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Form 990-P Department of the Treasury Internal Revenue Service For calendar year 2005 G Check all that apply

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

OMB No 1545-0052

2009

11110			0 to 200 a cop) or and rotal		ic reporting	Toquironionio	<u> </u>		
For	calen	dar year 2009, or tax year beginning $06/01/09$,	and ending 05/3	1/10	····				
G	Check	all that apply Initial return Initial re	eturn of a former public	chanty		Final return			
		Amended return Add	dress change	Name	change				
Use	the II	RS Name of foundation			A Emp	loyer identification num	ber		
	label.	Mangen Family Charitable 1	Foundation		06	-1519384	_		
	herwis	0/0 7			B Tele	phone number (see page 1	0 of the instructions)		
	print	Number and street (or P O box number if mail is not delivered	I to street address)	Room/suite		3-284-0607			
	r type.		,			emption application is pend	ing check here		
	Speci		- 	·	1	oreign organizations, check	. —		
Inst	ructio		06444		ſ		<u>-</u>		
<u></u>		type of organization X Section 501(c)(3) exempt private			1	Foreign organizations meeting the 85% test, check here and attach computation			
			le private foundation				· · · -		
			 		1	vate foundation status was on 507(b)(1)(A), check here			
		rket value of all assets at end J Accounting method	X Cash Acc	ruai	ļ				
	-	(from Part II, col (c), United Specify)			ſ	te foundation is in a 60-month termination			
	ne 16)		be on cash basis)		unue	r section 507(b)(1)(B), chec	ck nere		
P	art I	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net inv	cetmont	(c) Advicted not	(d) Disbursements for charitable		
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(D) NEUM		(c) Adjusted net income	purposes		
		the amounts in column (a) (see page 11 of the instructions))			<u></u>		(cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)					3 3		
	2	Check ► X if the foundation is not required to attach Sch B					1.		
	3	Interest on savings and temporary cash investments	6,244		366	6,244			
	4	Dividends and interest from securities	7,889		7,889	7,889	•		
	5a	Gross rents							
•	Ь	Net rental income or (loss)							
Revenue	6a	Net gain or (loss) from sale of assets not on line 10 Stmt 1	1,984						
/er	b	Gross sales price for all assets on line 6a 150,000							
é	7	Capital gain net income (from Part IV, line 2)			0				
LE,						0			
	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns & allowances							
	Ь	Less Cost of goods sold							
	C	Gross profit or (loss) (attach schedule)		 -					
	11	Other income (attach schedule)					· 		
	12	Total. Add lines 1 through 11	16,117		8,255	14,133			
(A)	13	Compensation of officers, directors, trustees, etc							
enses	14	Other employee salanes and wages							
ä	15	Pension plans, employee benefits							
	16a	Legal fees (attach schedule)							
ш	ь	Accounting fees (attach schedule) Stmt 2	1,056						
and Administrative Exp	c	Other professional fees (attach schedule)							
ati	17	Interest				-			
str	18	Taxes (attach schedule) (see page 14 of the instructions) Stmt 3	133						
Ξ.	19	Depreciation (attach schedule) and depletion							
<u>=</u>	20	Occupancy							
Ä		· · · ·							
Þ	21	Printing and publications	· - · - · - · - · - · - · - · - · - · -						
	22								
Operating	23	Other expenses (att sch.)		. ———	 				
ati	24	Total dia ating and ating in strative expenses.	1 100		ار		^		
er	}	Add lines 1 through 23	1,189		0		<u>0</u>		
g	25	Contributions, girls, grants paid	45,000				45,000		
	26	Total expenses and dispursements Add lines 24 and 25	46,189		0	0	45,000		
	27	Subtract line 26 from line 12				İ			
	а	Excess of revenue over expenses and disbursements	-30,072						
	b	Net investment income (if negative, enter -0-)			8,255				
	С	Adjusted net income (if negative, enter -0-)				14,133			

