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990-PF

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

OMB No 1545-0052 0000

-		enue Service		Note: The foundati		s abic to c	se a copy or th				requirements	200	
_		ndar yea k all that		or tax year begin			Initial satures a		and ending	<u> </u>	<del></del>		20
5 (	Cnec	k all that	арріу	Initial retur		ш	Initial return o	•	iblic charity	_		Final return	
_	_	No	me of fou	Amended	etum		Addres	s change		_	me change		
		ا ا			TNC					l'	A Employer Identifi	cation number	
Us	se the		_	OUNDATION,	INC.							0100101	
^	labe therw	. —		HAEL ROWNY		<del></del>			<del></del>	-		2190131	
U	prin	110	imber and	d street (or PO box	number if n	nail is not d	elivered to street	address)	Room/suit	e   I	B Telephone number (see )	page 10 of the instructions)	}
	or typ	I											
	e Spe	cific 53		ODLAWN AVEN								3) 205-16	92
Ins	struct	ions.	ty or town	, state, and ZIP coo	le					- I'	If exemption applicat pending, check here	on is	
		l									) 1 Foreign organizat	ions check here .	►[
				HASE, MD 20						_	<ol><li>Foreign organizat</li><li>85% test, check h</li></ol>		_
쓴	_	k type of	•				npt private foi				computation		►L
ᅩ				nexempt charitable	50 C		er taxable pri			<b>—</b>  1	If private foundation	status was terminated	
				assets at end		•	ethod XC	ash Acc	rual		under section 507(b)	(1)(A), check here .	
				ol (c), line		ther (spe				1	If the foundation is in	a 60-month termination	on _
	16)			50,704.		column (	d) must be or	cash basis )	<u> </u>		under section 507(b)	<del> </del>	
Pa	art I	Analysis	of Reve	enue and Expens	es (The	(a) Re	venue and	(b) Net inve	stment	(c)	Adjusted net	(d) Disburser for chantal	
		may not n	ecessanly	y equal the amount	s in	expe	enses per	incom		(0)	income	purpose	
_				ge 11 of the instruc			ooks					(cash basis	
	1 0	Contributions	gifts, grants,	etc , received (attach sch	edule) .								
	2 (	Check 🕨	attact	foundation is not req	ulled to								
			-	temporary cash inves			62.		62.		<del></del>	ATCH 1	
	4 [	Dividends	and intere	est from secunties	]		13,273.	1	3,273.			ATCH 2	
	5a (	Gross rent	s									ļ	
	bι	Net rental in	come or (lo	oss)									
۱,		Net gain or ( Gross sales		sale of assets not on l			-148,448.					<u> </u>	
;		assets on lin		1,073	,613.							<del> </del>	
2	7 (	Capital gai	n net inco	ome (from Part IV, I	ne 2) .		<del>,</del>					ļ	
				algaın								ļ <u>.</u>	
	9	Income mo Gross sales	dification	s · · · · · · · ·								ļ	
		and allowan							$\longrightarrow$				
1		Less Cost o	•									<u> </u>	
	c (	Gross prof	it or (loss)	) (attach schedule)								ļ	
1			•				105 110		2 225			ļ	
41				rough 11			<del>-</del> 135,113.	-	13,335.				
1	13 (	Compensati	on of office	ers directors trusters	CIV/F	<b>D</b>	0.		<del></del>			ļ	
- 1		-	-		_ V -							<del> </del>	
3   1	15 F			loyee benefits		10						ļ	
2 1	16 a l	Legal fees	(attach se	chedine) .MAY.	1. 4. 20 H 3	10			1 050		1 050	<del> </del>	
1	b /			ach sonedule) AT			2,500.		1,250.		1,250.	<del> </del>	
2	c (	Other prof	essional f	ees (attach schedu	مجسب							ļ <del></del>	
1	17 I	Interest .				<u>UI</u>		ļ				ļ	
1	18 1			e) (see page 14 of the ins		<u> </u>	360.		360.		0	· <u> </u>	
[   '	19	Depreciati	on (attach	n schedule) and dep	eletion .	<u> </u>						ļ	
3 2	20 (	•	-			<u> </u>		<u> </u>					
3   3	21	•		, and meetings , .		<u> </u>	<del></del>	<u> </u>				<del> </del>	
<u>ĕ</u>  2	22	_	•	tions		<u> </u>		<b></b>	2 222			<del> </del>	
<u>"</u> []	23 (	-		ach schedule) AT		<u> </u>	3,000	<del></del>	3,000.		0	<del> </del>	
ë  :	24		_	d administrative ex	penses.		F 040				1 050		
5	,	Add lines	_			<u> </u>	5,860	<del>                                     </del>	4,610.		1,250.	<del> </del>	
	25 (		-	grants paid		<u> </u>	22,685.	ļ	4 612		1 055		22,6
4	26			ursements Add lines 2	4 and 25	<del></del>	28,545.	<del> </del>	4,610.		1,250	1 2	22,6
	27	Subtract III					160 650						
Operanting and Administrative Expenses	a ı			expenses and disburser		<u> </u>	-163,658.	<del> </del>	0 705	-		-	
	ы			ome (if negative, e	•	<b> </b>			8,725.		<del></del>	<del> </del>	
	c /			e (if negative, ente		L					-0-	L	
	r Priva	acv Act ar	nd Paperv	vork Reduction Ac	t Notice, s	see page :	30 of the instru	ctions.	JS	A *	* ATCH 4	Form <b>990-F</b>	2F (2

