

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

For ca	lenda	ar year 2009, or t	ax year begi	inning	5/01	, 2009	, and ending	4/3	0 , 2010	
G CH	eck a	all that apply.	Initial ret	urn Ini	hal Return of a fo	rmer p	ublic charity	-	F	nal return
		*. *	Amende		_	•	change [	Name		
						10.033	criarige	IA	Employer identification in	umbar
Use IRS la		THE MCINE	RNEY FAM	ITLY FOII	MOTTON			]^	• •	umber
Other		285 RIVERS						В	13-3949885 Telephone number (see ti	
pri.		WESTPORT,							relephone number (see t	ie instructions)
or ty See Sp		,,						-		<del></del>
Instruc								C	If exemption application	_
			. 10			<del></del>		P	1 Foreign organizations, ch	
<b>H</b> (	_	type of organization			1(c)(3) exempt p				2 Foreign organizations me	
<del></del> !		ection 4947(a)(1)					orivate foundat		here and attach computa If private foundation stat	
I F	air ma Trom P	irket value of all asse Part II, column (c), lin	ets at end of yea	ir J Aci	counting method	: XC	ashAccr	ual	under section 507(b)(1)(	A), check here .
				_ L	Other (specify)			F	If the foundation is in a	60-month termination
<b>&gt;</b>			,299.		, column (d) mus	t be or	cash basis.)		under section 507(b)(1)(	B), check here
Part		nalysis of R			(a) Revenue	and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements
	E	xpenses (The olumns (b), (c),	e total of am	ounts in	expenses per	books	incom		income	for charitable
	S	arily equal the ai	mounts in co	not neces- olumn (a)					i	purposes
	(5	seé the instruction	ons).)	(.,						(cash basis only)
	1	Contributions, gifts	, grants, etc, rec	ceived (att sch)	30,	000.				
	2		foundn is <b>not</b> red							
	3	Interest on sav	vings and ter	mporary	1	44.		A A	4.4	
	4	Dividends and inte		ities	15	632.	10	<u>44.</u>	15 622	
	1 -	a Gross rents	icst nom secur	nies	15,	032.	1	0,632.	15,632	•
		b Net rental income or (loss)								<u> </u>
R		or (ioss) 2 Net gain/(loss) fron	n sale of assets	not on line 10	14	416.				
Ë		<b>b</b> Gross sales price for		68,252.	11/	710.		************		
Ā	7	assets on line 6a Capital gain net inc					1.4	,416.		<u> </u>
Ĕ N	8	Net short-term	-		ļ			, 410.		<u> </u>
ū	9	Income modific						······································		
E	10:	a Gross sales less returns and	i							
	1	allowances .					***************************************			
<u></u>	'	b Less Cost of goods sold								
3 9 2010	(	c Gross profit/(loss)	(att sch)							
	11	Other income (	(attach sched	dule)						
<u>ලා</u>										
જ	12	Total. Add line	s 1 through	11	60,	092.	30	,092.	15,676	
	13	Compensation of of				0.				
₹	14	Other employee sal	•			1				
<b>1</b>	15	Pension plans,		enefits						
Â	,	Legal fees (attach :	•							
<sup>2</sup> M		b Accounting fees (at		ee St 1	1,	525.	1	,525.	1,525	,
, h	i	c Other prof fees (att	tach sch)							
OPERAT	17			·REC	EIVED	$\dashv$				
PSTRR	18			·						
<b>A A</b>	פו	Depreciation (a sch) and deple	tion C	3		osc				
1 1	20		Ş	S JUL	<del>0 2 2010   1</del>	5			<u> </u>	
N V G E	21	Travel, confere				2				
A E N X D P	22	Printing and pu	ublications	· OGT	EN, UT				<del></del>	<del>                                     </del>
ĎÊ	23	Other expenses	s (attach set	redule)						
AND EXPENSES	ļ		<u>See Stat</u>		10,	823.	10	,823.	10,823	
S E	24	Total operating	and admini	istrative	10	340	10	240	10 040	
S	25	expenses. Add Contributions, gifts			12,		12	,348.	12,348	171 500
		Total expenses			171,	500.		<del>-</del>		171,500.
	26	Add lines 24 ar		sements.	183,	848.	12	,348.	12,348	171,500.
	27	Subtract line 26		2:				,	22,030	2,2,300.
	a	Excess of reve	nue over exp	penses	400	,,,				
	Ι.	and disbursem			-123,	156.	<del></del>			
	•	Net investment inco					17	,744.		ļ
		Adjusted net incom	e (if negative, er	nter 0)					3,328.	<u></u>

