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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 2009

For ca	alendar	year 2009, or	r tax year begii	nning			, 2009,	and endi	ing			, 20
		hat apply:	Initial retur			nitial return o	of a former p	ublic chai	rity			Final return
			Amended r	eturn		Addres	s change			lame change		
		Name of found	dation						- 1	A Employer ide	entifica	ation number
Use (the IRS	THE ANSAI	RY FOUNDAT	ION								
la	bel.	C/O CYRUS	S ANSARY								52-1	1308585
	erwise,	Number and s	treet (or P O box	number if i	mail is not d	elivered to street	address)	Room/su	ııte	B Telephone numb	er (se e p	page 10 of the instructions)
•	rint											
	type. Specific		DA METRO C		, SUIT	'E 700					(301	1) 280-5929
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			, MD 20814									ons meeting the
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	Section 4	1947(a)(1) none	exempt charitable			er taxable pr		tion		E If private four	dation	status was terminated
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of y	year (fro	m Part II, col	(c), line	∐_ Ot	her (spec	cify)				F if the foundat	100 15 17	n a 60-month termination _
16) ▶ \$	213	2,434.	(Part I,	column (d	d) must be on	cash basis.)			under section	507(b)(1)(B), check here .
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			lumns (b), (c), and equal the amounts		èxpe	nses per	(b) Net inve		(c) Adjusted net income 	'	for charitable purposes
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2	Check	If the for	undation is not requ	urred to				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,7			<u></u>
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7			ne (from Part IV, I	line 2) .						1 50 -		
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10 a	and allo b Less: C c Gross	wances • • • • • ost of goods sold profit or (loss) (a	attach schedule)					35 1 -	-77 4	17-1-18-5	pi.	
10 a	and allo b Less: C c Gross Other	wances · · · · · · ost of goods sold profit or (loss) (ancome (attach	attach schedule) schedule)			250,000.		35 1 -	-74		Fig.	
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10 a	and allo b Less: C c Gross Other Total. Compe	wances of ost of goods sold profit or (loss) (income (attach add lines 1 throusation of officers	attach schedule) schedule) ough 11 directors, trustees	etc		250,000		35, 1 -	.7M		p-1/2	
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10 a l l l l l l l l l l l l l l l l l l	and allo b Less: C c Gross Other Total. Compe Other Pensic a Legal i b Accou c Other Interes Taxes (ost of goods sold profit or (loss) (income (attach Add lines 1 through the constitution of officers employed salan on plans, employed (attach schedule) (income (attach schedu	attach schedule) schedule) schedule) sugh 11 directors, trustees approximately yee benefits dedule) ch schedule) as (attach schedule)	##C FD FD FD FD FD FD FD F	70	250,000.		2,472.	-704			
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10 a l l l l l l l l l l l l l l l l l l	and alide b Less: C c Gross Other Total. Compe Other Pensic a Legal i b Accou c Other Interes Taxes (Depree Occup Travel	wances ost of goods sold profit or (loss) (income (attach Add lines 1 thro nsation of officers employed salan on plans, employ fees (attach attach schedule) (income ciation (attach siden), conferences, a	attach schedule) schedule) ough 11 directors, trustees, each and values yee benefits dedule) ch schedule) as (attach schedule) schedule) and de	ADIO (Le) .*	70	250,000.		2,472.	- 174			
10 a l l l l l l l l l l l l l l l l l l	and alide b Less: C c Gross Other Total. Compe Other Pensic a Legal i b Accou c Other Interes Taxes (Depree Occup Travel Printin	ost of goods sold profit or (loss) (ancome (attach Add lines 1 through the constitution of officers employed salar on plans, employed salar professional lees (attach schedule) (attach schedule	attach schedule) schedule) ough 11 directors, trustees, let and vabes 1 yee benefits ledule) ch schedule) as (attach schedule) schedule) and de and meetings ons	ACLOS Population	70	250,000.		2,472.	- 178			
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For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.* ATCH 2 JSA 9E1410 1 0000 024500 649M 5/7/2010 2:26:15 PM V 09-6.1 0172

Form 990-PF (2009)