PAGE 1

. . .

P	art II	Balance Sheets description column should be for end-of-year	Beginning of year	End o	year
		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	12,237.	14,751.	14,751.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
	8	Inventories for sale or use			<del></del>
Assets	9	Prepaid expenses and deferred charges			
155		Investments - U S and state government obligations (attach schedule)			
~		Investments - corporate stock (attach schedule)			
		Investments - corporate stock (attach schedule)			
	11	Investments land buildings	<del></del>		<del></del>
		Less accumulated depreciation (attach schedule)			
		(attach schedule)			
	12	Investments - mortgage loans Investments - other (attach schedule) ATCH 6	692,875.	526,703.	535,953.
	13 14	Land, buildings, and	092,073.	320,703.	
		Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
		(attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
_		ınstructions Also, see page 1, item I)	705,112.	541,454.	<u>550,704</u> .
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
∄	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted	_		
ĕ	25	Temporarily restricted			
ala	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117,			
5		check here and complete lines 27 through 31.			
Ē	27	Capital stock, trust principal, or current funds	705,112.	705,112.	
S	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
set	29	Retained earnings, accumulated income, endowment, or other funds	0.1	-163,658.	
AS	30	Total net assets or fund balances (see page 17 of the			
tet	30	, , •	705,112.	541,454.	
_	31	Instructions)  Total liabilities and net assets/fund balances (see page 17		0.17,10.1.	
	"	` . •	705,112.	541,454.	
r.		of the instructions)		341,434.	
		Analysis of Changes in Net Assets or Fund		aroo with	
1		Il net assets or fund balances at beginning of year - Part II, co			7AE 110
_	end	of-year figure reported on prior year's return)			705,112
		er amount from Part I, line 27a			-163,658
					E44 45:
		lines 1, 2, and 3			541,454
5	Dec	reases not included in line 2 (itemize)  Inet assets or fund balances at end of year (line 4 minus line		5	
6	Tota	I net assets or fund balances at end of year (line 4 minus line	5) - Part II, column (b), lu	ne 30 6	541,454
					Earn 990 PE (2000)

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Ρ		and Losses for Tax on Inv		(b) How	(c) Date	(d) Data14
_		describe the kind(s) of property sold (e ck warehouse, or common stock, 200 s		acquired P-Purchase D-Donation	acquired (mo, day, yr)	(d) Date sold (mo , day, yr )
<u>1a</u>				D-1201B1041		
_ <u>b</u>						
<u>_</u> c				<u> </u>		
<u>d</u>				ļ		ļ
<u>e</u>	<del></del>		T	ļ. <u></u>	l	
	(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>						
_ <u>b</u>						
_ <u>c</u> d					· · · · · · · · · · · · · · · · · · ·	
_ <u>u</u>		<del></del>		<del></del>		
$\overline{}$		ving gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) g	ain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)		(k), but not less t	han -0-) <b>or</b>
_	(,, , , , , , , , , , , , , , , , , , ,	as of 12/31/69	over ∞l (j), if any	<u> </u>	Losses (from co	oi (n)) 
_ <u>a</u>				<u> </u>		
_ <u>b</u>				<del></del>		<del></del>
_ <u>c</u> d		·	<del> </del>	<del> </del>		<del>-</del>
е					<del></del>	
		( If	gain, also enter in Part I, line 7			
2	Capital gain net income or (r		(loss), enter -0- in Part I, line 7	2		148,448.
		r (loss) as defined in sections 1222			-	
	_	ne 8, column (c) (see pages 13 an				
		ne 8		3		
_			ced Tax on Net Investment Ince ection 4940(a) tax on net investmen			
Wa			able amount of any year in the base o not complete this part	period?	□	Yes X No
1		int in each column for each year, s	ee page 18 of the instructions before	making		
c	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	
	2008	41,202.	651,605.			0.063232
_	2007	52,324.	878,855.	ļ		0.059537
_	2006	41,337.	842,207.	<u> </u>		0.049082
_	2005	39,443.	796,713.			0.049507
	2004	24,735.	779,328.	-		0.031739
2	Total of line 1, column (d)  Average distribution ratio for	or the 5-year base period - divide th	ne total on line 2 by 5, or by the	2		0.253097
	number of years the founda	ation has been in existence if less t	han 5 years	3		0.050619
4	Enter the net value of nonc	haritable-use assets for 2009 from	Part X, line 5	4		481,912.
5	Multiply line 4 by line 3			5		24,394.
6	Enter 1% of net investment	income (1% of Part I, line 27b)		6		87.
7	Add lines 5 and 6			7		24,481.
8	Enter qualifying distribution If line 8 is equal to or gre	eater than line 7, check the box	in Part VI, line 1b, and complete	8 that part	using a 1% ta	22,685. x rate See the
	Part VI instructions on pag	e 18	•	•	-	

