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# **Return of Private Foundation**

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

Inten	nal Re	venue Service		Note. The foundation may	be able to use a copy of this	return to satisfy state rep	orting requirements.	
For	calen	dar year 2009,	or tax ye	ar beginning MAY	1, 2009	, and ending	APR 30, 201	.0
G (	Check	all that apply:		Initial return	Initial return of a f	ormer public charity	Fınal retu	ייי
				Amended return	Address chan	ige	Name change	
Har	the	Name of f	oundation				A Employer identificati	on number
	: me label.	नायक हा	ILLI	AM H.G. FITZ	GERALD FAMIL	Y	' '	
	erwi:						52-209703	4
	print			O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	
	r type	l l	BANC	ROFT PLACE,	NW		202-332-5	<b>4</b> 01
See	Spe	cific		and ZIP code	1477			
Inst	ructio	MASHI			1		C if exemption application in D 1. Foreign organization	
	No a ole	type of organiz		X Section 501(c)(3) ex			Foreign organizations check here and attach	
<u></u>	_	21		· —		-t	check here and attach	computation
<u> </u>					Other taxable private found:		E If private foundation s	
		arket value of all		, I —		Accrual	under section 507(b)	(1)(A), check here
•		Part II, col. (c),	•		ther (specify) imn (d) must be on cash i	haara l		a 60-month termination
	-\$			<u> </u>	Thin (u) must be on cash	uasis.)	under section 507(b)	<del></del>
Pa	art l	" (The total of amo	ounts in coli	umns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equa	al the amou	nts in column (a) )	expenses per books	іпсоте	income	(cash basis only)
	1	Contributions,	gifts, grar	nts, etc., received	0.		N/A	
	2			on is not required to attach Sch. B				
	3	interest on saving cash investments	gsand temp s	orary	861.	861.		STATEMENT 1
	4	Dividends and	interest fr	om securities	5,091.	5,091.	,	STATEMENT 2
	5a	Gross rents				i	1	
	ь	Net rental income	or (loss)					
_	6a	Net gain or (loss)	from sale of	f assets not on line 10	19,279.			
2 4 20 fevenue	ь	Gross sales price assets on line 6a	for all	206,023.				
<u>ē</u> ,	7	Capital gain net in				19,279.		
	R	Net short-term		• •				
$\approx$	a	Income modific	. •			<del></del>		
<	10a	Gross sales less r		1				
ಣ	IUA	and allowances						<del></del>
		Less Cost of goo		<u> </u>		<del></del>		<del></del>
AUG		Gross profit or	(1055)	-			-	
O		Other income	4.1.	1.44	25 221	25 221		
		Total. Add line			25,231.	25,231.		
Z	13	_ '	-	ectors, trustees, etc	0.	0.		0.
\$	14	Other employee		• •				
ঐ	15	Pension plans,	employee	e penetits				
ଞ୍ଜ	16a	Legal fees			-			
per	b	Accounting fee:		STMT 3	2,000.	2,000.		0.
ŭ	C	Other professio	nal fees	STMT 4	2,486.	2,486.		0.
Operating and Administrative Expense SANINE	17	Interest						
E a	18	Taxes		STMT 5	207.	0.		0.
is.	19	Depreciation an		-				
Ξ	20	Occupancy	REC	EIVED				
Ϋ́	21	Travel, conferen	<del>nces, and</del>	meetings				
פרב	22	Printing Stid pu	iblications	2 3 2010 SS ninistrative				
ğ	23	Other expenses	នុសប <b>ប</b> ខ្	2 3 2010   Š				
atir	24	Total operating	and.adm	ninistrative S				
Der.		expenses. Ad		Triputgh 23 T	4,693.	4,486.		0.
ō	25	Contributions,			112,500.			112,500.
		Total expenses	_					
\		Add lines 24 an			117,193.	4,486.		112,500.
	_	Subtract line 26		: 12:				
				ises and disbursements	-91,962.			
				if negative, enter -0-)		20,745.		
İ		Adjusted net in					N/A	

THE WILLIAM H.G. FITZGERALD FAMILY Form 990-PF (2009) Page 2 FOUNDATION 52-2097034 Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (c) Fair Market Value (a) Book Value (b) Book Value 1 Cash - non-interest-bearing 22,748. 9,873. 9,873. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 86,834. 28,315. 54,350. STMT b Investments - corporate stock 20,308. c Investments - corporate bonds STMT 8 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 2,050,865. 2,050,786. 2,618,461. STMT 9 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation STATEMENT 10) 660. 480. 480. 15 Other assets (describe ▶ 2,089,454. 2,181,416. 2,683,164. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 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. Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted **▶** 🗓 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 0. 0 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 2,181,416. 2,089,454. STATEMENT 6 2,181,416. 2,089,454 30 Total net assets or fund balances 2,181,416. 2,089,454 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	2,181,416.
2	Enter amount from Part I, line 27a	2	-91,962.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	2,089,454.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,089,454.

