Hılls,MI 48301		public Charity	unrestricted	10,000
Yellowstone Womens First Step House Inc154 East Bay Street Costa Mesa,CA 92627		public Charity	unrestricted	6,000
Betty Ford Center39000 Bob Hope Drive Rancho Mirage, CA 92270		public Charity	unrestricted	10,000
Candlelighter Childhood Cancer Family Alliance8323 Southwest Freeway Suite 435 Houston,TX 77074		public Charity	unrestricted	5,000
Concern Foundation8383 Wilshire Blvd Suite 337 Beverly Hills, CA 90211		public Charity	unrestricted	6,000
Forgotten Harvest21800 Greenfield Road Oak Park,MI 48237		public Charity	unrestricted	1,000
Hospice of Palm Beach County5300 E Avenue West Palm Beach,FL 33407		public Charity	unrestricted	10,000
Humane Society of Pagosa Springs 269 Pagosa St PO Box 2330 Pagosa Springs, CO 81147		public Charity	unrestricted	5,000
Total				2,528,967

roriii 990PF Part XV Lille 3 - Gra	ants and contributions	raid During t	ne rear or Approved for i	uture Payment
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (nome of business)	or substantial contributor			
a Paid during the year				
The Jewish Federation6505 Wilshire Blvd Suite 1050 Los Angeles,CA 90048		public Charity	unrestricted	10,000
UCLA Jules Stein Eye Institute400 Stein Plaza UCLA box 957000 Los Angeles, CA 90095		public Charity	unrestricted	10,000
UCLA Jules Stein Eye Institute100 Stein Plaza Los Angeles,CA 900957000		public Charity	unrestricted	10,000
National Italian American Foundation 1860 19th St NW Washington, DC 20009		public Charity	unrestricted	1,000
New York-Presbyterian525 East 68th Street Box 123 New York,NY 10065		public Charity	unrestricted	10,000
Oral Roberts Whole Person Endowed Scholarship Fund1005 Granville Dr Newport Beach,RI 92660		public Charity	unrestricted	10,000
St Hugo of the Hills22515 Opdyke Road Bloomfeild Hills, MI 48304		public Charity	unrestricted	1,000
Starkey Hearing Foundation6700 Washington Avenue South Eden Prairie, MN 55344		public Charity	unrestricted	10,000
Sinai Medical Center8700 Beverly Blvd Suite 2416 Los Angeles, CA 90048		public Charity	unrestricted	5,000
The Brent Shapiro Foundation10250 Constellation Blvd 18th FL Los Angeles, CA 90067		public Charity	unrestricted	5,000
Promises Foundation11340 w Olympic Blvd 242 Los Angeles,CA 90064		public Charity	unrestricted	10,000
National MS Society2440 SSepulueda Blvd115 Los Angeles,CA 90064		public Charity	unrestricted	1,000
Small Army for a Cure20 Newbury Street 4th Floor Boston,MA 02116		public Charity	unrestricted	1,000
St George Catholic Church4980 Heege Rd St Loius,MO 63123		public Charity	unrestricted	500
National Charity LeaguePO Box 8423 Calabasas,CA 91372		public Charity	unrestricted	500
Total				2,528,967

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Planet Hope8205 Santa Monica Boulevard Los Angeles, CA 90046		public Charity	Restricted for Camp Hope	7,500
UCLA Jules Stein Eye Institute100 Stein Plaza Los Angeles, CA 90095		public Charity	unrestricted	10,000
The Ronald Reagan Presidential Foundation40 Presidential Drive Suite 200 Simi Valley,CA 93065		public Charity	unrestricted	25,000
Dana Hall School45 Dana Road Wellesley, MA 02482		public Charity	Unrestricted	250,000
Joslin Diabetes CenterOne Joslin Place Boston,MA 02116		public Charity	unrestricted	50,000
Joslin Diabetes CenterOne Joslin Place Boston,MA 02116		public Charity	unrestricted	50,000
Children's Hospital BostonPO Box 414413 Boston,MA 02241		public Charity	unrestricted	3,000
Total				2,528,967

TY 2009 Accounting Fees Schedule

Name: IACOCCA FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
aCCOUNTING	7,100	1,065		6,035

TY 2009 Investments Corporate Stock Schedule

Name: IACOCCA FAMILY FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Publicly Traded Securities	252,878	252,878
Privately held - Bayhill	3,449,437	3,449,437

TY 2009 Investments - Other Schedule

Name: IACOCCA FAMILY FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Mutual Funds	FMV	30,460,734	30,460,734
Cash held for investments	FMV	517,821	517,821

TY 2009 Land, Etc. Schedule

Name: IACOCCA FAMILY FOUNDATION

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Equipment	62,996	18,065	44,931	44,931

TY 2009 Legal Fees Schedule

Name: IACOCCA FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
IEGAL	254	38		216

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TY 2009 Other Assets Schedule

Name: IACOCCA FAMILY FOUNDATION

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
csv life insurance policy	1,692,888	1,759,648	1,759,648

DLN: 93491264004010

TY 2009 Other Expenses Schedule

Name: IACOCCA FAMILY FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SUPPLIES	6,936	1,040		5,896
tELEPHONE	8,017	1,203		6,814
pOSTAGE, SHIPPING & DELIVERY	3,635	545		3,090
INSURANCE	33,815	5,072		28,743
oUTSIDE COMPUTER SERVICES	8,398	1,260		7,138
pAYROLL PROCESSING FEES	2,385	358		2,027
STORAGE	5,435	815		4,620
mEALS	6,562	984		5,578
rEPAIRS	190	29		161
mISCELLANEOUS	358	54		304
Bank service charges	313	47		266
Membership dues	9,938	1,491		8,447

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TY 2009 Other Increases Schedule

Name: IACOCCA FAMILY FOUNDATION

Description	Amount
uNREALIZED GAIN	7,508,409

TY 2009 Other Professional Fees Schedule

Name: IACOCCA FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
oTHER	24,310	3,647		20,663
Investment	94,451	94,451		0
bookkeeping	2,600	390		2,210

TY 2009 Taxes Schedule

Name: IACOCCA FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
payroll taxes	23,685	3,553		20,132
Real estate taxes	350	0		350