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Form **990-PF**

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements , 2009, and ending 2010 For calendar year 2009, or tax year beginning 5/01 4/30 G Check all that apply Initial return Initial Return of a former public charity Final return Address change Amended return Name change Employer identification number Use the THE HALLINGBY FAMILY FOUNDATION, INC. IRS label. 06-1516271 Otherwise. C/O PAUL HALLINGBY-7 GRACIE SQUARE 10A Telephone number (see the instructions) print NEW YORK, NY 10028 or type. See Specific If exemption application is pending, check here Instructions 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Н Check type of organization here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year Accounting method X Cash Accrual J under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) F If the foundation is in a 60-month termination (Part I. column (d) must be on cash basis) under section 507(b)(1)(B), check here 1,922,541 Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) expenses per books income ıncome for charitable purposes (cash basis only) (see the instructions)) Contributions, gifts, grants, etc, received (att sch) X if the foundn is not req to att Sch B 2 Ck ► Interest on savings and temporary ⊏ 15 N/A 15 cash investments • Ch DOMENE STATE Dividends and interest from securities 41 41 MAR CALLEGE ANGELINE 5a Gross rents **b** Net rental income or (loss) A PORT OF THE PROPERTY OF THE 1.7公司第四条 Lie Brit Michael Co 1646 185.74 · ···斯···· (2014年) (327) 17年李秋至日 6a Net gain/(loss) from sale of assets not on line 10. b Gross sales price for all assets on line 6a 2050 8 CX 3 W. ... A TORE NAMED OF THE PARTY. 學者學學不可能性的學學學 7 Capital gain net income (from Fart W. line 2). **网络别个斯·特特的第**章 200 SANTE TRANSPORT Income modifications 源分离 Ó 10 a Gross sales less returns and allowances \$ FEB 28 201 b Less Cost of goods sold **多是"公**斯特 1 c Gross profit/(loss) (att still) CDEN 11 Other income (attach-schedule) **经验的证券** 公司 使复杂酸 满水 E27/4/1/2 (10) 12 Total. Add lines 1 through 11 56 56 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) **b** Accounting fees (attach sch) See St 1 3,900 1,950. 1,950. c Other prof fees (attach sch) OPERATING 17 Interest 18 Taxes (attach schedule)(see instr.) Depreciation (attach 19 sch) and depletion Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Other expenses (attach schedule) See Statement 2 151 151 24 Total operating and administrative expenses. Add lines 13 through 23 4,051 2,101 1,950. 25 Contributions, oifts, grants paid Part XV 151,100 151.100. Total expenses and disbursements. 155,151 2,101 153,050 Add lines 24 and 25 Subtract line 26 from line 12: 1.0 a Excess of revenue over expenses ٠, -155,095 and disbursements 0 b Net investment income (if negative, enter -0-) 4 30 C Adjusted net income (if negative, enter -0-)