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F	orm 99	0-PF(2009) Mangen Family Charitable Foundation			Page 2
•	Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	
_		 	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	464,254	90,169	90,169
	2	Savings and temporary cash investments Accounts receivable ▶	404,234	50,105	30,103
	3	Less allowance for doubtful accounts		· ·	•
		Pledges receivable			
	4	Less allowance for doubtful accounts			
	_	Grants receivable			<u> </u>
	5				
	6	Receivables due from officers, directors, trustees, and other			
	}	disqualified persons (attach schedule) (see page 16 of the instructions)			
	,				
	7	Other notes and loans receivable (att. schedule) Less allowance for doubtful accounts			
G		Inventories for sale or use			
Assets	8 9	Prepaid expenses and deferred charges			
186) .	Investments—U S and state government obligations (attach schedule)	<u> </u>		
4	10a b	Investments—corporate stock (attach schedule) See Stmt 4	399,880	743,893	763,140
	ł	Investments—corporate bonds (attach schedule)	3337000	7.13,003	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	С 11	Investments—land, buildings, and equipment basis			· · · · · · · · · · · · · · · · · · ·
	'''	Less accumulated depreciation (attach sch.)		-	
	12	Investments—mortgage loans	<u> </u>		
ı	13	Investments—other (attach schedule)	h		
	14	Land, buildings, and equipment basis			
	1-7	Less accumulated depreciation (attach sch.)	1		
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
ĺ		instructions Also, see page 1, item I)	864,134	834,062	853,309
\neg	17	Accounts payable and accrued expenses			
_]	18	Grants payable			· -
<u>8</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
읾	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0	0	
7	_==	Foundations that follow SFAS 117, check here ▶			
က္ခ		and complete lines 24 through 26 and lines 30 and 31.			-
낈	24·	Unrestricted			-
ᡖ	25	Temporanly restricted			-
B	26	Permanently restricted			. `
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here ▶ X			
취		and complete lines 27 through 31.		ľ	2
딝	27	Capital stock, trust principal, or current funds	<u> </u>		
S	28	Paid-in or capital surplus, or land, bldg, and equipment fund			•
ĕ	29	Retained earnings, accumulated income, endowment, or other funds	864,134	834,062	
Š	30	Total net assets or fund balances (see page 17 of the			•
		instructions)	864,134	834,062	
ž	31	Total liabilities and net assets/fund balances (see page 17			
١		of the instructions)	864,134	834,062	· · · · · · · · · · · · · · · · · · ·
1	Part II	Analysis of Changes in Net Assets or Fund Balances			
_		net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	gree with		
		f-year figure reported on prior year's return)		1	864,134
2	Enter	amount from Part I, line 27a		2	-30,072
3	Other	increases not included in line 2 (itemize)		3	
4	Add (ı	nes 1, 2, and 3		4	834,062
		eases not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), I	line 30		834,062
					Form 990-PF (2009)

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

45,000

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8 Enter qualifying distributions from Part XII, line 4