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	truction	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	75.
	here ▶ and enter 1% of Part I, line 27b			
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-)			
3	Add lines 1 and 2		1	75.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		1	75.
6	Credits/Payments Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1, 283.			
b	Exempt foreign organizations-tax withheld at source 6b 0.			
С	Tax paid with application for extension of time to file (Form 8868)  6c  0.			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		1,2	83.
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   10		1,1	08.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax   1,108. Refunded  11			
Par	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	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		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	16		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	-'-		
u	(1) On the foundation \$\\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
e	on foundation managers   \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
-	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
40		4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b	N	
_	If "Yes," has it filed a tax return on Form 990-T for this year?	5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-		
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or  By date legislation, they effectively expende the appropriate transfer as they are read-to-up described.			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		Х	
-	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Λ	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► MD,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		х	
_	(or designate) of each state as required by General Instruction G?lf "No," attach explanation	8b	^	-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	_		v
	27)? If "Yes, "complete Part XIV	9_	_	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			Х
	names and addresses	10	n DE	

. . . . . .

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	.11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	i i		
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ►N/A			
14		5-795	52	
	Located at ▶5329 WOODLAWN AVENUE CHEVY CHASE, MD ZIP+4 ▶ 20815			<del></del>
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here	• • •	>	· 🔲
Par	and enter the amount of tax-exempt interest received or accrued during the year			
ı aı		Т	Yes	No
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	_	res	NO
Id	During the year did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No	İ		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	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)?			ļ
	(6) Agree to pay money or property to a government official? ( Exception. Check "No" if	1		
	the foundation agreed to make a grant to or to employ the official for a period after	1		
	termination of government service, if terminating within 90 days ) Yes X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			ļ
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	N/	A
	Organizations relying on a current notice regarding disaster assistance check here	1		}
С	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	ļ	X
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))		i	
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?		Ī	
	ce, i are xim, for tax year(s) beginning before 2000 111111111111111111111111111111111			
	If "Yes," list the years			
b	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)	2b	N/	A
_	to all years listed, answer "No" and attach statement - see page 20 of the instructions)		<b>†</b>	<del></del>
C		1	1	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business		1	
•	enterprise at any time during the year? Yes X No			
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	1		
	foundation had excess business holdings in 2009)	3b	N,	A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a	$\bot$	X
b	, , , , , , , , , , , , , , , , , , , ,			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	. 4b	1	X X

Par	VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requir	red (continued)		
5 a	During the year did the foundation pay or incur any amount (	to				
	(1) Carry on propaganda, or otherwise attempt to influence	legislation (section 49	945(e))?	Yes X No	,	
	(2) Influence the outcome of any specific public election (se	e section 4955), or to	carry on,			
	directly or indirectly, any voter registration drive?			Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or other				,	
	(4) Provide a grant to an organization other than a charitable	e, etc , organization o	described in			
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see	page 22 of the instri	uctions)	Yes X No	,	
	(5) Provide for any purpose other than religious, charitable,	scientific, literary, or	educational			
	purposes, or for the prevention of cruelty to children or a	ınımals?		Yes X No	,	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa					
	Regulations section 53 4945 or in a current notice regardii	ng disaster assistand	e (see page 22 of the	nstructions)?	5b	n∤a
	Organizations relying on a current notice regarding disaster					
С	If the answer is "Yes" to question 5a(4), does the foundation					]
	because it maintained expenditure responsibility for the gran			Yes No	,	
	If "Yes," attach the statement required by Regulations section			,		
6 a	Did the foundation, during the year, receive any funds, direct	• •	v nremiums			1
	on a personal benefit contract?		• •	Yes X No	,	
b	Did the foundation, during the year, pay premiums, directly of				6ь	
	If "Yes" to 6b, file Form 8870				• • •	
7 a	At any time during the tax year, was the foundation a party t	o a prohibited tax she	elter transaction?	Yes X No	,	1
	If yes, did the foundation receive any proceeds or have any	*	•	·	7b	Х
Par	VIII Information About Officers, Directors	, Trustees, Four	dation Managers	, Highly Paid Emp	loyees,	
7	and Contractors  ist all officers, directors, trustees, foundation mana	agers and their co	mnensation (see na	ge 22 of the instruct	ions)	
·	(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	se account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	owances
AT	TACHMENT 7		0.	0.		0
					<u> </u>	
2	Compensation of five highest-paid employees (other forms, enter "NONE."	r than those includ	ded on line 1 - see p	age 23 of the instruc	ctions).	
	Hone, enter NONE.	(b) Title and access		(d) Contributions to		
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred		se account, owances
		devoted to position		compensation		
	NONE					
				ļ		
						<del></del>
Tota	number of other employees and eyes \$50,000		<u> </u>	<u> </u>	L	
Tota	number of other employees paid over \$50,000 .		<u></u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	0-PF (2009)
					rom 93	74"FF (2009)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empand Contractors (continued)	
3 Five highest-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	
	<u> </u>
	<del> </del>
	<del> </del>
Total number of others receiving over \$50,000 for professional services	▶ NON
Part IX-A Summary of Direct Charitable Activities	
Tait IX-X Summary of Direct Chantable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
	. }
<u>_</u>	
3	
4	+
	·
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
_ <del></del>	<del></del>
2	
	· [
All other program-related investments. See page 24 of the instructions	
3 NONE	
<u> </u>	-
Total. Add lines 1 through 3	<b>&gt;</b>