Par	. 11	Polonos Chasta	Attached schedules and amounts in the description	Beginning of year	End o	of year
Pan	ii I	Balance Sheets	column should be for end-of year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing			
	2	Savings and tempor	ary cash investments	33,589.	3,493.	3,493.
	3	Accounts receivable	→		4.5	
	1	Less allowance for	doubtful accounts ►		•	
	4	Pledges receivable	>			
		Less allowance for	doubtful accounts			
	5	Grants receivable				
	6		ers, directors, trustees, and other ch schedule) (see the instructions)		-	
	7	Other notes and loans reco	, ,	- ,	, vá v	
A	'	Less: allowance for	·			hamadaanin aanimaanimaanid
A S E T	8	Inventories for sale of				
Ě	9	Prepaid expenses ar				
S	-	•	and state government			
	١,	Investments — corporate :				
		: Investments — corporate I	·			
		Investments - land,	,		, r j %,	1
	''	equipment basis			5.	
		Less accumulated deprecal (attach schedule)				
	l .	Investments - morto	, •	1 011 740	006 740	1 010 040
	i .		(attach schedule) Statement 3	1,011,749.	886,749.	1,919,048.
	14	Land, buildings, and e				
		Less accumulated deprect (attach schedule)	ation · ·			
		Other assets (describ	pe ► See Statement 4) completed by all filers —		1.	
	10	see instructions Also	o, see page 1, item I)	1,045,338.	890,243.	1,922,541.
Ļ	17	Accounts payable an	d accrued expenses			
Å	18	Grants payable	-			
В	19	Deferred revenue				
Ĺ	20	Loans from officers, direct	ors, trustees, & other disqualified persons	18,232.	18,232.	
1	21	Mortgages and other notes				
i	22	Other liabilities (descri	be •)			
E S	23	Total liabilities (add	lines 17 through 22)	18,232.	18,232.	
	23		low SFAS 117, check here	10,232.	10,232.	
		and complete lines 2	24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted				
	25	Temporarily restricte	ŀ			
A D	26	Permanently restricted	-			
SB		and complete lines 2	not follow SFAS 117, check here 🕨 🗓			
A B A L A		·	-	1 005 605	1 005 605	
	27		rincipal, or current funds	1,025,625.	1,025,625.	
SNC	28		or land, building, and equipment fund	1 401	152 614	
OE	29		lated income, endowment, or other funds	1,481.	-153,614.	
R S	30		und balances (see the instructions) net assets/fund balances	1,027,106.	872,011.	
	31	(see the instructions))	1,045,338.	890,243.	
Part	111	Analysis of Chan	ges in Net Assets or Fund Balance	es	<u>· </u>	
1	Total	net assets or fund ba	ilances at beginning of year - Part II, colu	mn (a), line 30 (must ac	aree with	
•	end-	of-year figure reported	on prior year's return).	(=>) == (ma) m;	1	1,027,106.
2	Ente	r amount from Part I,	line 27a .	r	2	-155,095.
3	Other	increases not included in fin	e 2 (itemize)		3	
4		lines 1, 2, and 3		• •	4	872,011.
5		ases not included in line 2 (i			5	
6_	Total	net assets or fund ba	lances at end of year (line 4 minus line 5)	- Part II, column (b), II	ne 30 6	872,011.

		NGBY FAMILY FOUNDATION Losses for Tax on Investmen	'		06-1516271	Page 3
Fai	(a) List and describe	e the kind(s) of property sold (e.g., se, or common stock, 200 shares M	real estate,) How acquired P — Purchase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
<u>`</u> 1a	n N/A	· · · · · · · · · · · · · · · · · · ·		D — Donation		
t)					
				- 1		
					ļ	
		(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or	(loss)
	(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) m	
a						<u>-</u>
		-				
е					•	
	Complete only for assets show	ing gain in column (h) and owned b	y the foundation on 12/31/69		(I) Gains (Colu	mn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any		gain minus column (k an -0-) or Losses (fro), but not less
<u>a</u> b						
			· · · -			
d						_
е	· · · · · · · · · · · · · · · · · · ·					
_	Candal sava and income as (not	If gain, also	o enter in Part I, line 7 ter -0- in Part I, line 7			
2	Capital gain net income or (net	If (loss), en	ter -0- in Part I, line 7	2		
3	Net short-term capital gain or (loss) as defined in sections 1222(5)	and (6)			
	If gain, also enter in Part I, line	8, column (c) (see the instructions) If (loss), enter -0-			
- * * *	ın Part I, line 8			3		
		Section 4940(e) for Reduce				
(For	optional use by domestic private	e foundations subject to the section	4940(a) tax on net investment	income)		
If sec	ction 4940(d)(2) applies, leave th	his part blank.				
		*		d 2	□vaa	V No
		tion 4942 tax on the distributable an ify under section 4940(e). Do not co		erioar,	∐ Yes	X No
1		n each column for each year; see th	- 	ny entries		
<u> </u>	_ (a)	(b)		ily entires	(d)	
	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	s (colu	Distribution umn (b) divided b	
	2008	160,058.	37,	402.	· · · · · · · · · · · ·	4.279397
	2007	135,429.	1,842,		-	0.073519
	2006	63,360.	1,766,			0.035869
	2005	191,401.	1,880,	618.		0.101776
	2004	121,442.	1,947,	046.		0.062372
2	Total of line 1, column (d)			2		4.552933
3	Average distribution ratio for the number of years the foundation	e 5-year base period – divide the to has been in existence if less than 5	otal on line 2 by 5, or by the 5 years	3		0.910587
4	Enter the net value of noncharit	table-use assets for 2009 from Part	X, line 5	4	1	,695,603.
5	Multiply line 4 by line 3			5	1	,543,994.
6	Enter 1% of net investment inco	ome (1% of Bart I line 27h)		6	_	 , · · = <u> </u>
	Z	UITE (170 ULFALLI: IITE 2713)				
7	Add lines 5 and 6	offie (1% of Fart I, life 27b)			1	5/13 00/
7	Add lines 5 and 6 .			7	1	,543,994.
7	Enter qualifying distributions fro			7		153,050.