Form **990-PF** (2009)

Page 3

F	Part IV   Capital Gains a	and Losses for Tax on In	vestmen	t Income						
		ribe the kind(s) of property sold (e.g. irehouse; or common stock, 200 shs			l, b-	ow acquired Purchase Donation	(0	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a	BANK OF AMERICA	A 53-20026030495	6			P	V	ARIOUS	VARIOUS	
		A 53-20026030495				P		ARIOUS	VARIOUS	
_	CAPITAL GAINS	DIVIDENDS								
-							$\perp$			
	1	-								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)				
_a				128,30					14,082	
_b				58,44	4.					
_ 0	111.					<u> </u>	_	· <del></del>	111.	
d		·								
_e										
	Complete only for assets showin	g gain in column (h) and owned by t		· <del>-</del>				iains (Col. (h) gair		
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis		cess of col. (i)				(), but not less tha Losses (from col.		
_	(1): 111111 20 01 120 1100	as of 12/31/69	over	col. (j), if any		<del></del>		`		
_a			-						14,082	
_b									5,086	
									111.	
<u>d</u>					_					
_ <u>e</u>		<u></u>			_					
2	Capital gain net income or (net cap	pital loss) { If gain, also enter of the loss of the l	ın Part I, line ın Part I, line	7 7	}	2			19,279	
3	Net short-term capital gain or (los	s) as defined in sections 1222(5) and	d (6):							
	If gain, also enter in Part I, line 8, o	, , ,	` ,		1					
_	If (loss), enter -0- in Part I, line 8	1 2 1: 4040( ) (	<u> </u>	<del></del>		3		N/A	<u> </u>	
L	Part V   Qualification U	nder Section 4940(e) for	Reduced	lax on Net	inve	stment	nco	me		
(Fo	or optional use by domestic private	foundations subject to the section 4	1940(a) tax on	i net investment in	come.	)				
lf c	section 4940(d)(2) applies, leave th	us nart hlank								
	section 4340(u)(2) applies, leave th	is part blank.								
		ion 4942 tax on the distributable am		•	lod?				Yes X No	
		ify under section 4940(e). Do not cor								
<u>1</u>		each column for each year; see instru	ictions before	making any entrie					(d)	
	(a) Base period years	(b) Adjusted qualifying dist	ributione	Net value of nor	(C)	hhlaca acc	ote		bùtión ratio	
_	Calendar year (or tax year beginnin	·9 ···/		Net value of flor	HICHAI I			(cor (b) at	vided by col. (c))	
_	2008		9,840.			339,5			.323474	
	2007		1,915.			533,3			.247354	
	2006		8,837.		<u> </u>	661,9	56.		.055913	
_	2005		5,118.			190,5			.029813	
	2004	112.	2,737.		1,	964,1	4/.	,	.062489	
									710047	
	Total of line 1, column (d)							2	.719043	
3	_	5-year base period - divide the total o	n line 2 by 5,	or by the number	of yea	rs		_	1 42000	
	the foundation has been in existen	ce if less than 5 years	-			-		3	.143809	
									405 564	
4	Enter the net value of noncharitable	le-use assets for 2009 from Part X, li	ine 5					4	135,561.	
								ŀ		
5	Multiply line 4 by line 3							5	19,495.	
6	Enter 1% of net investment incom-	e (1% of Part I, line 27b)						6	207.	
								1	<b>.</b>	
7	Add lines 5 and 6							7	19,702.	
8	Enter qualifying distributions from	Part XII, line 4						8	<u>112,500.</u>	
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	tax rate.				