Forn	n 990	-PF (2009) THE MCINERNEY FAMILY FOUNDATION		13-39	49885 Page
Par	4 #	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End	of year
91	5.53	(See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing		<del></del>	
	2	Savings and temporary cash investments	14,324.	6,835	6,835
	3	Accounts receivable			
	1	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 the instructions)			
	7	Other notes and loans receivable (attach sch).			·
Ą		Less: allowance for doubtful accounts			Ī
Š	8	Inventories for sale or use.			
A S E T	9			<del></del>	<del> </del>
S	10	a Investments - U.S. and state government		<del></del>	
_	'	obligations (attach schedule)			
		<b>b</b> Investments — corporate stock (attach schedule)	799,032.	682,764.	911,464.
		c Investments — corporate bonds (attach schedule)			
		Investments – land, buildings, and equipment, basis		······································	
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments - other (attach schedule) .	*		
	14				
		Less: accumulated depreciation (attach schedule)	-		Ī
	15	Other assets (describe			
	16	Total assets (to be completed by all filers -			
	<del> </del>	see instructions. Also, see page 1, item l)	813,356.	689,599.	918,299.
Ļ	17	, , , , , , , , , , , , , , , , , , , ,			<u> </u>  -
Å B	18	Grants payable			
B	19	Deferred revenue			1
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			1
Ţ	21	Mortgages and other notes payable (attach schedule)			_[
i	22	Other liabilities (describe .			_
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
		and complete lines 24 unough 26 and lines 30 and 51,			
N F	24	Unrestricted			]
N F E U T N	25	Temporarily restricted			]
D	26	Permanently restricted			
A B A L A		Foundations that do not follow SFAS 117, check here. $\overline{X}$ and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds	813,356.	689,599.	
T A S N	28	Paid-in or capital surplus, or land, building, and equipment fund.	===,===,		1
Ç	29	Retained earnings, accumulated income, endowment, or other funds			
O E R S	30	Total net assets or fund balances (see the instructions)	813,356.	689,599.	1
•	31	Total liabilities and net assets/fund balances (see the instructions)	813,356.	689,599.	
Part	III	Analysis of Changes in Net Assets or Fund Balance			<u>*</u>
	Total	I net assets or fund balances at beginning of year - Part II, colum	n (a), line 30 (must agre		012 250
_		of-year figure reported on prior year's return)		·   _1_	813,356.
	Ente	r amount from Part I, line 27a			-123,756.
3		increases not included in line 2 (itemize)		3	600 600
4		lines 1, 2, and 3		. 4	_689,600.
5		ases not included in line 2 (itemize) <u>See Statement</u>			1.
6	Total	I net assets or fund balances at end of year (line 4 minus line 5) -	Part II, column (b), line	30 6	689,599.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

<u>85</u>,655.

171,500.

7

8

Add lines 5 and 6. .

Enter qualifying distributions from Part XII, line 4 ....