Part VI instructions on page 18

Form	n 990-PF (2009) Mangen Family Charitable Foundation 06-1519384					F	age 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of	f the i	nstruc	tions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	٦	: -	· · · ,	٠		
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	-	11.		٠.	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	•	1				83
	here ▶ X and enter 1% of Part I, line 27b	ĺ	***				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	ا_			, ,		
	Part I, line 12, col (b)]				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2				0
3	Add lines 1 and 2		3				83
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_				83
6	Credits/Payments		, -	. ^			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a						
b	Exempt foreign organizations—tax withheld at source 6b		1 ,	1 '	,		
С	Tax paid with application for extension of time to file (Form 8868) 6c] ··,	٠,	~		
d	Backup withholding erroneously withheld 6d 6d] -]	: 1'			
7	Total credits and payments Add lines 6a through 6d		7				
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				83
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				
Pa	art VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				<u> </u>	Yes	No
	participate or intervene in any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19					'	ļ
	of the instructions for definition)?				1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				1	!]
	published or distributed by the foundation in connection with the activities] :- ''	!	1
С	Did the foundation file Form 1120-POL for this year?				1c		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				- '	} }	ł
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					ļ !	1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				- 1	_	
	on foundation managers > \$					-	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2	L!	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 of				j	` -	ļ
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
b	if "Yes," has it filed a tax return on Form 990-T for this year?		1	A\N	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T				.	- 1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					' ,'	
	By language in the governing instrument, or				-		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				÷,	, · ·]	
	conflict with the state law remain in the governing instrument?				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and I	art X\	/		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the						
	ınstructions) ▶ CT					. !	
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			ļ	, <i>,</i> ,	}	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation				8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				i	ļ	
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page					- 1	
	27)? If "Yes," complete Part XIV				9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				,]	}	
	names and addresses				10		<u>_X</u>
				Fo	rm 991	0-PF	(2009)

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		I Family Charleable Founda		1313364				age c			
Pa	rt VII-B Statement	s Regarding Activities for Which Form	4720 May Be Re	equired (contin	rued)		г——				
5a	• •	dation pay or incur any amount to				ļ		1			
		r otherwise attempt to influence legislation (section 4		□ '	Yes X No	:					
	(2) Influence the outcome of	f any specific public election (see section 4955), or to	carry on,		6			1			
	directly or indirectly, any	_		<u> </u>	Yes X No	1.	1				
	· · -	lividual for travel, study, or other similar purposes?		□ '	Yes X No	-, -	ļ.				
	• • • •	janization other than a charitable, etc., organization (_	[66]	()	, , ,				
		(3), or section 4940(d)(2)? (see page 22 of the instr		□ '	Yes X No	1					
	(5) Provide for any purpose	other than religious, charitable, scientific, literary, or	educational	<u></u>			,	٠.,			
	purposes, or for the prevention of cruelty to children or animals?										
b	•	1)-(5), did any of the transactions fail to qualify unde	•		37 / 3		· `	-			
	-	or in a current notice regarding disaster assistance	· · ·	nstructions)?	N/A	_ <u>5b</u>		├ ──			
		irrent notice regarding disaster assistance check her			▶ 📋	. "		ĺ			
С	·	stion 5a(4), does the foundation claim exemption from	n the tax	37/3 C	. 🗀	,	l	l			
	•	diture responsibility for the grant?		N/A 📙 🔻	Yes 📙 No						
	•	required by Regulations section 53 4945-5(d)				Ę					
6a	· · · · ·	e year, receive any funds, directly or indirectly, to pay	y premiums		. .	7.5	- 1	١			
	on a personal benefit contract				res X No	7,7.5.		1			
		e year, pay premiums, directly or indirectly, on a pers	sonal benefit contrac	(?		6b	<u> </u>	X			
	If "Yes" to 6b, file Form 8870		_	□ .	. 53	,		l			
		ar, was the foundation a party to a prohibited tax she			res X No		<u> </u>	<u> </u> -			
		eive any proceeds or have any net income attributab			N/A	7b		L			
Pa		About Officers, Directors, Trustees, Fo	undation ivianaç	gers, Hignly P	aid Employee	s,					
	and Contrac		4: / 22	fth a in atmostic and	<u> </u>						
1 LI	st all officers, directors, tru	stees, foundation managers and their compensa	tion (see page 22 c	the instructions		т					
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Ex	pense ac	ccount.			
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		other allowances				
				 	compensation	 					
	old Mangen	Cheshire	Trustee			l		_			
60	Abrams Road	CT 06410	1.00	<u> </u>		 		0			
						┼					
			}								
						├──					
			1			i					
		ohidlour (-though on thou included on		22 - 545 - im-4		ــــــ					
	Compensation of five highe If none, enter "NONE."	est-paid employees (other than those included or	i iine i—see page i	cs or the instructi	uiis).						
	il Holle, eliter Rolle.		T	I	(d) Contributions to	1					
	(a) Name and address	of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		pense ac				
	(a) Maine and addition	or cash chiphoyee pala hiera man 400,000	devoted to position	(a) components	plans and deferred compensation	othe	r allowan	ices			
NON				- -							
нои	-		1			}					
			 								