	n 990-PF (2009)	FOUNDATION					2097			Page
P	rt VI Excise Ta	x Based on Investment Incom	e (Section 4940(a	), 4940(b),	4940(e), or	<u> 4948</u>	<u>- see i</u>	nstr	uctio	ns)
1:	Exempt operating found:	tions described in section 4940(d)(2), check	here 🕨 🔙 and enter	"N/A" on line 1.	)					
	Date of ruling or determi	nation letter: (attac	ch copy of letter if necessa	ary-see instruc	tions)					
ĺ		it meet the section 4940(e) requirements in F				1			2	207.
	of Part I, line 27b						Ī			
(		itions enter 2% of line 27b. Exempt foreign o	organizations enter 4% of F	Part I. line 12. c	ol. (b)					
2		omestic section 4947(a)(1) trusts and taxable			(, )	2				0.
3	Add lines 1 and 2			,		3			2	207.
4		lomestic section 4947(a)(1) trusts and taxable	le foundations only. Others	s enter -0-)		4	<b>†</b> -			0.
5	, , ,	t income. Subtract line 4 from line 3. If zero	•	<i>3</i> 3.113. <i>3</i> 7		5	<u> </u>			207
6	Credits/Payments:	, modifie, baba documo y motivimo de in coro	or 1000; unto: 0 .		•	-				20,
_	•	ents and 2008 overpayment credited to 2009	ء ا ه	a	660					
		ons - tax withheld at source	6		27					
			_		21.	4				
		for extension of time to file (Form 8868)	6	<del></del>		┪				
_	Backup withholding erro	· · · · · ·	6	08 1	<del></del>	١.,			c	- 07
7		ts. Add lines 6a through 6d	7.5 0000			7	<del> </del>		0	587.
8		erpayment of estimated tax. Check here		1	_	8				
9		es 5 and 8 is more than line 7, enter amount				9	-			
10	• •	more than the total of lines 5 and 8, enter the	•	400	1	10	-		4	180.
11		0 to be: Credited to 2010 estimated tax		480	. Refunded ►	11	<u> </u>			0.
	· · · · · · · · · · · · · · · · · · ·	ents Regarding Activities							V	. I Ata
1a		e foundation attempt to influence any nation	al, state, or local legislation	n or did it partic	ipate or interven	e in			Yes	
	any political campaign?							1a	<del> </del>	X
t		00 during the year (either directly or indirect						1b	<u> </u>	X
		o 1a or 1b, attach a detailed description	of the activities and co	pies of any ma	atenals publish	ed or				1
	•	dation in connection with the activities.								
0	Did the foundation file Fo	rm 1120-POL for this year?						1c	ļ	X
d	Enter the amount (if any)	of tax on political expenditures (section 4955	5) imposed during the year	r <del>.</del>				'	}	
	(1) On the foundation.	> \$ (2) On	foundation managers.	\$	0.	<u>.</u>				
e	Enter the reimbursement	(if any) paid by the foundation during the yea	ar for political expenditure	tax imposed on	foundation					1
	managers. > \$	0.								
2	Has the foundation engage	ed in any activities that have not previously b	een reported to the IRS?			-		2	<u>L</u>	X
	If "Yes," attach a detail	ed description of the activities.								
3	Has the foundation made	any changes, not previously reported to the I	IRS, in its governing instru	ıment, artıcles o	of incorporation,	or		'		
	bylaws, or other similar ii	struments? If "Yes," attach a conformed	copy of the changes					3	ĺ	X
4a	Did the foundation have i	nrelated business gross income of \$1,000 or	r more during the year?					4a		X
ь		eturn on Form 990-T for this year?		•	-	N	/A	4b		
5		rmination, dissolution, or substantial contrac	ction during the year?	-	•		•	5		Х
	• •	rement required by General Instruction								
6	Are the requirements of s	ection 508(e) (relating to sections 4941 throu	ugh 4945) satisfied either:				i			
•	By language in the gov		- <b>,</b> ,						1	
		effectively amends the governing instrument	so that no mandatory dire	ections that con	flict with the stat	e law			1	
	remain in the governin							6	X	
7	•	t least \$5,000 in assets at any time during the	e vear?					7	X	<u> </u>
'		II, col. (c), and Part XV.	o year:	-			ŀ			t -
0.			etarad (ean inetrijetione)							
σa	_	he foundation reports or with which it is regi	aresen (aes man octions). I		<u>-</u>					
	DC	7 has the foundation for a find a second	Torm 000 DC 4- 45- 44	Cana1/-	Incompate's					
D		e 7, has the foundation furnished a copy of F		ey General (or c	iesignatė)		İ	.	v	1
_	•	y General Instruction G? If "No," attach		40.404.1461				8ь	X	<b></b>
9		status as a private operating foundation with			942(1)(5) for cale	endar				
		ear beginning in 2009 (see instructions for P						9		X
10	Did any persons become	substantial contributors during the tax year?	If "Yes," attach a schedule listi	ng their names an	d addresses			10		X

10 X Form **990-PF** (2009)

	•		•
	,		
orr	THE WILLIAM H.G. FITZGERALD FAMILY  990-PF(2009) FOUNDATION 52-209	7024	Page 5
	n 990-PF (2009) FOUNDATION 52-209 art VII-A   Statements Regarding Activities (continued)	7034	1 age 3
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	ТТ	
	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	''	
12	August 17, 2008?	12	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  N/A	13	-   -
	Website address ► N/A	110	
14	The books are in care of ► THE FOUNDATION  Telephone no. ► 202-3	32-54	.01
• •	Located at ► SAME ADDRESS, WASHINGTON, DC ZIP+4 ►2		
15	Section 4947(a)(1) nonexempt charitable 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	N/	`A
Pa	art 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.	1	es No
1:	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		
	a disqualified person?		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1 1	
	for the benefit or use of a disqualified person)?		
	(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.)	1 1	
ŀ	of fany answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	1 1	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?  N/A	16	
	Organizations relying on a current notice regarding disaster assistance check here	1	
	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)):	1	
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 X No		1
	If "Yes," list the years		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		
	statement - see instructions.) N/A	2b	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
	<b>&gt;</b>		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		
	during the year?		
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after		
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		
	Form 4720, to determine if the foundation had excess business holdings in 2009.)  N/A	3ь	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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