	,			885		F	Page 4
Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 –	see t	he in	structi	ons)		
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.)			1			
ŀ	Domestic foundations that meet the section 4940(e) requirements in Part V,		1		···········		177.
	check here ► X and enter 1% of Part I, line 27b						
•	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	i					
	foundations only. Others enter -0-)		2	L			0.
3	Add lines 1 and 2		3				<u> 177.</u>
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				<u>177.</u>
6	Credits/Payments:						
á	2009 estimated tax pmts and 2008 overpayment credited to 2009						
t	Exempt foreign organizations — tax withheld at source						
•	: Tax paid with application for extension of time to file (Form 8868) 6c						
•	Backup withholding erroneously withheld 6d						
7	Total credits and payments. Add lines 6a through 6d	,	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			]	177.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.	•	10				
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax	▶	11				
Par	VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it					Yes	No
16	participate or intervene in any political campaign?			. [	1a		X
Ε	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			.	1ь		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials	nuhl	iched				
	or distributed by the foundation in connection with the activities.	pubi	isiicu				
	Did the foundation file Form 1120-POL for this year?				1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation			0.			
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose foundation managers $\rightarrow S$ 0.	ed or	1				
_	·				2		v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	•		•			X
	If 'Yes,' attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	cles					.,
	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
t	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	•	• •		4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	٠		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			i			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	con	flict		_		
	with the state law remain in the governing instrument?	•	•		6		<u>X</u>
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	<u>X</u>	<u> </u>
8 2	Enter the states to which the foundation reports or with which it is registered (see the instructions)			_			
	<u>N/A</u>			_			
t	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					v	
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation				ВЬ	X	<del> </del>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	or 4	942()	(5),			v
	for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' comp	iete .	rant i	₹/V	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the	ır na	mes		10		v
	and addresses	<u>.</u>		·	10 rm 99	n.er	(2009)
BAA				го	צכ וווו	W-FF	(といいろ)

Form 990-PF (2009) THE MCINERNEY FAMILY FOUNDATION	13-3949	885	Page 5
Part 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	x
12 Did'the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12	x
Did the foundation comply with the public inspection requirements for its annual returns and exemption website address ► N/A	on application?	13	Х
	 one no. ►		
Located at > 285 RIVERSIDE AVENUE STE 350 WESTPORT CT ZIP + 4			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		Ñ/A	
and enter the amount of tax-exempt interest received or accrued during the year	. ► 15		N/A
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		· · · · · · · · · · · · · · · · · · ·	
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes No
1 a During the year did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	. Yes X N	0	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes XN	0	-
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	o	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X N		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes XN	o [	
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes XN	D	
<b>b</b> If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instruct	ions)? .	. 1b	N/A
Organizations relying on a current notice regarding disaster assistance check here.	▶ 🔲		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts that were not corrected before the first day of the tax year beginning in 2009?	,	1c	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)):			
a 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 XNe	<b>D</b>	
If 'Yes,' list the years ► 20 , 20 , 20			+ 1
b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 494 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942)	?(a)(2) to	26	NIZ
all years listed, answer 'No' and attach statement — see the instructions.)  c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years		26	NVA
► 20, 20, 20	nord.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X N	0	
b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.)	ed	3ь	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its		4a	x
charitable purposes?			<del>    ^</del>
b 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
BAA		Form 99	0-PF (2009)

Form 990-PF (2009) THE MCINERNEY FAMILY FOUNDATION	13-394	9885 Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	ion Managers, Highly Paid	Employees,
3 Five highest-paid independent contractors for professional services — (see instruenter 'NONE.'	ctions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None	(4) - 194 G. G. V. V.	(e) compensation
	, , , , , , , , , , , , , , , , , , , ,	
	*****	
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number of	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instruction	ns)	<del></del>
Describe the two largest program-related investments made by the foundation during th	e tax year on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	<u> </u>	0.
BAA		Form 990-PF (2009)