PAGE 1

Э	art li	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
			amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beam	ing	2,964.	212,434.	212,434.
			cash investments			
į	3	Accounts receivable				
		Less: allowance for dou	btful accounts ▶			
	4	Pledges receivable				
i		Less: allowance for dou	btful accounts ▶			
	5					
	-	• • •	60			
	6		fficers, directors, trustees, and other	1		
ļ			ich schedule) (see page 16 of the instructions)			,
			eceivable (attach schedule)			
			btful accounts ▶			
ts			e		<u></u>	
Assets			eferred charges			
As			e government obligations (attach schedule)			
ļ			stock (attach schedule) ATCH 3	141,000.	141,000.	2,600
	С	Investments - corporate	bonds (attach schedule)			
	11	Investments - land, buildings and equipment; basis	s.	2 7 7 7 7	1, 5, 1,	
		Less: accumulated deprecia (attach schedule)	ation >			
	12	Investments medaces	laana			
	13	Investments - other (atta	ach schedule)			
	14	Land, buildings, and	>	7 7 1 1 1 1		Extra gran
		Less accumulated deprecia	ition] ' ''	- 2/ 1	
	15	(attach schedule) Other assets (describe)		·····	
	16		pleted by all filers - see the			
			age 1, item I)	143,964.	353,434.	215,034
_			ccrued expenses		3337.31.	***************************************
	18					
labilities			• • • • • • • • • • • • • • • • • • • •			
					***	7.5
를			rs, trustees, and other disqualified persons			- 여러워드
E			etes payable (attach schedule)		····	
	22	Other Habilities (describe	· -)			
	23	Total limbulities (odd hoo	17 thereigh 221			
-			s 17 through 22)			
			low SFAS 117, check here			
8		•	24 through 26 and lines 30 and 31.			
Š						\$P\$\$P\$\$P\$100000000000000000000000000000
lan	25	Temporanly restricted .				
00	26	Permanently restricted .				
Balanc			not follow SFAS 117,			
교		check here and com	plete lines 27 through 31. ▶ 🔀			
Balances	27	Capital stock, trust princ	cipal, or current funds			
əts	28	Paid-in or capital surplus, or	land, bldg , and equipment fund			37 7 6 4 7 5 7
SS	29	Retained earnings, accumu	ulated income, endowment, or other funds	143,964.	353,434.	
†	30	Total net assets or fund	i balances (see page 17 of the			100
å		instructions)		143,964.	353,434.	
		Total liabilities and net	assets/fund balances (see page 17			
l		of the instructions)		143,964.	353,434.	
P	art II	Analysis of Cha	anges in Net Assets or Fund		333, 1311	*
			lances at beginning of year - Part II		Lagree with	
•	end-	of-vear figure reporter	on prior year's return)	, sommital, mic so (musi	Cagroo Willi	143,964
2	Enter	r amount from Part I, I	lina 27a		1 _	209,470
			ad in line 2 (damma) -	· · · · · · · · · · · · · · · · · · ·		203,470
						252 424
Net Assets or Fund Bal		lines 1, 2, and 3	ling 2 (terming)			353,434
		eases not included in		15. D	5	353 434
<u>o</u>	rotal	net assets or fund ba	lances at end of year (line 4 minus	line 5) - Part II, column (b)	, line 30 6	353,434.