			<b></b>	174 -
Form 990-PF (2009) FOUNDATION  Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	52-20970 Jued)	)34 Page €
5a During the year did the foundation pay or incur any amount to:	i om 4720 may be	ricquirou (somm	1	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	T Ye	s X No	1 1
(2) Influence the outcome of any specific public election (see section 4955); (		•		
any voter registration drive?	or to ourly on, andony or man	_	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	• 2		es X No	
• • • • • • • • • • • • • • • • • • • •			:s (24) 140	
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section		es X No	
509(a)(1), (2), or (3), or section 4940(d)(2)?			S LALINO	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or		( <del>.</del>	
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in Regulations	/-	_
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check t				
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption f				
expenditure responsibility for the grant?	•	√I/A Y	s L No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).		ł	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		ļ	
a personal benefit contract?		Y6	es 🗓 No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		_	6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y6	s X No	
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attribut				7b
Information About Officers Directors Truck		nagers, Highly		
Part VIII Paid Employees, and Contractors			•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
			amninues hensit nione	(e) ryhense
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	account, other
	hours per week devoted to position		employee benefit plans	account, other allowances
ANNE F. SLICHTER	hours per week devoted	(If not paid,	employee benefit plans and deferred	account, other
ANNE F. SLICHTER 61 CHESTNUT COURT	hours per week devoted to position  PRESIDENT	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821	hours per week devoted to position  PRESIDENT  0.00	(If not paid, enter -0-)	employee benefit plans and deferred	account, other
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD	hours per week devoted to position  PRESIDENT	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER	(If not paid, enter -0-)  O •	employee benefit plans and deferred compensation	account, other allowances  0 •
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER	(If not paid, enter -0-)  O •	employee benefit plans and deferred compensation	account, other allowances  0 •
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY	(If not paid, enter -0-)  O.  I'  O.	employee benefit plans and deferred compensation  O .	o .
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00	(If not paid, enter -0-)  O.  VI'  O.	employee benefit plans and deferred compensation	account, other allowances  0.
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none,	(If not paid, enter -0-)  O.  VI'  O.	employee benefit plans and deferred compensation  O .  O .	0 .
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, (b) Title, and average	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .	0 .  0 .  0 .  (e) Expense
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none,	(If not paid, enter -0-)  O.  VI'  O.	employee benefit plans and deferred compensation  O .  O .	0 .
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, hours per week	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .  (d) Contributions to employee benefit plans and deferred and deferred and and deferred a	0 .  (e) Expense account, other
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, hours per week	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .  (d) Contributions to employee benefit plans and deferred and deferred and and deferred a	0 .  0 .  (e) Expense account, other
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, hours per week	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .  (d) Contributions to employee benefit plans and deferred and deferred and and deferred a	0 .  (e) Expense account, other
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, hours per week	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .  (d) Contributions to employee benefit plans and deferred and deferred and and deferred a	0 .  (e) Expense account, other
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, hours per week	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .  (d) Contributions to employee benefit plans and deferred and deferred and and deferred a	0 .  (e) Expense account, other
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, hours per week	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .  (d) Contributions to employee benefit plans and deferred and deferred and and deferred a	0 .  (e) Expense account, other
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, hours per week	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .  (d) Contributions to employee benefit plans and deferred and deferred and and deferred a	0 .  (e) Expense account, other
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, hours per week	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .  (d) Contributions to employee benefit plans and deferred and deferred and and deferred a	0 .  (e) Expense account, other
ANNE F. SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 DESMOND G. FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 DAVID SLICHTER 61 CHESTNUT COURT CHAMPAIGN, IL 61821 SARAH FITZGERALD 25 CARRINGTON DRIVE GREENWICH, CT 06831 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  0.00  VICE PRESIDEN  0.00  TREASURER  0.00  SECRETARY  0.00  cluded on line 1). If none, hours per week	(If not paid, enter -0-)  O.  VI'  O.  enter "NONE."	employee benefit plans and deferred compensation  O .  O .  (d) Contributions to employee benefit plans and deferred and deferred and and deferred a	0 .  (e) Expense account, other

Page 6

Total number of other employees paid over \$50,000

Form 990-PF (2009) FOUNDATION	52-2	2097034 Page 7
Part VIII Information About Officers, Directors, Trustee Paid Employees, and Contractors (continued)	es, Foundation Managers, Highly	
3 Five highest-paid independent contractors for professional services.	If none, enter "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		
List the foundation's four largest direct charitable activities during the tax year. Include number of organizations and other beneficiaries served, conferences convened, resear  1 N/A  2	relevant statistical information such as the ch papers produced, etc.	Expenses
3		
4		10000
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2.	Amount
1 N/A		
		0.
2		
4,000,000		
All other program-related investments. See instructions.		
3	,	

Form **990-PF** (2009)

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0.

Total. Add lines 1 through 3

52-2097034 Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	i, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		- · · · · · · · · · · · · · · · · · · ·
а	Average monthly fair market value of securities	1a	121,315.
b	Average of monthly cash balances	1b	16,310.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	137,625.
е	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	137,625.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,064.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	135,561.
6	Minimum investment return. Enter 5% of line 5	6	6,778.
P	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	6,778.
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.)		
C	Add lines 2a and 2b	2c	207.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,571.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	6,571.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	6,571.
P	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
,	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	112,500.
a b	Program-related investments - total from Part IX-B	1b	0.
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	
Ь	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	112,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		112,300.
J	Income. Enter 1% of Part I, line 27b	5	207.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	112,293.
U	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940(e) reduction of tax in those years.	uannes IC	n alo 3000011