Page 8

<b>Part X</b> Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign	foundations,
Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes.     a Average monthly fair market value of securities	1a	816, 817.
<b>b</b> Average of monthly cash balances	1 b	10,579.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	827, 396.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation) 1e 0.		
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	827, 396.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	12,411.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	814, 985.
6 Minimum investment return. Enter 5% of line 5	6	40.749
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand and certain foreign organizations check here ► ☐ and do not complete this pa	ating for	oundations
1 Minimum investment return from Part X, line 6	1	40,749.
2a Tax on investment income for 2009 from Part VI, line 5		
b Income tax for 2009. (This does not include the tax from Part VI.) 2b		
c Add lines 2a and 2b	2c	177.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	40,572.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	40,572.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	40,572.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	171,500.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .	2	
3 Amounts set aside for specific charitable projects that satisfy the. a Suitability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	171,500.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	177.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	171,323.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years.	r the fou	ndation

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7				40.570
2 Undistributed income, if any, as of the end of 2009.			,	40,572.
a Enter amount for 2008 only			0.	
<b>b</b> Total for prior years: 20, 20, 20		0.	0.	
3 Excess distributions carryover, if any, to 2009:	****			
a From 2004 60, 337.				
<b>b</b> From 2005 97, 166.	]			
<b>c</b> From 2006 58,116.				
<b>d</b> From 2007				
e From 2008 88,280.				
f Total of lines 3a through e	362,348.			
4 Qualifying distributions for 2009 from Part				
XII, line 4: ► \$ 171,500.				
a Applied to 2008, but not more than line 2a.			0.	
<ul> <li>Applied to undistributed income of prior years (Election required – see instructions)</li> </ul>		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2009 distributable amount	· ·			40,572.
e Remaining amount distributed out of corpus	130,928.		,	
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).)				
Same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	493,276.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
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			1	
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from				
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2009. Subtract lines				
4d and 5 from line 1. This amount must be				^
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed			1	
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.		1	
•	<del>`</del>			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	60,337.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	432,939.			
10 Analysis of line 9:				
a Excess from 2005 97, 166.			1	
<b>b</b> Excess from 2006 58, 116.			1	
c Excess from 2007 58, 449.			1	
d Excess from 2008 88, 280.			1	
e Excess from 2009 130, 928.				F 000 PF (0000)

Form 990-PF (2009)

Form 990-PF (2009) THE MCINERNEY FAI				13-3949885	Page 10
Part XIV Private Operating Foundation					N/A
1a If the foundation has received a ruling or d is effective for 2009, enter the date of the r					
<b>b</b> Check box to indicate whether the foundation		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	<u> </u>	Prior 3 years		
investment return from Part X for each year listed .	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets					<del></del>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					<del></del>
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			l		<del></del>
Part XV   Supplementary Information assets at any time during th			organization h	nad \$5,000 or moi	re in
1 Information Regarding Foundation Manage a List any managers of the foundation who had close of any tax year (but only if they have None	ave contributed mo	ore than 2% of the to han \$5,000). (See s	otal contributions re ection 507(d)(2) )	ceived by the foundati	on before the
<b>b</b> List any managers of the foundation who or a partnership or other entity) of which the f None	wn 10% or more of oundation has a 10	the stock of a corpo % or greater interes	oration (or an equa st.	lly large portion of the	ownership of
2 Information Regarding Contribution, Grant	, Gift, Loan, Schola	arship, etc, Program	s:		
Check here \( \sum_{\text{of the foundation only m}} \) If the foundation makes					
complete items 2a, b, c, and d. a The name, address, and telephone number	r of the person to w	hom applications st	nould be addressed	  .	
See Statement 4					<del></del>
<b>b</b> The form in which applications should be so	ubmitted and inforr	nation and materials	they should includ	e.	
See Statement for Line 2a					
c Any submission deadlines.		-		-	
See Statement for Line 2a	<del></del>	<del></del>		<del></del>	
d Any restrictions or limitations on awards, so	uch as by geograph	nical areas, charitab	le fields, kinds of in	nstitutions, or other fac	ctors.
See Statement for Line 2a					

TEEA0310L 07/06/09

BAA

11

Form 990-PF (2009) THE MCINERNEY FAMILY FOUNDATION 13-3949885 Page 11 Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or contribution status of Amount recipient Name and address (home or business) a Paid during the year See Statement 5 171,500. За Total **b** Approved for future payment

