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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

OMB No 1545-0052

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements 04/01 , 2009, and ending 2010 For calendar year 2009, or tax year beginning Initial return G Check all that apply Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number KARETSKY FAMILY MEMORIAL FUND Use the IRS AND SETH KAHN FOUNDATION, INC. label. 84-1193115 Otherwise. Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see page 10 of the instructions) print or type. 1660 SILVER KING DRIVE See Specific City or town, state, and ZIP code If exemption application is Instructions. pending, check here 1 Foreign organizations, check here ASPEN, CO 81611 Foreign organizations meeting the 85% test, check here and attach H Check type of organization | X | Section 501(c)(3) exempt private foundation computation . Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated J Accounting method. X Cash Fair market value of all assets at end under section 507(b)(1)(A), check here . of year (from Part II, col (c), line Other (specify) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis *16)* ▶ \$ 248,551. under section 507(b)(1)(B), check here . > Part I Analysis of Revenue and Expenses (The (d) Disbursements total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in (a) Revenue and (b) Net investment (c) Adjusted net for charitable expenses per income income purposes books column (a) (see page 11 of the instructions) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ attach Sch B. 3 Interest on savings and temporary cash investments 4,503. 4,503. 4,503. Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 24,538 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 24,538 Capital gain net income (from Part IV, line 2) . Net short-term capital gain . . Income modifications . Gross sales less returns OGDEN. UT and allowances · · · b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 29,041 29,041. 4,503. Total. Add lines 1 through 11 Operating and Adminisfigited By Benses WAR Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages Pension plans, employee benefits 15 16a Legal fees (attach schedule) 848 400 0 448 **b** Accounting fees (attach schedule) c Other professional fees (attach schedule). . . 289 289 Taxes (attach schedule) (see page 14 of the instructions) 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings 22 Printing and publications Other expenses (attach schedule) ATCH 3. 3,221 3,221. 24 Total operating and administrative expenses. 4,358 689 0 3,669. Add lines 13 through 23 22,055 22,055. 25 Contributions, gifts, grants paid 26,413 689 0. 25,724. 26 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 27 2,628 a Excess of revenue over expenses and disbursements 28,352 b Net investment income (if negative, enter -0-) 4,503. c Adjusted net income (if negative, enter -0-). .

Part	Altached schedules and amounts in the description column should be for end-of-year	Attached schedules and amounts in the description column should be for end-of-year Beginning of year End of y		year		
	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash - non-interest-bearing					
` 2	Savings and temporary cash investments	774.	7,648.	7,648		
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 12	Inventories for sale or use					
Assets 0 9 0	Prepaid expenses and deferred charges					
४ 10 a	Investments - U.S. and state government obligations (attach schedule) .					
l t	n Investments - corporate stock (attach schedule) ATCH 4	167,674.	163,428.	240,903		
11	Investments - corporate bonds (attach schedule). Investments - land, buildings, and equipment basis					
	and equipment basis Less accumulated depreciation (attach schedule)					
12	Investments - mortgage loans			-, -, -, -		
13	Investments - other (attach schedule) Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)		-			
15	Other assets (describe					
16	Total assets (to be completed by all filers - see the					
10	instructions Also, see page 1, item I)	168,448.	171.076	248,551		
17	A annuals aroughly and around a second		272,070			
18			· · · · · · · · · · · · · · · · · · ·			
	Grants payable Deferred revenue					
Ciabilities 20 21 21 20 21	Loans from officers, directors, trustees, and other disqualified persons					
e 21	Mortgages and other notes payable (attach schedule)					
ات ₂₂	Other liabilities (describe					
122	Other habilities (describe					
23	Total liabilities (add lines 17 through 22)					
	Foundations that follow SFAS 117, check here					
Sel	and complete lines 24 through 26 and lines 30 and 31.					
25 25						
8 26	Temporarily restricted Permanently restricted					
B 20	Foundations that do not follow SFAS 117,	-				
.들	check here and complete lines 27 through 31.					
් 27	Capital stock, trust principal, or current funds	113,601.	113,601.			
\$ 28	Paid-in or capital surplus, or land, bldg , and equipment fund					
29	Retained earnings, accumulated income, endowment, or other funds	54,847.	57,475.			
¥ 30	Total net assets or fund balances (see page 17 of the					
Net Assets or Fund Balances 2 2 2 2 3 0 3 0 0 0 0 0 0 0 0 0 0 0 0 0	· · · · · · ·	168,448.	171,076.			
31	Instructions)		1/1/0/01			
31	of the instructions)	168,448.	171,076.			
Part	Analysis of Changes in Net Assets or Fund E		2,2,0,0,1			
	al net assets or fund balances at beginning of year - Part II,		agree with			
	l-of-year figure reported on prior year's return)			168,448		
	an an author Dark Lilea 07-		_	2,628		
	or more and and included in the O. /iteminal .		· · · · · · · · · 	_, 320		
	11 4 0 2			171,076		
5 Dos	aranana natunaludad in lina 2 (itamira) s					
6 Tota	al net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II. column (b)	line 30 6	171,076		