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Form	n 990-PF (2009) THE HALLINGBY FAMILY FOUNDATION, INC. 06-15	16271	 I	- Dogo 4
	n 990-PF (2009) THE HALLINGBY FAMILY FOUNDATION, INC. 06-15 t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the			Page 4
		: mstru	· ·	 ;
•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 letter if necessary - see instr.)		·	
		,		0
•	check 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, column (b)		. ,	ı
_		•	• • • •	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-).	,		
3	· · · · · · · · · · · · · · · · · · ·	3		0.
Δ	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-			0.
6	Credits/Payments	1	<i>.</i>	
·	a 2009 estimated tax pmts and 2008 overpayment credited to 2009 6a 537.		, · · · ·	1
	Exempt foreign organizations — tax withheld at source 6b		1. 18 85 ×	1
	Tax paid with application for extension of time to file (Form 8868)			~ · · · · · · · · · · · · · · · · · · ·
	Backup withholding erroneously withheld 6d		is v	
7		,		537.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	$\neg \neg$		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	,		0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			537.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax 537. Refunded 11			0.
Par	t 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 participate or intervene in any political campaign?		Yes	No X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b	x
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published by the foundation in connection with the activities	hed		
c	Did the foundation file Form 1120-POL for this year?		1 c	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		2 3 3 3 3 3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5	\$ 2550
	(1) On the foundation \$ 0. (2) On foundation managers \$ ‡	0.		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers . \blacktriangleright \$ 0.			- 35
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	X
_	If 'Yes,' attach a detailed description of the activities			
_	,			
	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	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	1	1	I/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	<u> X</u>
_	If 'Yes,' attach the statement required by General Instruction T.			- 4
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1	13	
	By language in the governing instrument, or			
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	ct	6 X	1/2.27
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7 X	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions) N/A	—		
Ь	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	·	8b X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV)	2(j)(5) irt XIV	9	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name and addresses	es .	10	х
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_		06	-15162	71	Pa	age 5
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 instructions)			11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		Х
13		tion applic	ation?	13	Х	
14		one no 🕨				
•			128			
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 14 The books are in care of ► PAUL HALLINGBY 15 Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the year 15 Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the year 16 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required 17 File Form 4720 if any Item is checked in the Yes' column, unless an exception applies. 18 During the year did the foundation (either directly or indirectly). 19 Engage in the sale or exchange, or leasing of property with a disqualified person? 10 Engage in the sale or exchange, or leasing of property with a disqualified person? 11 File Form 4720 if any Item is checked in the Yes' column, unless an exception applies. 12 During the year did the foundation (either directly or indirectly). 11 Engage in the sale or exchange, or leasing of property with a disqualified person? 12 File Form 4720 if any Item is checked in the Yes' column, unless an exception applies. 13 In a Viring the year did the foundation that of the acts of a disqualified person? 14 File Form 4720 if any Item is checked in the Yes' column, unless an exception applies. 15 Exemption (any Item is checked in the Yes' column, unless an exception applies. 16 Did Tay and Item 2 File File File File File File File File		<u>-</u>	7			
Part VII-A Statements Regarding Activities Continued 11 Al any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 572(0)(13) "I'ves, attach schedule (see instructions) 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 13 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 14 The books are in care of * PAUL HALLINGBY		N/A				
Par				·		
				-	Yes	No
1:	• • • • • • • • • • • • • • • • • • • •			3.39	7,2 12	- 1
		Yes	X No			
				37 1 7 8 W	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
		Yes	X No	1300		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			2.4
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
		Yes	XNo			
	foundation agreed to make a grant to or to employ the official for a period after termination	Yes	X No	2 4		
ł	olf any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruc	n ctions)?		1 b	N/	<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here	•	•			8,3 5 1 1 2, 8,4 1
C		s, •		1c		्रें 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 $4942(j)(5)$):					
ā	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?	Yes	XNo			
	If 'Yes,' list the years ▶ 20 , 20 , 20					
t	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 494	12(a)(2) 2(a)(2) to		2h	N/	A A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	s here.		1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business	Yes	X No		ly.	
ŀ	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C. Form 4720, to	n ved	İ	3b	N/1	
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		-	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?			4b		X
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Part VII-B Statements Regarding Activit	ies for Which Forr	n 4720 May Be Red	uired (continued)	
5a During the year did the foundation pay or incu	-			
(1) Carry on propaganda, or otherwise attempt			∐ Yes X	No /
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ılıc election (see sectio ation drive?	n 4955), or to carry	Yes X	No is is a second
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No
(4) Provide a grant to an organization other t in section 509(a)(1), (2), or (3), or section	han a charitable, etc, c i 4940(d)(2)? (see instr	organization described ructions)	Yes X	No S
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientifi in of cruelty to children	c, literary, or or animals?	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the exceptions disaster assistance	otions e	5b N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ _	14 14 14 1
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A Yes	No
If 'Yes,' attach the statement required by Reg.6a Did the foundation, during the year, receive are on a personal benefit contract?		• •	s Yes X	No
b Did the foundation, during the year, pay premi	iums, directly or indirec	ctly, on a personal bene		6b X
If 'Yes' to 6b, file Form 8870.				
7a At any time during the tax year, was the found				No A CONTRACT
b If yes, did the foundation receive any proceed				7b N/A
Part VIII Information About Officers, Danie and Contractors	rectors, Trustees,	roundation Manag	gers, nignly Pald i	impioyees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
(a) Name and address	(b) Title and average hours per week devoted to position		(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
PAUL L. HALLINGBY	PRESIDENT	0.	0.	0.
7 GRACIE SQUARE-SUITE 10A	15.00	1		
NEW YORK, NY 10028	WICE PRECIPE		^	
JULIA H. HALLINGBY	VICE PRESIDE	0.	0.	0.
7 GRACIE SQUARE-SUITE 10A	7.00	,		
NEW YORK, NY 10028	CECV (TDE ACID	0	0	
THOMAS P. SPELLANE	SECY/TREASUR	0.	0.	0.
116 RIDGE ACRES ROAD DARIEN, CT 06820	7.00			
2 Compensation of five highest-paid employee				
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				
Total number of other employees paid over \$50,000			>	0