Total

BAA

3Ь

### Part XVI-A Analysis of Income-Producing Activities

	<del></del>				<del></del>	
	s amounts unless otherwise indicated.  •  ram service revenue:	Unrelate (a) Business code	d business income (b) Amount	Excluded by  (c) Exclusion code	section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (see the instructions)
_						(See the instructions)
			<del></del>	+ +		
f						
g Fees	and contracts from government agencies .					
2 Mem	bership dues and assessments					
3 Intere	st on savings and temporary cash investments			14	44.	
4 Divid	lends and interest from securities		_	14	15,632.	
5 Net i	rental income or (loss) from real estate:		•••••			
a Debt	-financed property					
	debt-financed property		·			
6 Net re	ntal income or (loss) from personal property					
	r investment income			<u> </u>		
	or (loss) from sales of assets other than inventory .	<b> </b>		ļ <u>.</u>		14,416.
	ncome or (loss) from special events		<del></del>	<del>                                     </del>		
	s profit or (loss) from sales of inventory .					· · · · · · · · · · · · · · · · · · ·
11 Othe	r revenue:			<u> </u>		
						<del></del>
				<del> </del>		
				<del>                                     </del>	<del></del>	
				<del>   -</del> -	<del></del>	
e	otal. Add columns (b), (d), and (e)			-	15,676.	14,416.
		<u> </u>	- · · · · · · · · · · · · · · · · · · ·	1 1		
13 Tota	I. Add line 12, columns (b), (d), and (e)	· ·				
13 Tota See works	Add line 12, columns (b), (d), and (e)     sheet in the instructions for line 13 to verify calculated.	ulations.)			. 13	30,092.
13 Tota See works	I. Add line 12, columns (b), (d), and (e)	ulations.)			. 13	
13 Tota See works Part XVI	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works	Add line 12, columns (b), (d), and (e)     sheet in the instructions for line 13 to verify calculated.	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  B. Relationship of Activities to the Explain below how each activity for which inconsecomplishment of the foundation's exempt p	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  Relationship of Activities to the	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  B. Relationship of Activities to the Explain below how each activity for which inconsecomplishment of the foundation's exempt p	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  B. Relationship of Activities to the Explain below how each activity for which inconsecomplishment of the foundation's exempt p	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  B. Relationship of Activities to the Explain below how each activity for which inconsecomplishment of the foundation's exempt p	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.
13 Tota See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify calce.  B. Relationship of Activities to the Explain below how each activity for which inconsecomplishment of the foundation's exempt p	ulations.) Accomplis	shment of Exemp	ot Purpose	. 13	30,092.

28 Trustee Dat Title Signature of officer or trustee Preparer's Identifying number (See Signature in the instrs) Date Check if Preparer's signature HE Paid self **१८**१ - ३६-५४९० AROLD V GOOVAERTS employed Preparer's Use Harold V. Goovaerts, EIN Firm's name (or yours if self employed), address, and 504 Valley Road, First Floor Only Wayne, NJ 07470 696-1633 (973) Phone no ZIP code Form 990-PF (2009) BAA