Page 3
e sold
ay, yr)
or
38.
X No
140

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Pa	rt VI ,Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e ins	tructio	ns)
1 a	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)			
Ъ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		5	<u>67.</u>
	here ▶ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2		5	67.
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		5	67.
6	Credits/Payments			
а				
b	Exempt foreign organizations-tax withheld at source			
С	' '' '' '' '' '' '' '' '' '' '' '' '' '			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		2	49.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	· -		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	_	3	18.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
1,1	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities			
1 a	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	1	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		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
d				
	(1) On the foundation ►\$ (2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Χ
4 a		4a		X
b		4b	·	X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	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	İ		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
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	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	ınstructions) ► COLORADO			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	_	x	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			Х
	27)? If "Yes," complete Part XIV	_9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х

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

Χ

Х

3 b

Form 990-F	PF (2009)		84-119	93115	Page 6
Part VII	Statements Regarding Activities f	or Which Form 4	720 May Be Requ	ired (continued)	
5a Duri (1) (2) (3) (4) (5) b If ar Reg Org.	Statements Regarding Activities fing the year did the foundation pay or incur any amort Carry on propaganda, or otherwise attempt to influe Influence the outcome of any specific public election directly or indirectly, any voter registration drive? Provide a grant to an individual for travel, study, or of Provide a grant to an organization other than a chart section 509(a)(1), (2), or (3), or section 4940(d)(2)? Provide for any purpose other than religious, charitate purposes, or for the prevention of cruelty to children only answer is "Yes" to 5a(1)-(5), did any of the transfullations section 53 4945 or in a current notice regard anizations relying on a current notice regarding disaster answer is "Yes" to question 5a(4), does the found	unt to ence legislation (section (see section 4955), of their similar purposes? Intable, etc., organization (see page 22 of the inable, scientific, literary, or animals?	on 4945(e))?	Yes X No. Second of the control	
beca If "Y	ause it maintained expenditure responsibility for the gree," attach the statement required by Regulations sec	grant?		Yes X N	>
on a b Did	the foundation, during the year, receive any funds, a personal benefit contract?			Yes No	o <mark>6b</mark>
7a Ata	ny time during the tax year, was the foundation a pa	•	· ·		
	es, did the foundation receive any proceeds or have				
Part VI	and Contractors				-
1 List	all officers, directors, trustees, foundation n				· · · · · · · · · · · · · · · · · · ·
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JENNIE	TER ANDRES	PRESIDENT	0.	0.	C
GERALE	DINE K. KARETSKY	TREASURER	0.	0.	C
ROBERI	KARETSKY	VICE PRESIDENT	0.	0.	C
ANDREW	KARETSKY	SECRETARY	0.	0.	C
	pensation of five highest-paid employees (of ne, enter "NONE."	ther than those inc	cluded on line 1 - se	ee page 23 of the ins	tructions).
	e and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
N/A			0.	0.	0
				1	
Total nun	mber of other employees paid over \$50,000 .	· · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	,	▶