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	001700	1 data prior to 2000	2000	
line 7				6,571.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:	-			
, ,		0.		1
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
<b>b</b> From 2005				
c From 2006				
d From 2007				
e From 2008 67,956	•			
f Total of lines 3a through e	67,956.			
4 Qualifying distributions for 2009 from			<del> </del>	
Part XII, line 4: ► \$ 112,500	<u>.</u>			
a Applied to 2008, but not more than line 2a	]		0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				6,571.
e Remaining amount distributed out of corpus	105,929.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a).)  6 Enter the net total of each column as				
indicated below:	172 005			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	173,885.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		<del> </del>
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.1		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see ınstr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010			_	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		ļ		
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.		.=		
Subtract lines 7 and 8 from line 6a	173,885.			
10 Analysis of line 9:				
a Excess from 2005	<u> </u>			
b Excess from 2006	]			
c Excess from 2007	]			
d Excess from 2008 67,956.	]			
e Excess from 2009 105, 929.				

FOUNDATION

Part XIV   Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	···
1 a If the foundation has received a ruling o	r determination letter tha	it it is a private operating			
foundation, and the ruling is effective fo	r 2009, enter the date of	the ruling	<b>&gt;</b>		
b Check box to indicate whether the found	dation is a private operati	ing foundation described	in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	<del></del> -	
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for		<del>                                     </del>	<del> </del>	<del> </del>	
each year listed				<del></del>	<del></del>
b 85% of line 2a		<u> </u>	·	<u> </u>	
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					
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			<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,					1
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)			<del> </del>		
(2) Support from general public and 5 or more exempt					
organizations as provided in	ļ		1	į	
section 4942(j)(3)(B)(iii)	ļ- <b></b>				
(3) Largest amount of support from	İ	1			
an exempt organization					
(4) Gross investment income .	<u>.                                    </u>				
Part XV Supplementary info			if the foundation	had \$5,000 or n	nore in assets
at any time during t	he year-see the i	instructions.)			
1 Information Regarding Foundation	n Managers:		• •		
a List any managers of the foundation who	•	than 2% of the total cont	ributions received by the	foundation before the cl	lose of any tax
year (but only if they have contributed m			,		
NONE					
b List any managers of the foundation who	n own 10% or more of th	e stock of a cornoration	(or an equally large portio	n of the ownership of a	nartnership or
other entity) of which the foundation has			(or an equally large portio	in or allo owner only or a	pur unor simp or
	<b>g</b>				
NONE					
2 Information Regarding Contribution					
Check here ► X if the foundation of					
the foundation makes gifts, grants, etc. (	see instructions) to indiv	riduals or organizations i	nder other conditions, co	mpiete items 2a, b, c, ai	10 C.
a The name, address, and telephone numb	er of the person to whor	m applications should be	addressed:		
		. <u></u>			
<b>b</b> The form in which applications should be	e submitted and informat	tion and materials they sl	rould include:		
		<u> </u>			
c Any submission deadlines:					
d Any restrictions or limitations on awards	such as by geographic	al areas, charitable fields	kinds of institutions, or or	ther factors	
a Any resultations of minimultations on awdites	, such as by yeographica	. a. cas, chanabic licius,	amus or montudons, or o	aror igotors.	

52-2097034

Page 10

Form 990-PF (2009)

Form 990-PF (2009) FOUNDATION

Part XV | Supplementary Information (continued)

IDATION 52-2097034 Page 11

Part Av Supplementary information	(Continued)			
3 Grants and Contributions Paid During the You	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient	CONTRIBUTION	741100111
SEE STATEMENT 11				
Total			<u>▶ 3a</u>	112,500.
h Approved for future payment  NONE				
Total			<b>▶</b> 3b	0.

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

Enter gross amounts unless otherwise indicated.	Unrelated	business income		section 512, 513, or 514	(e)
·	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	Turicaon income
a	_				
b					
c	-				
d	-	<del></del>	<del></del>		
e	-				·
Fore and contracts from any organist againsts	-				· · · · · · · · · · · · · · · · · · ·
g Fees and contracts from government agencies					
2 Membership dues and assessments	<del></del>				
3 Interest on savings and temporary cash			14	0.61	
Investments			24	861. 5,091.	
4 Dividends and interest from securities			44	3,031.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			+ -	+-	
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			<del>-    </del>		
7 Other investment income		<del></del>			
8 Gain or (loss) from sales of assets other					
than inventory			18	19,279.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	.				
b					
C					
d					
e	_				<u> </u>
2 Subtotal. Add columns (b), (d), and (e)			).	25,231.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	25,231.
See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accor	nolishment of	Exempt Pu	moses	
Total of Activities				. poses	
Line No. Explain below how each activity for which inc	ome is reported in d	column (e) of Part XV	I-A contributed i	mportantly to the accomple	shment of

# the foundation's exempt purposes (other than by providing funds for such purposes).

	IIII MIDDIAM	11.6. 1	TIBOLIMED	IMILLI			
Form 990-PF (2009)	FOUNDATION					52-2097	034
Part XVII Info	rmation Regarding To	ransfers 1	To and Transa	ctions and	Relationships	With Nonchari	table