Form 990-PF (2009)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foresee page 24 of the instructions.)	eign foundation	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	·· <del> </del>	
	purposes		
а	Average monthly fair market value of securities	1a	468,827.
b	Average of monthly cash balances	1b	20,424.
С	Fair market value of all other assets (see page 24 of the instructions)		0.
d		1d	489,251.
е	Reduction claimed for blockage or other factors reported on lines 1a and		-
	1c (attach detailed explanation) 1e		
2	1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets		0.
3	Subtract line 2 from line 1d	3	489,251.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25	•	
	of the instructions)	4	7,339.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	481,912.
6	Minimum investment return. Enter 5% of line 5	. 6	24,096.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priv	ate operating	
	foundations and certain foreign organizations check here  and do not complete this	part)	
1	Minimum investment return from Part X, line 6	. 1	24,096.
	Tax on investment income for 2009 from Part VI, line 5	5.	
С		2c	175.
3	Distributable amount before adjustments Subtract line 2c from line 1	. 3	23,921.
4	Recoveries of amounts treated as qualifying distributions	. 4	
5	Add lines 3 and 4	. 5	23,921.
6	Deduction from distributable amount (see page 25 of the instructions)	. 6	<del></del>
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	. 7	23,921.
Pa	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	· 1 · · 1 · · · ·	
а		1a	22,685.
b	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	·   '10	
-	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the	•   -	
a	Scutchality to at /march IDS ampared agreed)	3a	0.
ь	Cook distribution toot (attack the required pakelia)	· 3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	22,685.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	•	
-	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	22,685.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh		
	qualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2009)

. . . . . . . . .

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	( <b>d</b> ) 2009
	line 7				23,921.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only		:	10,698.	
	Total for prior years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005 0.	i			
С	From 2006				
d	From 2007				
e	From 2008				
f	Total of lines 3a through e	0.			
4	,				
	line 4 ▶ \$ 22,685.				
а	Applied to 2008, but not more than line 2a			10,698.	
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
ď	Applied to 2009 distributable amount				11,987.
е	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009 .	0.			0.
6	(If an amount appears in column (d), the same amount must be shown in column (a))  Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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.	<u> </u>			
d	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions				
T	Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010.				11,934.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.	<u>-</u> -		
10	Analysis of line 9				
	Excess from 2005				
b					
С	_				
d					
e	Excess from 2009 0 .				