Part VIII	Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nagers, 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
N/A			
			0
- 			
		<u>.</u>	
			·
Total numbe	er of others receiving over \$50,000 for professional services		NONE NONE
Part IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant statistical info	ormation such as the number	Expenses
1 N/A	** ***********************************		
2			
3			
4			
	Summary of Program-Related Investments (see page 23 of the in		
	two largest program-related investments made by the foundation during the tax year on lines 1 a	and 2	Amount
1 NONE			
2			
-			
All other prog	gram-related investments. See page 24 of the instructions		
3 NONE			
	·		
T-4-1 A-1-1	and Albertal 2	<u> </u>	
rotal. Add I	nes 1 through 3	<u> </u>	

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions)	oreign foundat	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	225,772.
b	Average of monthly cash balances	_ 1b	
C		1c	0.
d		1d	225,772.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	_0.
3	Subtract line 2 from line 1d	3	225,772.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
		4	3,387.
5	of the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	222,385.
6	Minimum investment return. Enter 5% of line 5	. 6	11,119.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5)	orivate operating	
	foundations and certain foreign organizations check here ▶ and do not complete t	hıs part)	
1	Minimum investment return from Part X, line 6	1	11,119.
2 a	Tax on investment income for 2009 from Part VI, line 5	67.	
b			
С	Add lines 2a and 2b	2c	567.
3	Add lines 2a and 2b Distributable amount before adjustments Subtract line 2c from line 1	. 3	10,552.
4	Recoveries of amounts treated as qualifying distributions	. 4	
5	Add lines 3 and 4	5	10,552.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 <u> </u>	7	10,552.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
		1a	25,724.
b			0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	• • • • • • • • • • • • • • • • • • • •	
-		2	0.
3	purposes Amounts set aside for specific charitable projects that satisfy the	• •	
а	Suitability test (prior IRS approval required)	3a	0.
b	Cosh distribution tost (attach the required chedula)	3	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		25,724.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment incom		
5	Enter 1% of Part I, line 27b (see page 26 of the instructions)		N/A
6		1 _ 1	25,724.
J	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	• • ————	
	qualifies for the section 4940(e) reduction of tax in those years	ig whether the i	oundation

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
•		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI.	Corpus	Years prior to 2008	2008	2009
	line 7	· -	,		10,552.
2	Undistributed income, if any, as of the end of 2009				
2					
	Enter amount for 2008 only Total for prior years 20 07 20 06 20 05				
3	Excess distributions carryover, if any, to 2009 From 2004 49, 176.				
b					
С					
d	From 2007				
	From 2008				
f	Total of lines 3a through e	235,435.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 25,724.				
а	Applied to 2008, but not more than line 2a				_
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election				
٠	required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				10,552.
	Remaining amount distributed out of corpus	15,172.	<u></u>	·	
5	Excess distributions carryover applied to 2009	·			
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
_		250,607.			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	230,001.			
þ	Prior years' undistributed income Subtract				
_	line 4b from line 2b 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				
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			- 	
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2010				
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				
	instructions)				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the				
	instructions)	49,176.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	201,431.			
10	Analysis of line 9				
	Excess from 2005				
	Excess from 2006				
c	Excess from 2007				
d	Excess from 2008				
	Excess from 2009				