to c (e) Gross sales pnce (f) Depreciation allowed (or allowable) (g) Cost or other basis (h) Gain or (loss) (e) plus (f) minus (g a	minus
d e (e) Gross sales pnce (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) plus (f) minus (g) a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M.V. as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iii) Adjusted basis (k) Excess of col. (i) over col. (j), if any col. (k), but not less than Losses (from col. (h) a b c d e 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). } If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). } Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)	minus
d e (e) Gross sales pnce (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) plus (f) minus (g a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (j) Adjusted basis as of 12/31/69 (j) Adjusted basis over col. (j), if any (l) F m.V. as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col. (k), but not less than Losses (from col. (h) add over col. (j), if any col.	minus
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c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any col. (k), but not less than Losses (from col. (h) a b c d e Capital gain net income or (net capital loss)	1 -0-) or
d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) col. (k), but not less than Losses (from col. (h) and cover col. (j). if any col. (k), but not less than Losses (from col. (h) and cover col. (j). if any col. (k), but not less than Losses (from col. (h) and cover col. (j). if any col. (k), but not less than Losses (from col. (h) and cover col. (j). if any col. (k), but not less than Losses (from col. (h) and cover col. (j). if any col. (k), but not less than Losses (from col. (h) and cover col. (j). if any col. (k), but not less than Losses (from col. (h) any col. (k) any coll	1-0-) or
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j). If any (ii) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (iii) F M.V. as of 12/31/69 (iv) F M.V. as of 12/31/69 (iv) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (iv) F M.V. as of 12/31/69 (iv) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (iv) F M.V. as of 12/31/69 (iv) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (iv) F M.V. as of 12/31/69 (iv) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (iv) F M.V. as of 12/31/69 (iv) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (iv) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (iv) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (iv) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (ii) Gains (Col. (h) gain recol. (h) over col. (j). If any (iv) Gains (Col. (h) gain recol. (k), but not less than losses (from col. (h) over col. (j). If any (ii) Gains (Col. (h) gain recol. (h) over col. (j). If any (ii) Gains (Col. (h) over col. (j). If any (ii) Gains (Col. (h) over col. (j). If any (ii) Gains (Col. (h) over col. (j). If any (ii) Gains (Col. (h) over col. (j). If any (ii) Gains (Col. (h) over col. (j). If any (iii) Gains (Col. (h) over col. (j). If any (iii) Gains (Col. (h) over col. (j). If any (iii) Gains (Col. (h) over col. (j). If any (iii) Gains (Col. (h) over col. (j). If any (iii) Gains (Col. (h) over col. (j). If any (iii) Gains (Col. (h) over col. (j). If any (iii) Gains (Col. (h) over col. (j). If any (iii) Gains	1-0-) or
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M.V. as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iii) Adjusted basis as of 12/31/69 (iv) Excess of col. (iv) col. (k), but not less than coll. (k) coll. (k	1-0-) or
(i) F M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) col. (k), but not less than over col. (j), if any col. (k), but not less than over col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than over col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than over col. (j), if any col. (k), but not less than over col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than over col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than over col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any col. (k), but not less than tower col. (j), if any if (loss), enter in Part I, line 7 If (loss), enter in Part I, line 8 If (loss	1-0-) or
c d e Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)	
c d e 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line	
d e 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8,	
Capital gain net income or (net capital loss)	
Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss) and (fine in Part I, line 8) If (loss) and (fine in Part I, line 7 If (loss) and (fine in Part I, line 8 If (loss) and (fine in Part I, line 8 If (loss) and (fine in Part I, line 8 If (loss) and (fine in Part I, line 8 If (loss) and (fine in Part I, line 8 If (loss) and (fine in Part I, line 8 If (loss) and (fine in Part I, line 8 If (loss) and (fine in P	
If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8,	
Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8,	
If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8	
If (loss), enter -0- in Part I, line 8	
Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)	
For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)	
Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?	res X
1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries	
(a) (b) (c) (d)	
Base penod years Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of nonchantable-use assets (col (b) divided by col	(c))
	973304
	950760
	966415
	623543
2004 28,300. 222,562. 0.	127156
	641176
· · · · · · · · · · · · · · · · · · ·	641178
Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	728236
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	
• • • • • • • • • • • • • • • • • • • •	1,670.
5 Multiply line 4 by line 3 5 15	1,670.
5 Multiply line 4 by line 3 5 15 6 Enter 1% of net investment income (1% of Part I, line 27b) 6	1,670.

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page	≥ 18 of	the ins	tructio	ons)
`1à	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				o.
	here ▶ and enter 1% of Part I, line 27b	٠,		- 5	
c	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-) 2				
3	Add lines 1 and 2				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	ļ			0.
6	Credits/Payments:	` -			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a	·- / 5	" No. 16		7
ь	Exempt foreign organizations-tax withheld at source	-	,	· .	
C	Tax paid with application for extension of time to file (Form 8868)			M. 21	,
d	Backup withholding erroneously withheld		is no		
7	Total credits and payments Add lines 6a through 6d				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				0.
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 ▶ Refunded ▶ 11				
	t VII-A Statements Regarding Activities		1.1 2/22	····	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		1 5	Yes	No
	participate or intervene in any political campaign?		. 1a		<u> </u>
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)?		. 1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		1 2 2		ا مرجود می است. از مرجود می است.
	published or distributed by the foundation in connection with the activities.		1	3, 1	12 - 24
С	Did the foundation file Form 1120-POL for this year?		1c	31,3322	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		17- 7	100 m	رې د مر
	(1) On the foundation >\$(2) On foundation managers >\$		175	恋。	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		1000	4.5	100
_	on foundation managers \$		11.23	13.55	` t '
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	771-75	X
•	If "Yes," attach a detailed description of the activities.		1,000	15.5	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		3. July 1	*35.0	X
4	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		- {		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	N/	
	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	N /	X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. 5	信託書	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6	If "Yes," attach the statement required by General Instruction T.		200		
•	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or		7.]
			ا آيت آيا		경우 158 년
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation in the government of the state legislation.		1.4	X	
7	conflict with the state law remain in the governing instrument? 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		- 6	$\frac{x}{x}$	
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	XV.	- 7	2.00	C-11
- U	instructions) ▶ DC,		1. 12.	7,1	
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ger		- : ;**	1, 1	
			1	x	•
9	(or designate) of each state as required by General Instruction G ² If "No," attach explanation		. <u>8b</u>	3 70 3	F = - ,
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3		1 2 2 -		ur Ì
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on p	age	_		х
4.0	27)? If "Yes," complete Part XIV	• • • •	9_	\vdash	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing is				Х
	names and addresses		10		_^

(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)

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

enterprise at any time during the year?