Pa	rt XIV Private Oper	ating Foundations	see page 27 of the	instructions and Part	VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has			t it is a private opera	ting	
b	foundation, and the ruling Check box to indicate whe		•	n described in section	. • 4942()	(3) or 4942(j)(5)
		Tax year	TVate operating roundage	Pnor 3 years	43420)	T T
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	for the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a				<u>-</u> -	
С	Qualifying distributions from Part					
ď	XII, line 4 for each year listed .  Amounts included in line 2c not	<u></u>				<del> </del>
	used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities. Subtract line					
3	2d from line 2c Complete 3a, b, or c for the					<del> </del>
_	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)					
Ь	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
С	"Support" alternative test - enter	<u> </u>		· · · · · · · · · · · · · · · · · · ·		<del> </del>
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization			ļ		
Do	(4) Gross investment income .  Int XV Supplement	and Information (C	omplete this part	only if the founds	tion had \$5,000	or more in assets
		during the year - se				
1	Information Regarding	•		- 4b 00/ -6 4b- 4-4-1		ad by the formulation
а	List any managers of before the close of any	the foundation who representation that the transfer of the tra	ney have contributed in	more than \$5,000) (Se	ee section 507(d)(2))	ed by the loundation
	N/A	<del></del>		<del> </del>		<del></del>
p	List any managers of ownership of a partner					large portion of the
	N/A					
2	Information Regarding			• • •		
	Check here ► X if the unsolicited requests for organizations under other contents.	for funds If the foun	dation makes gifts, g	grants, etc (see page	able organizations at 28 of the instruction	and does not accept ons) to individuals or
а	The name, address, an	<del></del>			addressed	
b	The form in which appl	cations should be sub	mitted and information	and materials they sho	uld include	
c	Any submission deadling	nes				
	Any so-t-strong -	mulahan an awarda	augh as his access	anhuad	م المارية الم	unabilitiana ath
a	Any restrictions or li factors	iriitations on awards	, such as by geogra	apilicai areas, chanta	vie Tielas, Kinas of	moututions, or other

3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	<del></del>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
ATTACHMENT 8				
ATTACMMENT 0				
	į.	Ì		
	1	1		
		]		
		1		
		}		
Total				22,685
b Approved for future payment				
		1		
		1		
Total	<del></del>	·		

	Malysis of Income-Production mounts unless otherwise indicated		ited business income	Excluded by	section 512, 513, or 514	(e)
_	service revenue	(a) Business code	(b)	(c) Exclusion code	(d) Amount	Related of exempt function income (See page 28 of the instructions)
a	service revenue			<del></del>		the instructions )
				<del></del>		
•						
f						
-	and contracts from government agencies					
Membersh	hip dues and assessments					
	savings and temporary cash investments			14	62.	
	and interest from securities			14	13,273.	
	Income or (loss) from real estate			<del></del>		
	financed property			<del></del>		
	ebt-financed property			+		
	ncome or (loss) from personal property estment income	<u> </u>		<del></del>		
	estment incomess) from sales of assets other than inventory			18	-148,448.	
-	ne or (loss) from special events			<del>                                     </del>	110/110.	
	offit or (loss) from sales of inventory					
	enue a		<del></del>	<del> </del>		<del></del>
				<del> </del>		
			· · · · · · · · · · · · · · · · · · ·			
				<del></del>		
	Add columns (b), (d), and (e)				-135,113.	
Subtotal /	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e)				<del></del>	
Subtotal / Fotal. Add	d line 12, columns (b), (d), and (e)	verify calcula	tions)	xempt Pur		-135,11
Subtotal / Total. Add workshe t XVI-E	d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to	verify calcula to the Ac	itions) complishment of E	xempt Purp	Doses  (e) of Part XVI-A con	-135,11
otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	itions) complishment of E	xempt Purp	Doses  (e) of Part XVI-A con	-135,11
ubtotal / otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	itions) complishment of E	xempt Purp	Doses  (e) of Part XVI-A con	-135,1
ubtotal / otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	itions) complishment of E	xempt Purp	Doses  (e) of Part XVI-A con	-135,1:
otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	itions) complishment of E	xempt Purp	Doses  (e) of Part XVI-A con	-135,11
ubtotal / otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	ations)  complishment of E  ch income is reporte  exempt purposes (	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,1
ubtotal / otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	itions) complishment of E	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,1
ubtotal / otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	ations)  complishment of E  ch income is reporte  exempt purposes (	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,1
ubtotal / otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	ations)  complishment of E  ch income is reporte  exempt purposes (	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,1
ubtotal / otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	ations)  complishment of E  ch income is reporte  exempt purposes (	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,1
ubtotal / otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	ations)  complishment of E  ch income is reporte  exempt purposes (	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,1
otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	ations)  complishment of E  ch income is reporte  exempt purposes (	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,11
Subtotal / Total. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	ations)  complishment of E  ch income is reporte  exempt purposes (	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,1:
otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	ations)  complishment of E  ch income is reporte  exempt purposes (	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,11
Subtotal / otal. Add	d line 12, columns (b), (d), and (e)	verify calcula to the Ac	ations)  complishment of E  ch income is reporte  exempt purposes (	xempt Purped in column other than I	Doses  (e) of Part XVI-A con	-135,1:

Form	990-PF (2	2009)				5:	2-2190131			Р	age 13
Pa	rt XVII	Information Exempt Org		Transfers To	and Transa	ctions a	nd Relatio	nships With	Nonc	hari	table
1	in sec	ne organization direction 501(c) of the zations? ers from the reporting for	Code (other that	n section 501(c)(3	3) organizations	with an	y other organ ection 527, re	nization describe	d	Yes	No
а		ers from the reporting to			-				19(1)		X
		her assets									$\frac{1}{x}$
b		ransactions							. 1.6.57		1
	(1) Sa	les of assets to a nonc	nantable exempt o	organization		. <b></b> .			, 1b(1)		Х
		rchases of assets from									Х
	(3) Re	ental of facilities, equipn	nent, or other asse	ets					1b(3)		Х
	(4) Re	imbursement arrangen	ients						. 1b(4)	_	X
		ans or loan guarantees								-	X
		rformance of services of								-	X
		g of facilities, equipmen								ب	X
a		answer to any of			_			•			
		of the goods, other in any transaction		•	. •						
(a)	Line no	(b) Amount involved	(c) Name of	nonchantable exempt	organization	(d) Descri	ption of transfers	, transactions, and sl	naring arra	ngeme	nts
		N/A	<u> </u>			N/A					
			<del></del>		· · · · · · · · · · · · · · · · · · ·						
		<del></del>	<del> </del>								
_			<del> </del>								
		· · · · · · · · · · · · · · · · · · ·	<del> </del>								
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			<del></del>				<del></del>				
			<del></del>								
			<del> </del>	<u> </u>	<del></del>			<del>_</del>			
_					,	<del></del>					
	section	foundation directly on 501(c) of the Code (c)," complete the following	other than section g schedule	501(c)(3)) or in sec	ction 527?		······			'es [	X No
		(a) Name of organizati	UII	( <b>b</b> ) Type	e of organization		(c	) Description of relati	onsnip		
_		<del></del> .		<del>                                     </del>	<del></del> -						
_											
	Under belief,	penatties of perjury, I de it is true, confect, and co	clare that I have emplete Declaration	examined this return, of preparer (other the	including accompa ian taxpayer or fidi	iciary) is bas	sed on all informa	ation of which prep	arer has a	knowle any kno	dge and owledge
A	_	John Com	11/			5/10	<del>//0</del>	Presid	m		
<u> </u>	7 SK	gnature of officer or trust				Date	<del></del>	Title Prenare	r's identif	fvina	
Sign Here	Paid Preparer's Use Only	Preparer's signature	Ji C	<u>Q</u>	5/7	/10	Check if self-employed	d ▶  number	(See Sign of the instr 74508	nature	on s)
	Pa rep	Firm's name (or yours		EWATERHOUSEC	OOPERS, LL	P		EIN ▶ 13-40	08324		
	ر ہ	self-employed), addre and ZIP code		TYSONS BOUL	EVARD	221	02-4261	Phone no 703	-918-3	- 3000	

Form **990-PF** (2009)

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

Kind of F	• •	Description					Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL SHORT PARTNERSHIP ESTATES OR	, S CORPORA	ATION, AND			-13,207.	
		TOTAL LONG- PARTNERSHIP ESTATES OR	, S CORPOR	ATION, AND			-55,212.	
16,324.		769.92 SHS 23,841.	CG US EQUI	ry TXT 2553			VARIOUS -7,517.	VARIOUS
665.		27.3 SHS CG 818.	US EQUITY	TXT 2553			VARIOUS -153.	VARIOUS
27,432.		19,970.92 S 599,794.	HS CG US EQ	QUITY TXT 2	553		VARIOUS -72,362.	VARIOUS
28,892.		528,891.99 528,892.	SHS AMERICA	AN FUNDS MO	NEY MARK		VARIOUS 0.	VARIOUS
300.		25.189 SHS 297.	BOND FUND	OF AMERICA	CL F2		10/27/2009	12/03/20
TAL GAIN(L	oss)							

# - INTEREST ON TEMPORARY CASH INVESTMENTS FORM 990PF, PART I

NET INVESTMENT INCOME	62.	62.
REVENUE AND EXPENSES PER BOOKS	62.	62.
		TOTAL
ı	RDIAN TRUST COMPANY	
DESCRIPTION	CAPITAL GUARDIAN	

# FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	6,984. 6,289.	13,273.
REVENUE AND EXPENSES PER BOOKS	6,984. 6,289.	13,273.
		TOTAL
DESCRIPTION	CAPITAL GUARDIAN TRUST COMPANY CAPITAL GUARDIAN TRUST COMPANY	

ATTACHMENT 3

INC.
$\vdash$
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FOUNDATION,
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ROWNY

FEES
ACCOUNTING
PART I -
RT I

CHARITABLE PURPOSES	.0	0.
ADJUSTED NET INCOME	1,250.	1,250.
NET INVESTMENT INCOME	1,250.	1,250.
REVENUE AND EXPENSES PER BOOKS	2,500.	2,500.
DESCRIPTION	PRICEWATERHOUSECOOPERS LLP	TOTALS