Pa	rt XIV . Private Oper	ating Foundations	see page 27 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABL
	If the foundation has	received a ruling or d	etermination letter tha	t it is a private opera	ating	 -
	foundation, and the ruling					
p,	Check box to indicate wh		private operating found)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year	(h) 2000	Prior 3 years	40000	(e) Total
	Justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	,
b	85% of line 2a					
С	Qualifying distributions from Part					_
	XII, line 4 for each year listed .					
đ	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
-	(1) Value of all assets (2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
С	Ine 6 for each year listed "Support" alternative test - enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942 ()(3)(8)(iii)					
	(3) Largest amount of support from an exempt organization					
_	(4) Gross investment income.					
Pa	at any time o	during the year - se	e page 28 of the in	only if the found structions.)	ation had \$5,000	or more in assets
1 a	Information Regarding List any managers of before the close of any	the foundation who h	nave contributed mor			
_	N/A	Alea farredation rules	100/	£ 4b415		
b	List any managers of ownership of a partner					large portion of the
	N/A					
2	Information Regardin	=		-		
	Check here ► X if t unsolicited requests f organizations under ot	or funds If the foun	dation makes gifts, (grants, etc (see page	table organizations a e 28 of the instruction	ind does not accept ons) to individuals or
а	The name, address, a	nd telephone number	of the person to who	m applications should b	e addressed	,
b	The form in which app	lications should be su	bmitted and informati	on and materials they	should include	
С	Any submission deadli	nes				
d	Any restrictions or li	mitations on awards	, such as by geogra	aphical areas, charita	able fields, kinds of	institutions, or other

Part XV Supplementary Information (continued)									
3 Grants and Contributions Paid During the Year or Approved for Future 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)	or substantial contributor	recipient	Contribution						
a Paid during the year									
ATTACHMENT 5		,							
Tatal		<u> </u>		22,055					
Total			▶ 3a	22,033					
b Approved for future payment									
Total			▶ 3b						

Part XV	-A Analysis of Income-Produ	cing Activ	vities			
	s amounts unless otherwise indicated		ated business income	Excluded b	y section 512, 513, or 514	(e)
•	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d)	(e) Related or exempt function income (See page 28 of the instructions)
a	_					,
b						
•						
f						
g Fee	s and contracts from government agencies					
2 Membe	rship dues and assessments					
	on savings and temporary cash investments				_,	
	ds and interest from securities		4,503.	14		
	tal income or (loss) from real estate					
	ot-financed property					
	debt-financed property					
	al income or (loss) from personal property					
	nvestment income		24,538.	18		
	(loss) from sales of assets other than inventory		24,336.	10		<u>.</u>
	ome or (loss) from special events				-	
	profit or (loss) from sales of inventory			<u> </u>		
	evenue a					<u> </u>
						
e						·
	Add columns (b), (d), and (e)		29,041.			······································
	add line 12, columns (b), (d), and (e)		·		12	29,041.
(See works	sheet in line 13 instructions on page 28	· · · · · · · to verify calci	ulations)			
	-B Relationship of Activities			empt Purp	ooses	
Line No.	Explain below how each activities the accomplishment of the fo	ity for whi	ch income is reported	ın columr	n (e) of Part XVI-A cor	ntributed importantly to such purposes) (See
	page 29 of the instructions)					
					 -	· · · ·
	-	-				
		_				
						 .
-			"			
						······································
	-		NOT APPLICABLE	 E		
						
					-	
						
		-				-
						
						
		<u>. –</u>				
						

Pai	rt XVI	Information R Exempt Organ		Fransfers To an	d Transa	ctions a	nd Relati	onships	s With N	lonc	harit	able
1.	ın se	he organization directly of the Co									Yes	No
а	Trans	izations? ifers from the reporting for	undation to a ne	oncharitable exempt org	ganization of							
	(1) C	ash								1a(1)		X
		ther assets								1a(2)		X
b		transactions										v
		ales of assets to a noncha								1b(1)	-	$\frac{X}{X}$
		urchases of assets from a ental of facilities, equipme								1b(2) 1b(3)		<u>x</u> -
		eimbursement arrangemer								1b(4)		<u>X</u>
		oans or loan guarantees .								1b(5)		X
		erformance of services or										Х
С		ng of facilities, equipment										Χ
		e answer to any of th									fair r	narket
	value	of the goods, other a	assets, or serv	vices given by the	reporting fo	oundation	if the found	dation rec	eived less	than	fair r	narket
	value	in any transaction or	sharing arran	gement, show in co	lumn (d) t	he value o	of the good	s, other	assets, or	service	es rec	eived
(a) I	ine no	(b) Amount involved	(c) Name of	noncharitable exempt orga	nization	(d) Descr	ription of transf	ere transact	one and char	ng arra	ngeme	nte
(4)		N/A	(c) Ivalic of	nonchantable exempt orga	mzation	N/A	iption of transi	ers, transact	ions, and sna	ing ana	ngeme	113
								••				
												