5	2	_	2	O	9	7	O	3	4	
_	~		~	v	_	•	v	_	-	

Page 13

_	Exempt Organizations					
1	Did the organization directly or indirectly engage in any of the following	ng with any other organizati	ion described in section 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 5	27, relating to political orga	nızatıons?			
a	a Transfers from the reporting foundation to a noncharitable exempt or	rganization of:				
	(1) Cash .			1a(1)		X
	(2) Other assets	_	_	1a(2)		X
Ь	Other transactions:					
	(1) Sales of assets to a noncharitable exempt organization			1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization			1b(2)		X
	(3) Rental of facilities, equipment, or other assets			1b(3)		X
	(4) Reimbursement arrangements			1b(4)		X
(5) Loans or loan guarantees						
	(6) Performance of services or membership or fundraising solicitation	ons		1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid em	nployees		1c		X
d	If the answer to any of the above is "Yes," complete the following school	edule. Column (b) should a	lways show the fair market value of the goods, o	ther ass	ets,	
	or services given by the reporting foundation. If the foundation receiv	ved less than fair market val	ue in any transaction or sharing arrangement, sl	now in		
	column (d) the value of the goods, other assets, or services received.					
(a)	Line no (b) Amount involved (c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, and s	sharing an	rangeme	nts
	N/A					
2a	Is the foundation directly or indirectly affiliated with, or related to, one	or more tax-exempt organ	izations described			
	in section 501(c) of the Code (other than section 501(c)(3)) or in section	tion 527?		Yes	X	No
b	If "Yes," complete the following schedule.					
	(a) Name of organization	(b) Type of organization	(c) Description of relationsh	ıp		
	N/A					
- [	Under penalties of perjury, I declare that I have examined this return, including according to the Posterior of the Posterior	· · •	· · · · · · · · · · · · · · · · · · ·	ие, согте	ct,	
	and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on		_			
	monthermy	8.17.10	V. P.			<del></del>
<u>e</u>	Signature of officer or trustee	Date	Title			
E	Preparer's	0	colf	's identify	ring num	ber
하	Signature Rosenbloom & Associ	moser	7-30-/C employed ► □			
	mis name (or years ROSENBLOOM & ASSOCI		P'. C EIN ►			
Ι,	1455 BESEARCH BLVD,					
	address, and ZIP code ROCKVILLE, MD 20850		Phone no. (301)		<u>2-7</u>	
			For	m <b>990</b>	-PF (	2009)

FORM 990-PF INTEREST ON SAVI	NGS A	ND TEM	PORARY C	ASH II	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
BANK OF AMERICA - BROKERAGE BANK OF AMERICA - BROKERAGE							685. 176.
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMN A				861.
FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	A)
BANK OF AMERICA - BROKERAGE BANK OF AMERICA - BROKERAGE	-	_	5,160. 42.		111.	5,	049.
TOTAL TO FM 990-PF, PART I, L	N 4 =		5,202.		111.	5,	091.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		2,000.	2,	,000.			0.
TO FORM 990-PF, PG 1, LN 16B	-	2,000.	2,	,000.			0.
FORM 990-PF O	THER 1	PROFES	SIONAL FE	EES	·	STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
AGENCY FEES OFFICE EXPENSE	-	2,053. 433.	2,	053. 433.			0.
TO FORM 990-PF, PG 1, LN 16C		2,486.	2,	486.			0.