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Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	n Managers, Highly Paid E	Employees,
3 Five highest-paid independent contractors for professional services — (see instruenter 'NONE.'	uctions). If none,	
. (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services	>	0
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ation such as the number of	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX:B Summary of Program-Related Investments (see instructions		
		A
Describe the two largest program-related investments made by the foundation during the 1 N/A	tax year on lines 1 and 2	Amount
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	>	0.
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Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)

Adjusted qualifying distributions. Subtract line 5 from line 4

b Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see instructions)

153,050.

153,050.

3a 3b

4

5

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				84,780.
2 Undistributed income, if any, as of the end of 2009	·			;
a Enter amount for 2008 only			0,	
b Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009:	~		, ,	' ' '
a From 2004 24, 094.	-	• ,	, '	
b From 2005 97, 382.	,		,	, 🕶
c From 2006		•	,	
d From 2007 43, 366.			,	
e From 2008 158, 372.			,	, , , , ,
f Total of lines 3a through e	323,214.	** -	., 5	* , *,
4 Qualifying distributions for 2009 from Part			,	4. 4
XII, line 4. ► \$ 153,050.		, , ,	, , , , , , , , , , , , , , , , , , , ,	
a Applied to 2008, but not more than line 2a	*	,	0.	
	· .		, ,	
 Applied to undistributed income of prior years (Election required — see instructions) 		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.	• **	<u> </u>	***
d Applied to 2009 distributable amount	٠.	1 A- VI W.	* * * * * * * *	84,780.
e Remaining amount distributed out of corpus	68,270.	.*	`	
5 Excess distributions carryover applied to 2009	0.	*		0.
(If an amount appears in column (d), the same amount must be shown in column (a))	2 3 3	, ;	* * * * * * * * * * * * * * * * * * * *	
same amount must be shown in column (a))		· • •		
6 Enter the net total of each column as				
6 Enter the net total of each column as indicated below:	. 3. 3. 4	.*		
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	391,484.			
b Prior years' undistributed income Subtract line 4b from line 2b	, , , , , , , , , , , , , , , , , , ,	0.	*	
c Enter the amount of prior years' undistribut-	1 3 1/4 1/4 1/4			
ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable		0	, , , , , , , , , , , , , , , , , , , ,	
amount - see instructions	, , ,	0.	<u> </u>	
e Undistributed income for 2008 Subtract line 4a from line 2a. Taxable amount — see instructions		as the state of	0.	
	, ,	4 3 4 7	0.19	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010		The state of the s		0.
7 Amounts treated as distributions out of			* * * * * * * * * * * * * * * * * * * *	
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.	' , _ ~	. ,	· · · · · · · · · · · · · · · · · · ·
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	24,094.			and the
9 Excess distributions carryover to 2010.		* * *		
Subtract lines 7 and 8 from line 6a.	367,390.	, , ,	,	* * * * * * * * * * * * * * * * * * * *
10 Analysis of line 9	•	; ,		
a Excess from 2005 97, 382.	<u> </u>	*		
b Excess from 2006 .	」' ,			£
c Excess from 2007 43,366.	<u></u>			S. S. S. S. S.
d Excess from 2008 158, 372.	<u> </u>		,	
e Excess from 2009 68,270.	<u> </u>	·	3 3	Form 900 PE (2009)