		:										
2a		e foundation directly or i	=			more tax-ex	empt organi	zations de:	scribed in r	_		7
		on 501(c) of the Code (other		501(c)(3)) or in section	527?				l	Ye	es [No 2
b	If "Ye	s," complete the following (a) Name of organization	schedule	(b) Type of o	reanization			a) Decemble	on of relations	hip		
		(a) Name of organization		(b) Type of o				c) Descripti	on orrelations	ыпр		
							-	-				
		· · · · · · · · · · · · · · · · · · ·				-						
		· · · · · · · · · · · · · · · · · · ·	•	/						•		
	Under belief,	penalties of perjury, I declar it is true, correct, and compl	re that I bave ex lete Declaration	amined this return, inclu- of preparer (other than ta	ding accompa expayer or fid	anying schedi uciary) is bas	ŀ		_	f my k r has ai	nowled ny knov	ge and wledge
ا ره	1	Ignature of officer or trustee	<u>/ W (1</u>	xouy.		Date	1106/	<u> T足ッ</u> Title	STEE			
er l	· / ^s	ignature or officer or trustee	/ 		Data	Date	<u>, </u>	Title	Preparer's	ıdentıf	vina	
Sign Here		Preparer's	· D d		Date	y Lou	Check if self-employe	ed ►X	number (Se page 30 of 1	e Signa he instr	ature o	
ر ا	Paid Prepare Use On	Firm's name for yours if	JOSEPI	H KOWAR, ESQ.		7/00//		EIN ▶	100200			
	Prep Use	self-employed), address,		RIGINAL ROAD			-					
		and ZIP code	BASAL'			816	21	Phone no	970-9	27-2	407	
				<u>-</u>			,		F	om 99	0-PF	(2009)

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

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME										
, Kınd of	Property		Descr	iption	ļ.	or 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)				
		BARCLAYS IN				VARIOUS 24,538.	VARIOUS			
TOTAL GAIN(I	GOSS)					24,538.				

ATTACHMENT 2

ATTACHMENT 2

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	NET	INVESTMENT	INCOME
REVENUE	AND	EXPENSES	PER BOOKS
			DESCRIPTION

289.

289.

TOTALS

ATTACHMENT

ATTACHMENT 3

- OTHER EXPENSES PART I FORM 990PF,

REVENUE AND EXPENSES PER BOOKS

CHARITABLE
PURPOSES
3,221.

DESCRIPTION MEETINGS

3,221.

TOTALS

PAGE 20

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

LEHMAN BROTHERS

TOTALS

ATTACHMENT 4

ENDING BOOK VALUE

ENDING FMV

240,903.

240,903.

163,428.

163,428.

ATTACHMENT 4

PAGE 21

THE
DURING
PAID
CONTRIBUTIONS
AND
GRANTS
۱ >
PART X
990PF,

EORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	DURING THE YEAR		ATTACHMENT 5
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GARRETT B SMITH FOUNDATION			9, 500
ROBERT D SUTHERLAND TUREN FOUND.			
ASPEN MUSIC FESTIVAL			
VARIOUS			3, 630
NEW YORK STEM CELL FOUNDATION			200
AINSWORTH FOUNDATION			1,500

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			ATTACHMENT S (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
STAND FOR CHILDREN			2,500

1,000

22,055	
TOTAL CONTRIBUTIONS PAID	

2,500.