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

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

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

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N

2h

3Ь

4a

X No

Statements Regarding Activities	s for Which Form 4	720 May Be Requi	red (continued)	
5a During the year did the foundation pay or incur any ar	mount to			
(1) Carry on propaganda, or otherwise attempt to inf	luence legislation (section	4945(e))?	Yes X No	, , -
(2) Influence the outcome of any specific public elec-	tion (see section 4955); o	or to carry on.		
directly or indirectly, any voter registration drive?	,		Yes X No	, `
(3) Provide a grant to an individual for travel, study, o				'
(4) Provide a grant to an organization other than a cl				
section 509(a)(1), (2), or (3), or section 4940(d)(2			Yes X No	. , ' .
(5) Provide for any purpose other than religious, cha	· · · · -			
purposes, or for the prevention of cruelty to childre	•		Yes X No	-20
			· — —	1 3 1
b If any answer is "Yes" to 5a(1)-(5), did any of the tr				Sh N/A
Regulations section 53.4945 or in a current notice reg		· -	. —	· · · 5b 11 / 14
Organizations relying on a current notice regarding di			🗀	1375 1. 4-1
c If the answer is "Yes" to question 5a(4), does the for	•		□ □	
because it maintained expenditure responsibility for the		· · · · · · · · · · · · ·	Yes X No	'
If "Yes," attach the statement required by Regulations	section 53.4945-5(d)			
6a Did the foundation, during the year, receive any fund	s, directly or indirectly, to	pay premiums		
on a personal benefit contract?			. Yes X No	
b Did the foundation, during the year, pay premiums, d	lirectly or indirectly, on a	personal benefit contrac	t?	6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a		•	• — —	• 335 (1.57) 1.57°
b If yes, did the foundation receive any proceeds or ha				7b X
Part VIII Information About Officers, Direct		_		-
1 List all officers, directors, trustees, foundation			page 22 of the instr	uctions).
(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	(e) Expense account, other allowances
	devoted to position	· ·-O-)	and deferred compensation	
ATTACHMENT 4		0.	0.	0.
ATTACHMENT 4		0	0.	
				
2 Compensation of five highest-paid employees	other than those inc	luded on line 1 - se	e nage 23 of the inst	tructions)
If none, enter "NONE."	(011101 111011 111000 1110		e page 20 or the his	ir detions),
(-) N	(b) Title, and average		(d) Contributions to employee benefit	(e) Expense account,
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other allowances
NONE			compensation	
		0	n	n
				<u> </u>
Total number of other employees and accompany	<u></u> i			L VOVE
Total number of other employees paid over \$50,000		 		
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Part VIII	Information About Officers, Directors, Trustees, Foundation Manand Contractors (continued)	agers, Highly Paid Employ	rees,
3 Five high	est-paid independent contractors for professional services (see page 23	of the instructions). If none.	enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	,		
Total numb	er of others receiving over \$50,000 for professional services	<u> </u>	▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
	- Cannada y O. D. Cott Charles Political		
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information of the baseline of the control of the contr	nation such as the number	Expenses
	ons and other beneficianes served, conferences convened, research papers produced, etc		
1 N/A			
2			
3			
4			
	Common of December Deleted Investments (see 20. 60. 50.		<u> </u>
	Summary of Program-Related Investments (see page 23 of the instance two largest program-related investments made by the foundation during the tax year on lines 1 and		Amount
1 NONE	the largest pregram reaction make by the learning are tax year on miles 1 are		Amount
1			
2			
ř			
All other pro	gram-related investments. See page 24 of the instructions		
3 NONE	•		
T-4-1 Add	Fig. 4 4h 2		

Pa	Part X Minimum Investment Return (All domestic foundations see page 24 of the instructions.)	must complete this part. Foreign	gn foundatio	ns,
1	1 Fair market value of assets not used (or held for use) directly in carryi	ng out charitable, etc.,		
	purposes:			
а	a Average monthly fair market value of securities		1a	2,600.
b	b Average of monthly cash balances		1b	212,298.
C	c Fair market value of all other assets (see page 24 of the instructions)		1c	0.
d	d Total (add lines 1a, b, and c)		1 d	214,898.
е		ind	3	
	1c (attach detailed explanation)	1e	-	
2	Aisitisa indektedases amaliaable to line 4 eeeete		2	0.
3	3 Subtract line 2 from line 1d		3	214,898.
4	4 Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for	greater amount, see page 25		
	of the instructions)		4	3,228.
5		nter here and on Part V, line 4	5	211,670.
6	6 Minimum investment return. Enter 5% of line 5		6	10,584.
Pa	Part XI Distributable Amount (see page 25 of the instructions) (foundations and certain foreign organizations check here	(Section 4942(j)(3) and (j)(5) priva		
1			1	10,584.
2 a				
	b Income tax for 2009 (This does not include the tax from Part VI)	2b	1.	
			2c	0.
3	3 Distributable amount before adjustments Subtract line 2c from line 1	• • • • • • • • • • • • • • • • • • • •	3	10,584.
4			4	
			5	10,584.
6		· · · · · · · · · · · · · · · · · · ·	6	
7	7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter h	ere and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·		7	10,584.
				