Form 990-PF (2009) THE HALLINGBY FA			 	06-15162/1	
Part XIV Private Operating Foundati			 		N/A
,1 a If the foundation has received a ruling or is effective for 2009, enter the date of the	determination lette ruling	r that it is a private	operating foundation	, and the ruling	
b Check box to indicate whether the foundation	-	erating foundation	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
each year listed					
b 85% of line 2a.					
c Qualifying distributions from Part XII, line 4 for each year listed		<u> </u>			
d Amounts included in line 2c not used directly for active conduct of exempt activities		ļ			.
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets			<u> </u>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) .					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross 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 support from an exempt organization					
(4) Gross investment income		<u> </u>			
Part XV Supplementary Information assets at any time during th	(Complete this e year – see in	part only if the structions.)	organization had	i \$5,000 or more	e in
Information Regarding Foundation Managers of the foundation who close of any tax year (but only if they have PAUL L. HALLINGBY	nave contributed me	ore than 2% of the than \$5,000) (See	total contributions rec section 507(d)(2))	ceived by the founda	ation before the
b List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more o foundation has a 1	of the stock of a cor 0% or greater interes	poration (or an equal est	ly large portion of th	ne ownership of
2 Information Regarding Contribution, Gran	nt, Gift, Loan, Scho	larship, etc, Progra	nms:		
Check here X IX if the foundation only nequests for funds. If the foundation make complete items 2a, b, c, and d	nakes contributions s gifts, grants, etc,	to preselected cha (see instructions) to	ritable organizations o individuals or orgar	and does not accept lizations under other	t unsolicited r conditions,
a The name, address, and telephone number	r of the person to v	whom applications	should be addressed		.,
	,				
b The form in which applications should be s	submitted and infor	mation and materia	is they should include	•	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	such as by geograpi	hical areas, charital	ble fields, kinds of ins	stitutions, or other fa	actors

TEEA0310L 07/06/09

Form 990-PF (2009)

BAA

Total

3 b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	
1. Decree control to the	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue	-		code		(see the instructions)
ab_			+		
c	I I		1		
d		-,			
е					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments .				***	
3 Interest on savings and temporary cash investments					15.
4 Dividends and interest from securities		, «			41.
5 Net rental income or (loss) from real estate		•			
a Debt-financed property				• •	
b Not debt-financed property6 Net rental income or (loss) from personal property				-	
7 Other investment income			 		
8 Gain or (loss) from sales of assets other than inventory			 		
9 Net income or (loss) from special events.	-				
10 Gross profit or (loss) from sales of inventory			++		
11 Other revenue:	4	,		**	· ·
a			 ' 		*
b					
С					
d					
			1 1		
e			1		
e Subtotal Add columns (b), (d), and (e)					56.
13 Total. Add line 12, columns (b), (d), and (e)	· ·			13	56. 56.
*****	· ·		, -	13	
13 Total. Add line 12, columns (b), (d), and (e)	alculations)	hment of Exemp	t Purpo	<u> </u>	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify c Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	alculations) Accomplis			ses	56.