TO FORM 990-PF, PG 1, LN 18 207. 0. 0. 0. FORM 990-PF OTHER FUNDS STATEMENT OF YEAR YEAR YEAR YEAR YEAR TOTAL TO FORM 990-PF, PART II, LINE 29 2,181,416. 2,089,454. ENDOWMENT FUND 2,181,416. 2,089,454. ENDOWN 990-PF CORPORATE STOCK STATEMENT TOTAL TO FORM 990-PF, PART II, LINE 10B 28,315. 54,350. ENDOWN 990-PF, PART II, LINE 10B 28,315. 54,350. ENDOW 990-PF CORPORATE BONDS STATEMENT STOCK STOCK STOCK STOCK STOC	FORM 990-PF	TAX:	es 		STATEMENT	5
TO FORM 990-PF, PG 1, LN 18 207. 0. 0. 0. FORM 990-PF OTHER FUNDS STATEMENT (A)  DESCRIPTION BEGINNING OF YEAR YEAR ENDOWMENT FUND 2,181,416. 2,089,454. 2,181,416. 2,089,454. 2,181,416. 2,089,454. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	DESCRIPTION	EXPENSES	NET INVES	T- ADJUSTEI	D CHARITA	
FORM 990-PF OTHER FUNDS STATEMENT (B)  BEGINNING OF YEAR YEAR  ENDOWMENT FUND 2,181,416. 2,089,454.  TOTAL TO FORM 990-PF, PART II, LINE 29 2,181,416. 2,089,454.  FORM 990-PF CORPORATE STOCK STATEMENT TALL TO FORM 990-PF, PART II, LINE 10B 28,315. 54,350.  TOTAL TO FORM 990-PF, PART II, LINE 10B 28,315. 54,350.  FORM 990-PF CORPORATE BONDS STATEMENT (B)  DESCRIPTION BOOK VALUE FAIR MARKET VALUE  BANK OF AMERICA 28,315. 54,350.  FORM 990-PF CORPORATE BONDS STATEMENT (B)  DESCRIPTION BOOK VALUE FAIR MARKET VALUE  DESCRIPTION BOOK VALUE OR OR OR OR OR OR OR OR OR OR OR OR OR	FEDERAL TAX	207.	-	0.	<del></del>	0.
DESCRIPTION 2,181,416. 2,089,454.  ENDOWMENT FUND 2,181,416. 2,089,454.  TOTAL TO FORM 990-PF, PART II, LINE 29 2,181,416. 2,089,454.  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE FAIR MARKET VALUE  BANK OF AMERICA 28,315. 54,350.  FORM 990-PF CORPORATE BONDS STATEMENT 8  DESCRIPTION BOOK VALUE FAIR MARKET VALUE  DESCRIPTION BOOK VALUE FAIR MARKET VALUE  DESCRIPTION BOOK VALUE FAIR MARKET VALUE  DESCRIPTION BOOK VALUE FAIR MARKET VALUE  DESCRIPTION BOOK VALUE FAIR MARKET VALUE  DESCRIPTION BOOK VALUE FAIR MARKET VALUE  DESCRIPTION BOOK VALUE O. 0.	TO FORM 990-PF, PG 1, LN 18	207.		0.		0.
DESCRIPTION  ENDOWMENT FUND  TOTAL TO FORM 990-PF, PART II, LINE 29  DESCRIPTION  ENDOWMENT FUND  TOTAL TO FORM 990-PF, PART II, LINE 29  DESCRIPTION  BOOK VALUE  FAIR MARKET VALUE  BANK OF AMERICA  TOTAL TO FORM 990-PF, PART II, LINE 10B  DESCRIPTION  DESCRIPTION  END OF YEAR  2,181,416.  2,089,454.  STATEMENT  FAIR MARKET VALUE  DESCRIPTION  END OF VEAR  STATEMENT  END OF YEAR  YEAR  2,181,416.  2,089,454.  STATEMENT  FAIR MARKET VALUE  DESCRIPTION  BOOK VALUE  FAIR MARKET VALUE  DESCRIPTION  BOOK VALUE  FAIR MARKET VALUE  DESCRIPTION  BOOK VALUE  FAIR MARKET VALUE  DESCRIPTION  DESCRIPTION  BOOK VALUE  TAIR MARKET VALUE  DESCRIPTION  DESCRIPTION  DO 0.	FORM 990-PF	OTHER F	UNDS		STATEMENT	6
TOTAL TO FORM 990-PF, PART II, LINE 29  2,181,416.  2,089,454.  FORM 990-PF  CORPORATE STOCK  STATEMENT  FAIR MARKET VALUE  BANK OF AMERICA  28,315.  54,350.  FORM 990-PF  CORPORATE BONDS  STATEMENT  EDESCRIPTION  BOOK VALUE  FAIR MARKET VALUE  FORM 990-PF  CORPORATE BONDS  STATEMENT  EDESCRIPTION  BOOK VALUE  FAIR MARKET VALUE  BANK OF AMERICA  0. 0.	DESCRIPTION			BEGINNING OF	END OF	
FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE  BANK OF AMERICA 28,315. 54,350.  TOTAL TO FORM 990-PF, PART II, LINE 10B 28,315. 54,350.  FORM 990-PF CORPORATE BONDS STATEMENT 8  DESCRIPTION BOOK VALUE  FAIR MARKET VALUE  BANK OF AMERICA 0. 0.	ENDOWMENT FUND		_	2,181,416.	2,089,4	54.
DESCRIPTION  BOOK VALUE  FAIR MARKET VALUE  28,315. 54,350.  TOTAL TO FORM 990-PF, PART II, LINE 10B  28,315. 54,350.  FORM 990-PF  CORPORATE BONDS  STATEMENT  BOOK VALUE  FAIR MARKET VALUE  BANK OF AMERICA  0. 0.	TOTAL TO FORM 990-PF, PART I	I, LINE 29	=	2,181,416.	2,089,4	54.
DESCRIPTION  BANK OF AMERICA  TOTAL TO FORM 990-PF, PART II, LINE 10B  28,315.  54,350.  FORM 990-PF  CORPORATE BONDS  STATEMENT  BOOK VALUE  FAIR MARKET VALUE  BANK OF AMERICA  0. 0.	FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7
TOTAL TO FORM 990-PF, PART II, LINE 10B  28,315. 54,350.  FORM 990-PF  CORPORATE BONDS  STATEMENT 8  DESCRIPTION  BOOK VALUE  BANK OF AMERICA  0. 0.	DESCRIPTION			BOOK VALUE		T
FORM 990-PF CORPORATE BONDS STATEMENT 8  DESCRIPTION BOOK VALUE VALUE  BANK OF AMERICA 0. 0.	BANK OF AMERICA		_	28,315.	54,3	50.
DESCRIPTION  BOOK VALUE  BANK OF AMERICA  0.  0.	TOTAL TO FORM 990-PF, PART I	I, LINE 10B		28,315.	54,3	50.
DESCRIPTION BOOK VALUE VALUE  BANK OF AMERICA 0. 0.	FORM 990-PF	CORPORAT	E BONDS		STATEMENT	8
	DESCRIPTION	<b>-</b>		BOOK VALUE		T
TOTAL TO FORM 990-PF, PART II, LINE 10C 0. 0.	BANK OF AMERICA		<del></del>	0.		0.
	TOTAL TO FORM 990-PF, PART II	I, LINE 10C		0.		0.