Ľć	Part XII Qualifying Distributions (see page 25 of the instructions	5)		
1	1 Amounts paid (including administrative expenses) to accomplish cha	ritable, etc., purposes:	-	
а	a Expenses, contributions, gifts, etc - total from Part I, column (d), line	26	1a	37,700.
ь	 b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in care 		1b	0.
2	2 Amounts paid to acquire assets used (or held for use) directly in car	rying out chantable, etc.,		
	purposes		2	0.
3			56.1	
а			3a	0.
ь			3b	0.
4			4	37,700.
5	5 Foundations that qualify under section 4940(e) for the reduced rate	of tax on net investment income		
			5	N/A
6	6 Adjusted qualifying distributions. Subtract line 5 from line 4		6	37,700.
	Note: The amount on line 6 will be used in Part V, column (b), in sub- qualifies for the section 4940(e) reduction of tax in those years	osequent years when calculating v	vhether the fo	undation

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Pa	rt XIII Undistributed Income (see page	e 26 of the instruction	ens)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7	. '			10,584.
2	Undistributed income, if any, as of the end of 2009				-
a	Enter amount for 2008 only	- 1		0.	,
- k	Total for pnor years: 20 07 ,20 06 ,20 05	7	0.		
่ง	Excess distributions carryover, if any, to 2009:	1-15- XII.			-
,	From 2004 17, 193.				
- h	From 2005 92,751.			,	
_	From 2006 58, 177.	4	, î	•	
ا ا	21 606	S 8 - 17		I	-
	0 300	· .			
e		198,117.	_ •		- ,
, T	Total of lines 3a through e	7 /:-		· · · · · · · · · · · · · · · · · · ·	<u>:</u>
4	Qualifying distributions for 2009 from Part XII, line 4: \$ 37,700.		1.		
			1. 13:00 F	· · · · · · · · · · · · · · · · · · ·	N
	Applied to 2008, but not more than line 2a		M - 4 - 1	۷.	<u> </u>
b	Applied to undistributed income of prior years (Election			عرفية * أغواد أو المراجعة	100
	required - see page 26 of the instructions)	सामान्यी राज्या			
C	Treated as distributions out of corpus (Election		1. 4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	' · , ;;	
	required - see page 26 of the instructions)				10.504
	Applied to 2009 distributable amount	27,116.	-	<u> </u>	10,584.
	Remaining amount distributed out of corpus	27,110.	1 1 2 2 2 2 2		
5	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same		,,,	,	· · · · · · · · · · · · · · · · · · ·
	amount must be shown in column (a))			`	14
6	Enter the net total of each column as				,
	indicated below:	225,233.		-,	
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	223,233.	-		
b	Pnor years' undistributed income Subtract		0.	- , - , - , - , , ,	
_	line 4b from line 2b Enter the amount of prior years' undistributed	- 194 h	0.		3 , , ,
·	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has		0.		
	been previously assessed		0.	Target Nagar	- 24
d	Subtract line 6c from line 6b. Taxable		0.		1
e	amount - see page 27 of the instructions Undistributed income for 2008. Subtract line		(5., 5	the later of the first	The second of the second
_	4a from line 2a Taxable amount - see page			0.	
	27 of the instructions		e No de la company	اران المراجع ا	- 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
f	Undistributed income for 2009. Subtract lines		المراجع المراج		
	4d and 5 from line 1. This amount must be distributed in 2010				
7	Amounts treated as distributions out of corpus			. The training of the contract	5 4 1 4 A A A A A A A A A A A A A A A A A
-	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the	0.			1
8	instructions)	0.	***	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
	applied on line 5 or line 7 (see page 27 of the	17,193.		, f ^{**}	
•	instructions)	11,193.	·		
9	Excess distributions carryover to 2010.	208,040.			
40	Subtract lines 7 and 8 from line 6a	200,040.		<u> </u>	<u>-</u>
10	Analysis of line 9 Excess from 2005 92,751.		Ĭ ·,	-	
a	• • • • • • • • • • • • • • • • • • • •		'	-	
ь					e e e
C	• • • — — — — — — — — — — — — — — — — —				, , , , ,
	• • • • • • • • • • • • • • • • • • • •		,	• •	
	Excess from 2009 27, 116.	[· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	* 3 .