Yes No

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

d	old the organization directly escribed in section 501(c) elating to political organiza	of the Code (engage in any of the other than section 50	following wit 1(c)(3) organ	n any oth lizations)	er organizati or in section	527,		
	ransfers from the reporting		o a noncharitable exe	empt organiza	ation of		}		
	I) Cash	,						1 a (1)	X
•	2) Other assets							1a(2)	Х
•	Other transactions					,			
	Sales of assets to a nor	ncharitable ex	empt organization					1b(1)	X
•	2) Purchases of assets fro			ation	,			1 b (2)	X
•	Rental of facilities, equi			21,011				1 b (3)	X
	Reimbursement arrange		. 400010					1 b (4)	X
•	 Loans or loan guarantee 							1 b (5)	X
•	 Performance of services 		nın or fundraising soli	icitations				1b(6)	X
•	haring of facilities, equipm				265			1c	X
(a) Line	the answer to any of the ane goods, other assets, or my transaction or sharing at the control of	services giver errangement, s	i by the reportina foui	ndation If the e value of the	e foundat e goods,	ion received other assets,	less than fair or services r	market value in	
N/A		<u> </u>							
		<u> </u>							
									
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		ļ <u></u>					• •		
		ļ — — — — — — — — — — — — — — — — — — —							
									
		<u> </u>							
		<u> </u>						· · · · · · · · · · · · · · · · · · ·	
d€	the foundation directly or escribed in section 501(c) or 'Yes,' complete the follow (a) Name of organization	of the Code (d ing schedule	ated with, or related ther than section 501	(c)(3)) or in	ore tax-ex section 52	<u>2</u> 77 .	• ••	. Yes	X No
						-			
s D	penalties of perjury, I declare that ete reclavation of preparer (other,	I have examined the transfer of file	nis (turn, including accompa ductary) is based on all inform	enying schedules mation of which p	and statement reparer has	nts, and to the beany knowledge	est of my knowledge	ge and belief, it is true, o	correct, and
Ñ		- 	2		Date /	1		Preparer's Identifying	number
Paid Pre-	Preparer's signature	no 0	1		2/1	da	Check if self-employed	(See Signature in the	
hair		D WEISS C	PA, PLLC				EIN - N/	'A	
Use	yours if self- employed). ► 183		VE SUITE 803						·
Johns		YORK, NY	10016-4403				Phone no	(212) 695-5	5771
BAA							·	Form 990-	

2009	Fe	ederal Stat	teme	nts			Page 1
THE	HALLIN	IGBY FAMILY	FOUN	DATION	I,INC.		06-1516271
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees	Total	(a) Expenses per Books \$ 3,90 \$ 3,90	<u>s </u>	(b) Nenvestment Income 1,9	ent 50.	(c) Adjusted Net Incom	(d) d Charitable ne Purposes \$ 1,950. \$ 1,950.
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses					,		-
BANK CHARGES	Total	(a) Expenses per Book \$ 15 \$ 15	<u>s </u>		ent	(c) Adjuste Net Incom	(d) d Charitable Purposes \$ 0.
Statement 3 Form 990-PF, Part II, Line 13 Investments - Other	,						
				ation thod		Book Value	Fair Market Value
Other Investments PEQUOT NAVIGATOR OFFSHORE FUND IV	JND	·	Cost Cost		\$	371,241. 515,508.	
				Total	\$	886,749.	\$ 1,919,048.
Statement 4 Form 990-PF, Part II, Line 15 Other Assets							
Rounding .				Total	\$	<u>1.</u> 1.	Fair Market Value 5 0.

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Statement 5	HALLINGBY FAMILY	FOUNDATIO						
Statement 5			HALLINGBY FAMILY FOUNDATION,INC.					
Form 990-PF, Part XV, Line 3a Recipient Paid During the Year	٠	į	3					
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amour	nt			
BEST FRIENDS ANIMAL SANCTUARY			ANIMAL WELFARE		,000.			
BIDE-A-WEE			SHELTER FOR HOMELESS ANIMALS		500.			
BROOKS SCHOOL			EDUCATIONAL	105,	,000.			
CARL SCHURZ PARK ASSOC.			CONSERVATION		500.			
CANINE COMPANIONS			DOG COMPANIONSHIP FOR THE ELDERLY AND HOMEBOUND	1,	,000.			
CHORE SERVICE	~		HUMANITARIAN		250.			
CARE			HUMANITARIAN ,	1,	000.			
COLUMBIA BUSINESS SCHOOL			RELIGIOUS	2,	500.			
DOE FUND *			CONSERVATION	2,	500.			
FRESH AIR FUND			CONSERVATION	1,	000.			
HOSPICE VOLUNTEERS			HUMANITARIAN		250.			
HOTCHKISS LIBRARY			EDUCATIONAL		500.			
HUMANE SOCIETY			HUMANITARIAN		500.			
LITTLE GUILD OF ST FRANCIS			CHARITABLE	2,	500.			
METROPOLITAN MUSEUM OF ART			CULTURAL		500.			