ASPEN WRITERS FOUNDATION

ANDERSON ARTS CENTER

KAGX

4,925

ATTACHMENT 5 PAGE 23

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

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

			UND		1		n number
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 4 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss Carryover Worksheet 5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back. Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property. (b) Date acquired. (c) Date sold. (e) Cost or other back.					1	(0.6	
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)			(d) Sales price	(see page 4 of	the	(f) Gain or (loss) for the entire year
12		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			instructions		Subtract (e) from (d)
ıa							
			L	1	!		
b	Enter the short-term gain or (loss), if any	, from Schedule D	-1, line 1b			1 b	
2	Short-term capital gain or (loss) from Fo	rms 4684, 6252,	6781, and 882	.4		2	
_							
						3	
4	•			•		4	
5	Net short-term gain or (loss). Combine li	nes 1a through 4	ın column (f)	Enter here and on I	ne 13,	7	,
AND SETH KAHN FOUNDATION, INC. Note: Form 5227 filers need to complete only Perts I and II Part Short-Term Capital Gains and Losses - Assets Held One Year or Less (a) Description of property (Example 100 shares 7% preferred of 12° Co) b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b. Short-term capital gain or (loss) from partnerships, S corporations, and other estates or trusts Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (g) on the back. Part Short-term gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (g) on the back. Part Short-term gain or (loss) from Forms 4684, 6252, 6781, and 8824 Beach Short-term gain or (loss) from Forms 4684, 6252, 6781, and 8824 A Short-term gain or (loss) from Forms 4684, 6252, 6781, and 8824 B Net long-term capital Gains and Losses - Assets Held More Than One Year (g) Date sody (mo, day, yr) (d) Sales price (los) Capital Gains and Losses - Assets Held More Than One Year (s) Date sody (mo, day, yr) (d) Sales price (los) Capital Gains and Losses - Assets Held More Than One Year (s) Date sody (mo, day, yr) (d) Sales price (los) Capital Gains and Losses - Assets Held More Than One Year (s) Date sody (mo, day, yr) (d) Sales price (los) Capital Gains and Losses - Assets Held More Than One Year (s) Date sody (mo, day, yr) (d) Sales price (los) Capital Gains and Losses - Assets Held More Than One Year (s) Date sody (mo, day, yr) (d) Sales price (los) Capital Gains (los) Capital Cap			5				
AND SETH KAHN FOUNDATION, INC. Note: Form 5227 filers need to complete only Parts I and II Part Short-Term Capital Gains and Losses - Assets Held One Year or Less (a) Description of property (Example 100 shares 7% preferred of 72° Co) (b) Date acquired (c) Date sold (mo. day, yr) (d) Sales proof b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 4 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Carryover Worksheet Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and column (3) on the back. Part II Long-term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (Example 100 shares 7% preferred of 72° Co) (b) Date acquired (in) Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (Example 100 shares 7% preferred of 72° Co) (b) Date acquired (in) Capital Gains and Cosses - Assets Held More Than One Year (a) Description of property (Example 100 shares 7% preferred of 72° Co) (b) Date acquired (in) Capital Gains and Cosses - Assets Held More Than One Year (a) Description of property (Example 100 shares 7% preferred of 72° Co) (b) Date acquired (in) Capital (in) Capital Gains and Cosses - Assets Held More Than One Year (a) Description of property (Example 100 shares 7% preferred of 72° Co) (b) Date acquired (in) Capital Gains and Cosses - Assets Held More Than One Year (a) Description of property (in) Capital Gains and Cosses - Assets Held More Than One Year (a) Description of property (in) Capital Gains and Cosses - Assets Held More Than One Year (a) Date sold (in) Capital Gains and Cosses - Assets Held More Than One Year (a) Date sold (in) Capital Gains and Cosses - Assets Held More Than One Year (a) Capital Gains Assets Held More Than One Year (b) Date acquire		ne Year	(a) Cost or other basis (f) (
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)				(e) Cost or other basis (see page 4 of the instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
AND SET Note: Form 52 Part I Sho (Example 1a b Enter the 2 Short-ter 3 Net short 4 Short-ter Carryove 5 Net shor column (: Part II Lon (Example 6a b Enter the 7 Long-ter 8 Net long- 9 Capital g 10 Gain from 11 Long-ter Carryove							
		L	<u> </u>				
h	Enter the long-term gain or (loss) if any	from Schedule D-	.1 line 6h			6b	24,538.
-	Enter the long term gain or (1000), if any,	monn concadio B	1,				,
7	Long-term capital gain or (loss) from For	ms 2439, 4684,	6252, 6781, a	nd 8824		7	
8	Net long-term gain or (loss) from partner	ships, S corporat	ions, and other	estates or trusts		8	
_	Canital care distributions						
9	Capital gain distributions					9	
10	Gain from Form 4797. Part I					10	
	Long-term capital loss carryover Enter t	he amount, if any	, from line 14 o	of the 2008 Capital L	oss	- <u></u>	
	Carryover Worksheet					11	(
12	Net long-term gain or (loss). Combine lin	es 6a through 11	ın column (f)	Enter here and on	line 14a,		
	column (3) on the back					12	24,538.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