Pa	rt XIV Private Oper	rating Foundations	see page 27 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE
1a	If the foundation has	received a ruling or d	etermination letter that	it is a private oper	ating	· · · · ·
	foundation, and the ruling	g is effective for 2009, e	nter the date of the ruling		•	
ь	Check box to indicate wh				•)(3) or 4942(j)(5)
_	OHOOK DOX to molocite in	Tax year	private operating realist	Prior 3 years	. 1 10120	1
2 a			4.0000		1	(e) Total
	justed net income from Part I or the minimum investment	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	return from Part X for each					
	year listed				ļ	
b	85% of line 2a					
c	Qualifying distributions from Part					
	XII, line 4 for each year listed					
d	Amounts included in line 2c not					
	used directly for active conduct]				
e	of exempt activities					
•	directly for active conduct of					
	exempt activities. Subtract line					
3	2d from line 2c				 	
•	alternative test relied upon					
а	"Assets" atternative test - enter					
	(1) Value of all assets					<u> </u>
	(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					
c	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income	1				
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),					
	or royalties) (2) Support from general			· · · · · · · · · · · · · · · · · · ·		
	public and 5 or more					
	exempt organizations as provided in section 4942		i		ŀ	
	()(3)(B)(m)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income.					
Pa	rt XV Supplement	ary Information (C	omplete this part	only if the found	lation had \$5,000	or more in assets
	at any time o	during the year - se	e page 28 of the ins	structions.)		
1	Information Regardin	g Foundation Manage	rs:			
а	List any managers of	the foundation who I	nave contributed more	than 2% of the total	al contributions receiv	ed by the foundation
	before the close of any	y tax year (but only if the	ney have contributed n	nore than \$5,000). (S	See section 507(d)(2).)	
	CYRUS A. A	NSARY				
	List any managers of	the foundation who	own 10% or more of	the stock of a corn	oration for an equally	/ large portion of the
_	ownership of a partner					range portion of the
	- ····································			a 10,0 or ground		
	N/A					
2	Information Regardin	a Contribution Grant	Gift Loan Scholarsh	in etc. Programs:		
_		-		• •		
	Check here ► if t	the foundation only	makes contributions	to preselected char	itable organizations a	and does not accept
	organizations under ot	or lunas. Il the toun	dation makes gifts, g	rants, etc. (see pag	e 28 of the instruction	ons) to individuals or
	organizations under ot	mer conditions, compr	ete items za, b, c, and	U		
а	The name, address, a	nd telephone number	of the person to whon	n applications should t	oe addressed:	
				· · · · · · · · · · · · · · · · · · ·		
b	The form in which app	lications should be su	bmitted and information	on and materials they	should include:	
C	Any submission deadle	ines				
	•					
d	Any restrictions or li	mitations on awards	such as by geogra	phical areas charits	able fields kinds of	institutions or other
_	factors		, , googio		22.5 No.00, Killio 01	

Part XV Supplementary Information 3 Grants and Contributions Paid Do	uring the Year or App	roved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year		1		
a mma ou woxm . C				
ATTACHMENT 5				
		1		
		1		
		1		
		1	:	
			ŧ	
Total			▶ 3a	37,70
b Approved for future payment				
			1	
			1	
			1	
		1		
		1		

Form 990-	PF (2009)			52-	-1308585	Page 12
Part X		cing Activ	vities			
	ss amounts unless otherwise indicated.		ated business income	Excluded by	section 512, 513, or 514	(e)
•		(a) Business code	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income (See page 28 of the instructions.)
•	am service revenue:					the instructions.)
а_ Ь						
c -						
d -						
e				f		
f -						
g F	ees and contracts from government agencies			,		
_	pership dues and assessments					
3 Interes	st on savings and temporary cash investments					
4 Divide	ends and interest from securities					
5 Net re	ental income or (loss) from real estate:		,	- m + 2 + 5		
	ebt-financed property					
	ot debt-financed property		<u> </u>			
	ntal income or (loss) from personal property investment income					
	or (loss) from sales of assets other than inventory					
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
11 Other	revenue: a					
b _						
c _						
ď _					<u></u>	
е		_		 	<u> </u>	
	otal. Add columns (b), (d), and (e)			- 325.1		
	. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions on page 28			• • • • • •	¹³	
Part X				omnt Durr		
Line No						ntributed importantly to
	the accomplishment of the fo					
	page 29 of the instructions.)					
		- <u>-</u>				
					<u> </u>	
						