MORRIS ANIMAL FOUNDATION

500.

ANIMAL WELFARE

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Zυ	U	y

Federal Statements

Page 3

THE HALLINGBY FAMILY FOUNDATION, INC.

06-1516271

Statement 5 (continued)
Form 990-PF, Part XV, Line 3a
Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of		Amount
NEW LIFE			HUMANITARIAN	\$	500.
NORTHWEST CT CENTER	2		EDUCATIONAL		500.
POLICE ATHLETIC LEAGUE			EDUCATIONAL		1,000.
SHARON HISTORICAL SOCIETY			CULTURAL		150.
SHARON LAND TRUST			CONSERVATION		2,500.
UNITED WAY			HUMANITARIAN		1,000.
MARCH OF DIMES			RESEARCH		1,000.
TRIARTS CENTER			CULTURAL		2,500.
MUSEUM OF MODERN ART			CULTURAL		500.
UNA NW		,	EDUCATION		250.
SHELTER OUR SISTERS			AID TO DOMESTIC VIOLENCE VICTIMS		1,000.
ST JUDE HOSPITAL			RESEARCH ON CHILDRENS' DISEASES.		1,000.
CT CHILDRENS MEDICAL CENTER			MEDICAL RESEARCH		500.
SUSAN B. ANTHONY FUND			HUMANITARIAN		500.
USO ,			ENTERTAINMENT FOR U.S.TROOPS		500.
WNET			CULTURAL		1,000.
WNLT			CULTURAL	-	1,000.

20	AA.
/()	us

Federal Statements

Page 4

THE HALLINGBY FAMILY FOUNDATION, INC.

06-1516271

Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

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Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
UNIVERSITY OF PA			EDUCATIONAL	\$ 1,000.
FARM SANCTUARY			HOME FOR RESCUED ANIMALS	500.
HALE HOUSE			AID TO HOMELESS FAMILIES	500.
KIPS BAY BOYS & GIRLS CLUB			PROVIDE RECREATIONAL ACTIVITIES TO UNDERPRIVILEGED YOUTH	500.
RAMPANT LION FOUNDATION			CONSERVATION OF ENDANGERED SPECIES	100.
SHARON GREEN PRESERVATION ASSOC.			CONSERVATION	100.
•			•	
WILDLIFE CONSERVANCY			CONSERVATION	250.
WOMENS SUPPORT SERVICES	,		AID FOR VICTIMS OF DOMESTIC VIOLENCE.	1,000.
AMERICAN HUMANE ASSOC.			CARE FOR ABUSED ANIMALS	250.
AMERICAN RED CROSS			HUMANITARIAN	10,000.
ANIMAL MEDICAL CENTER	•		TREATMENT AND CARE FOR ANIMALS	500.
AUDUBON OF CT			PRESERVATION OF BIRD SPECIES	1,000.
			Total	\$ 151,100.