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545 0047

2009

Name of the organization	Employer identification number						
THE MCINERNEY FAMILY FOUNDATION	13-3949885						
Organization type (check one).							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a p	rivate foundation					
	527 political organization						
5 000 DF	V covered and a second						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private	e foundation					
	501(c)(3) taxable private foundation						
Check if your organization is covered by the Ger Note: Only a section 501(c)(7), (8), or (10) organ	neral Rule or a Special Rule. Inization can check boxes for both the General Rule and a Spe	ecial Rule. See instructions.					
General Rule –							
X For an organization filing Form 990, 990-EZ, contributor. (Complete Parts I and II.)	or 990-PF that received, during the year, \$5,000 or more (in	money or property) from any one					
Special Rules –							
509(a)(1)/170(b)(1)(A)(v) and received from	rm 990 or 990-EZ, that met the 33-1/3% support test of the reany one contributor, during the year, a contribution of the gre (ii) Form 990-EZ, line 1. Complete Parts I and II.						
aggregate contributions of more than \$1,000	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
contributions for use exclusively for religious this box is checked, enter here the total contributions for use exclusively for religious	tion filing Form 990 or 990-EZ, that received from any one co , charitable, etc, purposes, but these contributions did not ag tributions that were received during the year for an <i>exclusive</i> nless the <b>General Rule</b> applies to this organization because i	gregate to more than \$1,000. If y religious, charitable, etc,					
religious, charitable, etc, contributions of \$5,	000 or more during the year.	<b>▶</b> \$					
990-PF) but it must answer 'No' on Part IV, line	the General Rule and/or the Special Rules does not file Sche 2 of their Form 990, or check the box on line H of its Form 990 requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	dule B (Form 990, 990-EZ, or 90-EZ, or on line 2 of its Form					
BAA For Privacy Act and Paperwork Reduction for Form 990, 990EZ, or 990-PF.	Act Notice, see the Instructions Schedule B (	Form 990, 990-EZ, or 990-PF) (2009)					

	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org	CINERNEY FAMILY FOUNDATION		er identification number 949885
Parl I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THOMAS E McINERNEY  255 E 49TH STREET PH B  NEW YORK, NY 10017	 \$30,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		  \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
:		   	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
BAA	TEC 407001 - 05 M0100	Sahadula B (Farm 00	0 000 E7 or 000 BE\ (2000\

	3 (Form 990, 990-EZ, or 990-PF) (2009)		Page	1	of	1 of Part II
Name of organ				1 '	-	lification number
	INERNEY FAMILY FOUNDATION			13-	<u> 3949</u>	885
Part II	Noncash Property (see instructions.)					
(a) No. from Part I	(b) Description of noncash property given		FMV (o (see in:	(c) r estima structio	ate) ns)	(d) Date received
	N/A					
		┨				
		  \$_				
		<u> </u>				
(a) No. from Part I	(b)  Description of noncash property given		FMV (o (see in:	(c) r estima structio	ate) ns)	(d) Date received
		-	-			-
		1				
		\$_				
		╄				
(a) No. from Part I	(b) Description of noncash property given		FMV (o (see ins	(c) r estima structio	nte) ns)	(d) Date received
		1				
		\$_				
	43	-				
(a) No. from Part I	(b) Description of noncash property given	ļ	FMV (or	(c) r estima truction	nte) ns)	(d) Date received
	7.7					
		\$_				
(a) No. from Part I	(b) Description of noncash property given		FMV (or (see ins	(c) estimatruction	nte) ns)	(d) Date received
		-				
		\$				
		Ľ				
(a) No. from Part I	(b)  Description of noncash property given		FMV (or (see ins	(c) · estima ·truction	ite) ns)	(d) Date received
		1				
		\$_				
BAA	Cabo	<u></u>	D (C-	000	000 53	or 000 PE) (2000)
BAA	Sche	:aui6	וססדו, כם:	טבב וו	<b>ップ∪・⊏∠</b> ,	or 990-PF) (2009)