			`			
			NOT APPLICABL			·
			NOT APPLICABL	<u>. </u>		
	- 		 			
	- 					
	+					
	<u> </u>					
						
						

in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a nonchantable exempt organization of (1) Cash	ritable
a granizations? (1) Cash	es No
a Tränsfers from the reporting foundation to a noncharitable exempt organization of (1) Cash	
(2) Other assets	
D Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (8) Performance of services or membership or fundraising solicitations (9) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (10) Interest of the goods, other assets, or services given by the reporting foundation if the foundation received less than it value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services (1) Line of (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement organization (d) Description of transfers, transactions, and sharing arrangement organization (d) Description of transfers, transactions, and sharing arrangement organization (d) Description of transfers, transactions, and sharing arrangement organization (e) N/A (f) Yes (a) Neme of organization (b) Type of organization (c) Description of relationship (d) Name of organization (e) Description of relationship (e) Name of organization (b) Type of organization (e) Description of relationship	 x
(1) Sales of assets to a noncharitable exempt organization	X
(2) Purchases of assets from a nonchantable exempt organization 16(2) (3) Rental of facilities, equipment, or other assets 16(3) (4) Reimbursement arrangements 16(3) (5) Loans or loan guarantees 16(5) (5) Performance of services or membership or fundrassing solicitations 16(5) (6) Performance of services or membership or fundrassing solicitations 16(6) (7) diff the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the faviative of the goods, other assets, or services given by the reporting foundation if the foundation received less than faviative in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services (6) Namount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement N/A N/A N/A (a) Description of transfers, transactions, and sharing arrangement N/A N/	
(3) Rental of facilities, equipment, or other assets	- X
(4) Reimbursement arrangements	X
(5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Item of facilities, equipment, mailing lists, other assets, or paid employees (7) Item of the goods, other assets, or services given by the reporting foundation if the foundation received less than favalue in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement N/A	X
(6) Performance of services or membership or fundraising solicitations. (5) Aring of facilities, equipment, maining lists, other assets, or paid employees (6) It defends answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the favalue of the goods, other assets, or services given by the reporting foundation if the foundation received less than favalue in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services since the following schedule (d) Description of transfers, transactions, and sharing arrangement in N/A N/A	<u> </u>
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fe value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fe value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement N/A N/A	X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the favalue of the goods, other assets, or services given by the reporting foundation. If the foundation received less than favalue in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services. Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement. N / A N / A	X
value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than favalue in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services. J Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrang N/A. N/A I s 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 5277. If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (e) Description of relationship	
value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrang N/A N/A N/A (a) Description of transfers, transactions, and sharing arrangement, show in column (d) the value of the goods, other assets, or services (d) Description of transfers, transactions, and sharing arrangement, show in column (d) the value of the goods, other assets, or services (d) Description of transfers, transactions, and sharing arrangement, show in column (d) the value of the goods, other assets, or services (d) Description of transfers, transactions, and sharing arrangement, show in column (d) transfers, transactions, and sharing arrangement, show in column (d) transfers, transactions, and sharing arrangement, show in column (d) Description of transfers, transactions, and sharing arrangement (e) Description of relationship (e) Description of re	
Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrang N/A N/A	
a 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?	received
a 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?	
a 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?	
section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known in the section 527?	
section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known in the section 527?	
section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known in the section 527?	
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(a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known in the second of the s	X No
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known	
	.4.4.
1. 00 12 1/10 1	
	-
Sulling State State State Secretary - 1/2	areer
Signafure of officer or trustee Date / Title //	
Signafore of officer or trustee Date Title	re on
Preparer's signature Slow CPA Show Self-employed page 30 of the instruction Propage 30 of the instruction Propag	ions)
Signature V ANA SIGNATURE CIA SIMONION LIB	
Firm's name (or yours if self-employed), address, GRANT THORNTON LLP 1 SOUTH ST., STE 2400	

Form 990-PF (2009)