FORM 990-PF C	THER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
HOLYOKE PARTNERSHIP MUTUAL FUND	COST	2,000,000.	2,571,489. 46,972.
TOTAL TO FORM 990-PF, PART II, L	INE 13	2,050,786.	2,618,461.
FORM 990-PF	OTHER ASSETS		STATEMENT 10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
PREPAID FEDERAL TAXES	660.	480.	480.

FORM 990-PF

STATEMENT 11

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP RECIPIE AND PURPOSE OF GRANT STATU	
THE ALZHEIMER'S DRUG DISCOVERY FOUNDATION 1414 AVENUE OF AMERICAS, SUITE 1502 NEW YORK, NY 10019	SUPPORT	5,000.
ASHOKA: INNOVATORS FOR THE PUBLIC 1700 NORTH MOORE STREET, SUITE 2000 ARLINGTON, VA 22209	SUPPORT	8,000.
CARING AT COLUMBIA 1051 RIVERSIDE DRIVE, UNIT 74 NEW YORK, NY 10032	SUPPORT	500.
CATHOLIC MEDICAL MISSION BOARD 10 WEST 17TH STREET NEW YORK, NY 10011	SUPPORT	5,000.
CATHOLIC RELIEF SERVICES P.O BOX 17090 BALTIMORE, MD 21203	SUPPORT	5,000.
CHAMPAIGN COUNTY HEALTH CARE CONSUMERS 44 MAIN ST. SUITE 208 CHAMPAIGN, IL 61820	SUPPORT	2,000.
CITIZEN'S ACADEMY 1827 ANSEL ROAD CLEVELAND, OH 44106	SUPPORT	1,500.
CONSERVATION INTERNATIONAL 2011 CRYSTAL DRIVE, SUITE 500 ARLINGTON, VA 22202	SUPPORT	5,000.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

• • • •		• •
THE WILLIAM H.G. FITZGERALD FAN	ILY FOUND	52-2097034
CRISIS NURSERY 1309 WEST HILL STREET URBANA, IL 61801	SUPPORT	1,500.
DOCTORS WITHOUT BORDERS 333 SEVENTH AVENUE, 2ND FLOOR NEW YORK, NY 10001	SUPPORT	5,000.
THE EPIPHANY SCHOOL 154 CENTRE STREET DOCHESTER, MA 02124	SUPPORT	5,000.
GROTON SCHOOL P.O. BOX 991 282 FARMERS ROW GROTON, MA 01450	SUPPORT	1,000.
HARVARD GRADUATE SCHOOL OF EDUCATION APPIAN WAY CAMBRIDGE, MA 02138	SUPPORT	2,500.
HOPE FOR POOR CHILDREN FOUNDATION 25 CARRINGTON DRIVE GREENWICH, MA 06831	SUPPORT	25,000.
NATURAL RESOURCES DEFENCE COUNCIL 40 W 20TH ST NEW YORK, NY 10011	SUPPORT	5,000.
ORBIS INTERNATIONAL, INC. 520 EIGHT AVENUE, 11TH FLOOR NEW YORK, NY 10018	SUPPORT	5,000.
PLANNED PARENTHOOD OF ILLINOIS 18 SOUTH MICHIGAN AVE 6TH FL CHICAGO, IL 60603	SUPPORT	2,500.
THE SMILE TRAIN P.O. BOX 96231 WASHINGTON, DC 20090	SUPPORT	2,500.

THE WILLIAM H.G. FITZGERALD FAM	ILY FOUND	52-2097034
ST. PAUL'S SCHOOL 325 PLEASANT STREET CONCORD, NH 03301	SUPPORT	1,000.
UNIVERSITY LABORATORY HIGH SCHOOL/UIF HARKER HALL, MC-386 1305 WEST GREEN STREET URBANA, IL 61801	SUPPORT	2,000.
UIF/ FRIENDS OF WILL 1305 WEST GREEN STREET URBANA, IL 61801	SUPPORT	5,000.
UIF/KRANNERT CENTER FOR THE PERFORMING ARTS 1305 WEST GREEN STREET URBANA, IL 61801	SUPPORT	10,000.
VITAE/CARING FOUNDATION 1731 SOUTHRIDGE, SUITE D JEFFERSON CITY, MO 65109	SUPPORT	5,000.
WASHINGTON TENNIS & EDUCATION FOUNDATION 16TH & KENNEDY STREETS, NW WASHINGTON, DC 20011	SUPPORT	2,500.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

112,500.