Sche	dule D (Form 1041) 2009					Page	e i
Par	Summary of Parts I and II Caution: Read the instructions before completing this p	nart	(1) Beneficiaries (see page 5)	s' (2) Es		(3) Total	
13	*Net short-term gain or (loss)	13					_
14	Net long-term gain or (loss):						_
а	Total for year	14a				24,538	3.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b					_
	28% rate gain	14c					
15		15		ĺ		24,538	₹.
Note to Pa	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or For irt V, and do not complete Part IV If line 15, column (3), is a net loss, complete P	m 990 art IV a	-T, Part I, line 4a) If and the Capital Loss	lines 14a and 1 Carryover Worl	5, col	umn (2), are net gains, go t, as necessary)
Par	t IV Capital Loss Limitation	-					_
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, lı	ne 4c, if a trust), the	smaller of			
а	The loss on line 15, column (3) or b \$3,000				16	1(
Note	The loss on line 15, column (3) or b \$3,000 cr if Form 1041, page over Worksheet on page 7 of the instructions to figure your capital loss carryover	1, lin	e 22 (or Form 990-1	, line 34), is a	loss, d	complete the Capital Loss	5
Par						·	_
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu)) are gains or an	amount is er	tered	d in Part I or Part II and	4
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor			amount is er	ilered	JIII FAILT OF FAIL II AIIC	,
	tion: Skip this part and complete the worksheet on page 8 of the instruc						
	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						
Forn	n 990-T trusts. Complete this part only if both lines 14a and 15 are orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa	gair	is, or qualified div	ridends are i	nclud	ed in income in Part	1
	er line 14b, col (2) or line 14c, col (2) is more than zero	t and	complete the wo	rksneet on p	age (o of the instructions i	'
		4)	47		ı	Τ	
17 18	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3 Enter the smaller of line 14a or 15 in column (2)	4) .	17		-		
10	but not less than zero						
19	Enter the estate's or trust's qualified dividends		- 				
	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-						
22	Subtract line 21 from line 20 If zero or less, enter -0-						
23	Subtract line 22 from line 17 If zero or less, enter -0-				1		
					1		
24	Enter the smaller of the amount on line 17 or \$2,300		24				
25	Is the amount on line 23 equal to or more than the amount on line 24		••	<u></u>	1		
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box						
	No. Enter the amount from line 23.		25				
26	Subtract line 25 from line 24		26		1		

No. Enter the smaller of line 17 or line 22

Multiply line 29 by 15% (15)

Figure the tax on the amount on line 23 Use the 2009 Tax Rate Schedule for Estates and Trusts

Add lines 30 and 31

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

27

Schedule D (Form 1041) 2009

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Are the amounts on lines 22 and 26 the same?
Yes. Skip lines 27 thru 30, go to line 31
No. 1

Subtract line 28 from line 27

Enter the amount from line 26 (If line 26 is blank, enter -0-)

(see the Schedule Ginstructions in the instructions for Form 1041)......