Phone no 410-685-4000

BALTIMORE, MD

and ZIP code

21202

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

Name of the organization		Employer identification number		
THE ANSARY FOUNDATIO	N			
C/O CYRUS ANSARY	52-1308585			
Organization type (check one):				
Filers of:	Section:			
Form 990 or 990-EZ 501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private fou	indation		
	527 political organization	,		
Form 990-PF				
	4947(a)(1) nonexempt charitable trust treated as a private founda	tion		
	501(c)(3) taxable private foundation			
	vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a \$	Special Rule. See		
General Rule				
	ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or contributor. Complete Parts I and II.	or more (in money or		
Special Rules				
sections 509(a)(1) an	3) organization filing Form 990 or 990-EZ that met the 331/3% support tested 170(b)(1)(A)(vi), and received from any one contributor, during the yea % of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line	r, a contribution of the greater		
the year, aggregate of	7), (8), or (10) organization filing Form 990 or 990-EZ that received from contributions of more than \$1,000 for use exclusively for religious, charitab, or the prevention of cruelty to children or animals. Complete Parts I, II, ar	le, scientific, literary, or		
the year, contribution aggregate to more th year for an exclusively applies to this organia	7), (8), or (10) organization filing Form 990 or 990-EZ that received from s for use exclusively for religious, charitable, etc., purposes, but these cor an \$1,000. If this box is checked, enter here the total contributions that we religious, charitable, etc., purpose. Do not complete any of the parts unless ation because it received nonexclusively religious, charitable, etc., contributions.	ntributions did not ere received during the ss the General Rule butions of \$5,000 or more		
990-EZ, or 990-PF), but it must or on line 2 of its Form 990-PF, 990-PF).	not covered by the General Rule and/or the Special Rules does not file S answer "No" on Part IV, line 2 of its Form 990, or check the box on line H to certify that it does not meet the filing requirements of Schedule B (Form	of its Form 990-EZ, m 990, 990-EZ, or		
For Privacy Act and Paperwork Reduct for Form 990, 990-EZ, or 990-PF.	on Act Notice, see the Instructions Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)		

JSA

Name of organization THE ANSARY FOUNDATION C/O CYRUS ANSARY

Employer identification number 52-1308585

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
1	CYRUS AND JANET ANSARY 3 BETHESDA METRO CENTER, SUITE 700 BETHESDA, MD 20814	\$\$	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	
			(d)	
		Aggregate contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II if there is	

- ACCOUNTING FEES PART I FORM 990PF,

CHARITABLE PURPOSES	.0	0.
ADJUSTED NET INCOME	. 0	0
NET INVESTMENT INCOME	2,472.	2,472.
REVENUE AND EXPENSES PER BOOKS	2,472.	2,472.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

PART I - OTHER PROFESSIONAL FEES FORM 990PE,

CHARITABLE PURPOSES	0.	0.
ADJUSTED NET INCOME	.0	0.
NET INVESTMENT INCOME	358.	358.
REVENUE AND EXPENSES PER BOOKS	358.	358.
		TOTALS
DESCRIPTION	CTC AGENT	

CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

26,000 SH SUNRESORTS LTD.

ENDING BOOK VALUE

ENDING

TOTALS

141,000.

2,600.

2,600.

141,000.

ATTACHMENT 3

NS EXPENSE ACCT AND OTHER NS ALLOWANCES	.0	٥.	٥.	.0	0.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS					
COMPENSATION	Ö	.0	.0	.0	•0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	SECRETARY/TREASURER 1.00	DIRECTOR 1.00	DIRECTOR 1.00	GRAND TOTALS
NAME AND ADDRESS	CYRUS A. ANSARY 3 BETHESDA METRO CENTER, SUITE 700 BETHESDA, MD 20814	JANET H. ANSARY 3 BETHESDA METRO CENTER, SUITE 700 BETHESDA, MD 20814	DOUGLAS C. ANSARY 3 BETHESDA METRO CENTER, SUITE 700 BETHESDA, MD 20814	PARY ANN ANSARY 3 BETHESDA METRO CENTER, SUITE 700 BETHESDA, MD 20814	

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ATTACHMENT 5 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT		3,000.	250.	21,000.	2,000.	1,000.
PURPOSE OF GRANT OR CONTRIBUTION	ANNUAL FUND	ANNUAL FUND	SCHOLARSHIP	ANNUAL FUND	ANNUAL FUND	ANNUAL FUND
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NONE
	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)	501 (C) (3)
RECIPIENT NAME AND ADDRESS	CLEVELAND CLINIC	COMMUNITY COALITION FOR HAITI	IMMACULATE CONCEPTION CHURCH	MOUNT VERNON LADIES ASSOCIATION	PENN CARDIOVASCULAR INSTITUTE	THE METROPOLITAN CLUB PRESERVATION FOUNDATION
	9500 EUCLID AVE PO BOX 931517	POBOX 1222	1315 8TH STREET, NW	PO BOX 240	3535 MARKET STREET #750	1700 H STREET NW
	CLEVELAND, OH 44193	VIENNA, VA 22183	WASHINGTON, DC 20001	MOUNT VERNON, VA 22121	PHILADELPHIA, PA 19104	WASHINGTON, DC 20006

TOTAL CONTRIBUTIONS PAID

37,700.

ATTACHMENT 5 PAGE 21

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