Application for Extension of Time to File an **Exempt Organization Return**

Internal Revenue	· 1		File a sepa	rate application for	r each return.				
	iling for an Automat	ic 3-Month Exter	nsion, complete	only Part I and che	eck this box · ·			· · · · ▶ [X	
	-				nly Part II (on page 2 o	of this form).			
					extension on a previo		8		
Part I	Automatic 3-M	onth Extens	sion of Time.	Only submit ongi	nal (no copies needed).			
A corporation	required to file Form	n 990-T and requ	iesting an autom	natic 6-month exten	sion - check this box a	and complete			
Part I only • •				• • • • • • • • • • • • • • • • • • •		• • • • • • • • • •	· • • • •	· • • • □	
•	orations (including 1 ome tax returns.	120-C filers), par	rtnerships, REM	ICs, and trusts mus	t use Form 7004 to re	quest an extension	of		
one of the retu electronically i returns, or a co	urns noted below (6 f (1) you want the ac omposite or consolic	months for a cor dditional (not aut dated Form 990-	poration required tomatic) 3-month T Instead, you r	d to file Form 990-1 n extension or (2) yo must submit the full	a 3-month automatic e T) However, you cann The forms 990-BL, on The forms of the forms on The forms of the forms on the forms of the forms on the forms of th	ot file Form 8868 6069, or 8870, grou ed page 2 (Part II) o	ıp		
Type or	Name of Exempt	Organization				Employer is	dentification	on number	
print	THE HALLINGE		OUNDATION,	INC.		06-1516	-1516271		
File by the	Number, street, a	ind room or suite	no. If a P O box	x, see instructions					
due date for filing your	C/O PAUL HAI	LLINGBY-7 GF	RACIE SQUARI	E					
return See	City, town or post	office, state, and	ZIP code For a	a foreign address, s	ee instructions				
instructions	New York, NY	10028							
Check type of	return to be filed (f	île a separate ap	plication for eac	h return)					
Form 990		Fc	orm 990-T (corpo	oration)		Form 4720)		
Form 990-E	3L	Fc	orm 990-T (sec 4	401(a) or 408(a) tru	ıst)	Form 5227	•		
Form 990-E		<u></u> Fo	orm 990-T (trust	other than above)		Form 6069)		
X Form 990-F	PF	Fo	orm 1041-A			Form 8870)		
Telephone If the organ If this is for for the whole g	No ▶ exation does not have a Group Return, en	iter the organizati x▶	ion's four digit G is for part of the	roup Exemption Nu group, check this I		If this is		▶□	
1 I reques	t an automatic 3-mo	onth (6 months fo	r a corporation r	equired to file Form	990-T) extension of t	ime			
until	12-15 , 2	$20_{\underline{10}}$, to file the	e exempt organi	zation return for the	organization named a	above The extension	on is		
	rganization's return								
	alendar year 20	_ or		••		04.00			
▶ [X] ta	ax year beginning _		05-01	20_ <u>09</u> , and ending	·	04-30 , 20			
2 If this ta	x year is for less tha	ın 12 months, che	eck reason	Initial return	Final return Cha	nge in accounting p	eriod		
3a If this ap	plication is for Form	1 990-BL, 990-PF	, 990-T, 4720, o	or 6069, enter the te	ntative tax,				
less any	nonrefundable cred	dits See instructi	ons			3a	\$	537	
b If this ap	plication is for Form	990-PF or 990-	T, enter any refu	ndable credits and	estimated tax				
paymen	ts made. Include an	y prior year overp	payment allowed	l as a credit		3b	\$	537	
	Due. Subtract line 3					-			
deposit	with FTD coupon or,	, if required, by u	sing EFTPS (Ele	ectronic Federal Tax	c Payment	*****			
	See instructions			<u>.</u>		3c	\$	0	
Caution. If you	are going to make	an electronic fun	d withdrawal with	h this Form 8868, s	ee Form 8453-EO and	Form 8879-EO			
for payment in	structions.								

EEA		Fоп	n 8868 (Rév	/ 4-2009)
Signature >	Title > CPA	Date ►	12/1/	10
•	Signature and Verification perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledged and complete, and that I am authorized to prepare this form.	ge and belief,		
	O coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0
	paid previously with Form 8868. Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	8b	\$	537
	plication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and education is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credit and any			
less any	nonrefundable credits See instructions	8a	\$	537
8a If this ai	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			
ACCU	RATE RETURN HAS NOT BEEN RECEIVED.			
	RMATION REQUIRED FOR THE PREPARATION OF A COMPLETE	AND		
	detail why you need the extension			
6 If this ta		n accountir		_
_	ndar year, or other tax year beginning	04-	30,201	.0
	t an additional 3-month extension of time until 03-15, 2011	_		
	mes and EINs of all members the extension is for			
_	a Group Return, enter the organization's four digit Group Exemption Number (GEN) group, check this box · ▶ ☐ If it is for part of the group, check this box · ▶ ☐ and attach a	f this is		
=	exaction does not have an office or place of business in the United States, check this box	f thin in		••• ▶ ∐
	No ▶212-313-5982 FAX No ▶			▶ □
	are in the care of TAXPAYER			
	complete Part II if you were not already granted an automatic 3-month extension on a previously file	d Form 88	58.	
Form 990-				
Form 990-			Form 8	1870
Form 990	X Form 990-PF		Form 6	069
	return to be filed (File a separate application for each return):			
return See instructions	New York, NY 10028			
filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions		122 7	
extended due date for	C/O PAUL HALLINGBY-7 GRACIE SQUARE	200 011	,	
File by the	The second secon	or IRS use ont		
print		6-151		;
Part III	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co		ication number	
	iling for an Automatic 3-Month Extension, complete only Part I (on page 1)	nico poode		
•	mplete Part II if you have already been granted an automatic 3-month extension on a previously filed Fo	orm 8868		
	iling for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box	• • • •		· · • <u>X</u>
Form 8868 (F				Page 2