ATTACHMENT 4

## - TAXES FORM 990PF, PART I

CHARITABLE <u>PURPOSES</u>		0
ADJUSTED NET INCOME	0	0
NET INVESTMENT INCOME	343. 17.	360.
REVENUE AND EXPENSES PER BOOKS	343. 17.	360.
DESCRIPTION	CAPITAL GUARDIAN - FOREIGN TAX CAPITAL GUARDIAN - FOREIGN TAX	TOTALS

ATTACHMENT 5

## - OTHER EXPENSES PART I FORM 990PF,

CHARITABLE PURPOSES 0. 0.	0
ADJUSTED NET INCOME 0. 0.	0
NET INVESTMENT <u>INCOME</u> 2,717. 55.	3,000.
REVENUE AND EXPENSES PER BOOKS 2, 717. 25. 228.	3,000.
<u>DESCRIPTION</u> CAPITAL GUARDIAN FEES CAPITAL GUARDIAN DIRECT FEES BANK OF AMERICA	TOTALS

PAGE 20

- OTHER INVESTMENTS PART II FORM 990PF,

DESCRIPTION

CAPITAL GUARDIAN TRUST COMPANY

TOTALS

	ENDING
اات	
ATTACHMENT	
	ENDING

BOOK VALUE

FMV

526,703.

535,953.

526,703.

535,953.

52-2190131

ATTACHMENT 8

# FORM 990PF, PART XV - GRANTS AND CONTRIBITIONS PAID DURING THE YEAR

PURPOSE OF GRANT OR CONTRIBUTION AMOUNT	17,100.	ND 250	2,000	SPONSOR PARTICIPANT BECKY MENDELSON	RELAY FOR LIFE OF THE COLLEGE OF WILLIAM & MARY - 100. PARTICIPANT: ARIEL SHAKER-BROWN	500.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT PURPOSE OF GRA	NONE PUBLIC 501(C)(3)	NONE PUBLIC 501(C)(3)	NONE PUBLIC 501(C)(3)	NONE PUBLIC 501(C)(3)	NONE PUBLIC 501(C)(3) PARTICIPANT: P	NONE PUBLIC 501(C)(3)
RECIPIENT NAME AND ADDRESS	THE ROUND HOUSE THEATRE DEVELOPMENT OFFICE PO BOX 30688 BETHESDA, MD 20824-0688	GEORGETCWN UNIVERSITY ANNUAL FUND DEPT 0729 WASHINGTON, DC 20073-0729	MIT ALUMNI FUND MASSACHUSETTS INSTITUTE OF TECHNOLOGY 600 MEMORIAL DRIVE, BLDG W98 - 2ND FLOOR CAMBRIDGE, MA 02139-4822	BREAST CANCER 3-DAY P.C. BOX 650543 DALLAS, TX 75265-0543	AMERICAN CANCER SOCIETY 11835 CANON BOULEVARD, SUITE A102 NEWPORT NEWS, VA 23606	HEALTHNETWORK FOUNDATION 33 RIVER STREET

3.58 28 PM

52-2190131

ATTACHMENT 8 (CONT'D)

AMOUNT	185	900	350	:	. 100.	500.	500.
PURPOSE OF GRANT OR CONTRIBUTION	BIKE TO THE BEACH FOR AUTISM	BIKE TO THE BEACH FOR AUTISM	HEART'S DELIGHT DINNER AND AUCTION		BE BRAVE AND SHARE EVENT	KIDNEY WALK 2009	DONATED ON BEHALF OF KATHY WENGER
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE PUBLIC 501(C)(3)	NONE	PUBLIC 501(C)(3) NONE	PUBLIC 501 (C) (3)	NUNE PUBLIC 501(C)(3)	NONE PUBLIC 501(C)(3)	NONE PUBLIC 501(C)(3)
RECIPIENT NAME AND ADDRESS	BIKE TO THE BEACH INC. C/G BENJAMIN DAILEY	1328 VERMONT AVENUE, NW WASHINGTON, DC 20005 AUTISM SPEAKS	5455 WILSHIRE BOULEVARD, SUITE 2250 LOS ANGELES, CA 90036 AMERICAN HEART ASSOCIATION	STE 530 ARLINGTON, VA 22203	CALLDREN'S NATIONAL MEDICAL CENTER 1650 TYSON'S BOULEVARD, SUITE 1600 MCLEAN, VA 22102	NATIONAL KIDNEY FOUNDATION 5335 WISCONSIN AVENUE, NW WASHINGTON, DC 20015-2078	NATIONAL MULTIPLE SCLEROSIS SOCIETY 4711 CUMBERLAND AVENUE CHEVY CHASE, MD 20815

22,685

TOTAL CONTRIBUTIONS PAID

### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Department of the Treasury Internal Revenue Service

C/O MICHAEL ROWNY

ROWNY FOUNDATION, INC.