7

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 KARETSKY FAMILY MEMORIAL FUND 84-1193115 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 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) 6a BARCLAYS INVESTMENT ACCOUNT VARIOUS VARIOUS 24,538. 24,538.

Form 8	858 (Rev 4-2009)				Page 2
• If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete onl	y Part II and check this box	٠		► X
	. Only complete Part II if you have already been granted an automatic 3-month ex				
	you are filing for an Automatic 3-Month Extension, complete only Part I (on page				
	Additional (Not Automatic) 3-Month Extension of Time. Only		oies	needed).
	Name of Exempt Organization, KARETSKY, FAMILY, MEMORIAL, FUND	Employer identif			<u> </u>
Type	OF AND CETH VALIN COUNDATION INC	84-11931	15		
print	Number street and room or suite no. If a P.O. box see instructions	For IRS use only			
File by extend	tile				
due da filing t	ate for				
return	See ACRES GO 01611		,		
instruc				·	
Chec	k type of return to be filed (File a separate application for each return)		Г		6060
	Form 990 X Form 990-PF	Form 1041-A	 -	Form	
	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust)	Form 4720	L	Form	8870
لــــــــــــــــــــــــــــــــــــــ	Form 990-EZ Form 990-T (trust other than above)	Form 5227			
	P! Do not complete Part II if you were not already granted an automatic 3-mo	nth extension on a previo	usly	filed Forr	n 8868.
 Th 	e books are in the care of GERALDINE KARETSKY				
Te	lephone No. ▶ 970 925-1282 FAX No ▶				
• If t	he organization does not have an office or place of business in the United States, of	check this box			>
• If t	his is for a Group Return, enter the orga <u>niza</u> tion's four digit Group Exemption Numb	oer (GEN) If	this is	;	
for th	ne whole group, check this box If it is for part of the group, check this	s box ▶ and atta	ch a		
	ith the names and EINs of all members the extension is for				
4	I request an additional 3-month extension of time until 02/15/2011				
	For calendar year or other tax year beginning 04/01/2009	and ending 03/31/	20 10)	
		 ,	ie in a	accounting	period
7	State in detail why you need the extension ADDITIONAL TIME IS NECE:			,	
•	INFORMATION REQUIRED TO FILE A COMPLETE AND ACCURATE	TAX RETURN.			
		· · · · · · · · · · · · · · · · · · ·			
					-
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the	tentative tax less any	TTT		
8a	• •	temative tax, less any	8a	\$	0.
	nonrefundable credits. See instructions	le eredite and estimated	+ O a	Ψ	
ь	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable		'		
	tax payments made Include any prior year overpayment allowed as a credit	and any amount paid		•	272.
	previously with Form 8868		8ь	•	212.
С	Balance Due. Subtract line 8b from line 8a Include your payment with this form			_	
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S		8c	\$	
	Signature and Verification				
	penalties of perjury, I declare that I have examined this form, including accompanying schedules a	nd statements, and to the best of	ıt my l	knowledge a	and belief,
it is tru	e, correct, and complete, and that I am authorized to prepare this form				
		•		1.10	1
Signati	ure ▶ O=yah Plum Title ▶ Att	one Date	<u> </u>	11/8/	2010
		<i></i>	Form	8868 (Re	v 4-2009)
	(∮oseph kowar, esq.	U			
	√461 ORIGINAL ROAD				
	BASALT, CO 81621				

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