	<b>3</b> (Form 990, 990-EZ, or 990-PF) (2009)		F	Page 1	of 1	of Part III				
Name of organ					Employer identificat					
	INERNEY FAMILY FOUNDATION			13-3949885						
Part III	Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete cols (a) through (e) and the following line entry.)									
	For organizations completing Part III, enter total of <i>exclusively</i> religious, cha contributions of \$1,000 or less for the year. (Enter this information once — se			s.)     .	<b>&gt;</b> \$	N/A				
(a)	(b) (c)			(d)						
No. from Part I	Purpose of gift Use of gift N/A		İ	Description of how gift is held						
·										
	(e) Transfer of gift  Transfer of gift									
	Transferee's name, addres	Relationship of transferor to transferee								
			·····							
(a)	(b)	(c)	T		(d)					
No. from Part I	Purpose of gift Use of gift			Description of how gift is held						
		(2)								
	(e) Transfer of gift									
	Transferee's name, addres	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
(a)	(b)	(c)			(d)					
No. from	Purpose of gift	Use of gift		Desc	cription of how gif	ft is held				
Part I				····		-				
	(e)									
	Transferee's name, addres	Transfer of gift s. and ZIP + 4	Rela	Relationship of transferor to transferee						
						<del></del>				
				•						
(a)	(b)	(c)			(d)	<del></del>				
No. from	Purpose of gift	Use of gift		Des	cription of how gif	ft is held				
Part I										
						·				
		(e)								
	Transferee's name, addres	Relationship of transferor to transferee								
						· · · · · · · · · · · · · · · · · · ·				
				<del></del>						
					.000 000 ==	000 05: 1222				
BAA			Sche	dule <b>B</b> (Fori	m 990, 9 <del>9</del> 0-EZ, or	<sup>、ソソ</sup> U-ピト)(2009)				

2009	Page 1	
•	13-3949885	
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees		
ACCOUNTING	(a) (b) Net (c) Expenses per Books Investment Income  \$ 1,525. \$ 1,525. \$ 1,525.  Total \$ 1,525. \$ 1,525. \$ 1,525.	(d) Charitable Purposes  \$ 0.
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses		
US TRUST INVESTMENT MGMT	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         per Books       Income       Net Income         FEES       \$ 10,823.       \$ 10,823.       \$ 10,823.         Total       \$ 10,823.       \$ 10,823.       \$ 10,823.	
Statement 3 Form 990-PF, Part III, Line 5 Other Decreases		
ROUNDING		1.
Statement 4 Form 990-PF, Part XV, Line 2a-c Application Submission Inform	j ation	
Name of Grant Program: Name: Care Of: Street Address: City, State, Zip Code:	MCINERNEY FAMILY FOUNDATION TRUSTEES 285 RIVERSIDE AVENUE STE 350 RIVERSIDE, CT 06880	
Telephone: Form and Content: Submission Deadlines: Restrictions on Awards:	WRITE TO RECEIVE INFORMATION AS TO WHAT FORMAT MUST BE SUBMITTED NONE NONE	I INFORMATION

2009	Federal Statements				
THE MCINERNEY FAMILY FOUNDATION					13-3949885
. Statement 5 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year					
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant		Amount
FUTURES FOR EDUCATION FDN	NONE		TO FURTHER THE EDUCATIONAL PURPOSES OF THE ORGANIZATION	\$	10,000.
UNITED NEGRO COLLEGE FUND	NONE		EDUCATION OF FOREIGN STUDENTS		10,000.
NEW YORK CARES	NONE		AID FOR DISADVANTAGED PERSONS		10,000.
ST JAMES SCHOOL TECHNICAL PROG	NONE		PROVIDE TECHNICAL EDUCATION OPPORTUNITIES FOR CHILDREN		10,000.
NEY YORK POPS	NONE		TO FURTHER CULTURAL OPPORTUNITIES OFFERED BY THE NY POPS FESTIVAL		15,000.
GILDER LEHRMAN INSTITUTE	NONE		TO ADVANCE THE EDUCATIONAL GOALS OF THE STUDY OF AMERICAN HISTORY		25,000.
OUR LADY OF MT CARMEL	NONE				1,000.
BREAD AND LIFE CHILDREN'S CAMP	NONE				10,000.
SCO FAMILY SERVICES					50,000.
ST ANDREWS SCHOOL			TO FURTHER THE RECEIPIENT'S EDUCATIONAL PURPOSE		25,000.
WESTPORT WEATON COOPERATIVE NURSERY SCHO			PRESCHOOL, CARE FOR UNDERPRIVILEGED CHILDREN		500.
TINY MIRACLES FUND					5,000.
			Total	\$	171,500.