Employer identification number 52-2190131

Note: Form 5227 filers need to complete onlyParts I and II

Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the instructions) the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr ) (mo, day, yr) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 -13,207. 3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, -13,204. Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the instructions) the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co ) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b -80,032.6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 -55,212. Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions . . . . 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, -135,244.column (3) on the back

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Schedule D (Form 1041) 2009

Sched	ule D (Form 1041) 2009				Page 2
Par	Summary of Parts I and II  Caution: Read the instructions before completing this part.	(1) Beneficianes (see page 5)	(2) Esta		(3) Total
13	Net short-term gain or (loss)		<del>                                     </del>	•	-13,204.
	Net long-term gain or (loss):				
а	Total for year				-135,244.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b				
С	28% rate gain				
15		<u> </u>			-148,448.
	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-7 nt V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete Part IV a				
Par	IV Capital Loss Limitation				
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line	ne 4c, if a trust), the	smaller of		
a	The loss on line 15, column (3) or b \$3,000			16 (	3,000.)
note C <i>arr</i> y	: It the loss on line 15, column (3), is more than \$3,000, or it Form 1041, page 1, lin ProvelWorksheeton page 7 of the Instructions to figure your capital loss carryover	ie 22 (or Form 990-1	, une 34), is a i	oss, cor	mpiete the Capitai Loss
Par	V Tax Computation Using Maximum Capital Gains Rates				
Form	1 1041 filers. Complete this part only if both lines 14a and 15 in column (2	2) are gains, or an	amount is ent	ered in	Part I or Part II and
there	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than a	zero			
	ion: Skip this part and complete the worksheet on page 8 of the instructions if				
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero			ماريطمط	in income in Bort I
	n <b>990-T trusts.</b> Complete this part <b>only</b> if both lines 14a and 15 are gair form 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this part and				
	r line 14b, col (2) or line 14c, col (2) is more than zero	Complete the wo	iksheet on pa	age o	or the instructions in
_		14-1			
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17			
18	Enter the smaller of line 14a or 15 in column (2)				
40	but not less than zero	<del></del>		1	
19	Enter the estate's or trust's qualified dividends	1 1	ļ	ļ	
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19			}	
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0-	<del>- </del>	j		
22	Subtract line 21 from line 20 If zero or less, enter -0-	22			
23	Subtract line 22 from line 17 If zero or less, enter -0-	23			
	T				
24	Enter the smaller of the amount on line 17 or \$2,300	24	<del></del>		
25	Is the amount on line 23 equal to or more than the amount on line 24?				
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box		į		
	No. Enter the amount from line 23				
26	Subtract line 25 from line 24	26		į	
27	Are the amounts on lines 22 and 26 the same?	1 1			
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27	<del></del>		
	Total II. and the control of 00 (ISI as 00 to block as 0.)				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28			
	0.1 007				
29	Subtract line 28 from line 27			30	
30	Multiply line 29 by 15% ( 15)		and Tarrets	30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate Sch			,,	
	(see the Schedule Ginstructions in the instructions for Form 1041)	• • • • • • • • • •	• • • • • • •	31	<del></del>
	A.I.I. 00 - 104				
32	Add lines 30 and 31			32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate Sch			,,	
	(see the Schedule Ginstructions in the instructions for Form 1041)			33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here	and on Form 104	i, Schedule	1 1	

G, line 1a (or Form 990-T, line 36) .

### SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2009

Department of the Treasury Internal Revenue Service Name of estate or trust

ROWNY FOUNDATION, INC.

Employer identification number 52-2190131

Short-Term Capital Gains and Losses - Assets Held One Year or Less (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co ) (f) Gain or (loss) Subtract (e) from (d) (c) Date sold acquired (mo , day, yr ) (mo , day, yr ) 1a 25.189 SHS BOND FUND OF AMERICA CL F2 10/27/2009 12/03/2009 300. 297. 3.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b .......
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Schedule D-1 (Form 1041) 2009

9F1221 3 000

. . . . . . . .

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side Employer identification number Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (f) Gain or (loss) Subtract (e) from (d) acquired (mo , day, yr ) (mo , day, yr ) instructions) 6a 769.92 SHS CG US EQUITY TXT 2553 **VARIOUS VARIOUS** 16,324. 23,841. -7,517. 27.3 SHS CG US EQUITY TXT 2553 **VARIOUS VARIOUS** 665. 818. -153. 19,970.92 SHS CG US EQUITY TXT 2553 **VARIOUS VARIOUS** 527,432. 599,794. -72,362. 528,891.99 SHS AMERICAN FUNDS MONEY MARKET FUND F **VARIOUS VARIOUS** 528,892. 528,892. 0. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b ...... -80,032.