			 			<u> </u>					
				Ì							
		 	 								
			 								
			1 1								
otal r	number of other employees pa	aid over \$50,000	-4. – – –	·			T				
					For	m 990)-PF	(2009)			

Form 990-PF (20)	09) Mangen Family Charitable Foundatio	n 06-1519384	Page 7				
· Part VIII	Information About Officers, Directors, Trustees, Foundat	ion Managers, Highly Paid Empl	oyees,				
	and Contractors (continued)						
3 Five higher	st-paid independent contractors for professional services (see page 23						
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation				
NONE							
							
							
Total number of o	others receiving over \$50,000 for professional services		<u> </u>				
Part IX-A	Summary of Direct Charitable Activities						
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of							
	other beneficiaries served, conferences convened, research papers produced, etc		Expenses				
1 N/A							
2							
							
s							
4			 				
•							
.Part IX-B	Summary of Program-Related Investments (see page 24	of the instructions)					
	argest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount				
1 N/A							
2							
All other program re	elated investments. See page 24 of the instructions						
3	erated investments. One page 24 of the instructions						
-							

Total. Add lines 1 through 3

For	n 990-PF (2009) Mangen Family Charitable Foundation 06-1519384		Page 8
	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	n fou	
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes]]	FOF 010
а	Average monthly fair market value of securities	<u>1a</u>	585,319
ь	Average of monthly cash balances	1b	277,212
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0.50 = 5.1
d	Total (add lines 1a, b, and c)	1d	862,531
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	862,531
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of	1	
	the instructions) .	4	12,938
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	849,593
6	Minimum investment return. Enter 5% of line 5	6	42,480
P	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private ope	rating	
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	42,480
2a	Tax on investment income for 2009 from Part VI, line 5	1	
b	Income tax for 2009 (This does not include the tax from Part VI)	.	
С	Add lines 2a and 2b	2c	83
3	Distributable amount before adjustments Subtract line 2c from line 1	3	42,397
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5_	42,397
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	42,397
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	45,000
b	Program-related investments—total from Part IX-B	<u>1b</u>	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc.	- 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	

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45,000

4

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

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

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

<u>. Р</u>	art XIII Undistributed Income (see page 26 of	the instructions)			
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				42,397
2	Undistributed income, if any, as of the end of 2009				
а				11,603	<i>;</i> .
b					
3	Excess distributions carryover, if any, to 2009		 		
a				` *	
_				, , , , , , , , , , , , , , , , , , ,	
b				- BT	
C		=	1	* 1	· , ,
d		-	1		- ;
e	<u> </u>	-			
f	Total of lines 3a through e				······································
4	Qualifying distributions for 2009 from Part XII,			n - '	
	line 4 ▶ \$ 45,000	1		, , , , , , , , , , , , , , , , , , ,	
а	••	<u> </u>		11,603	
b	Applied to undistributed income of prior years	•		÷.	
	(Election required—see page 26 of the instructions)	-, -			
С	Treated as distributions out of corpus (Election	Ì			, , , , , , , , , , , , , , , , , , , ,
	required—see page 26 of the instructions)	ļ		1000	1 2 2 2
đ	Applied to 2009 distributable amount				33,397
e	Remaining amount distributed out of corpus	L			T
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same			-	y - jk - 5
	amount must be shown in column (a))	1	1	٠, 'ټ٠	3.4
6	Enter the net total of each column as				
	indicated below:	1		- '	, ` .
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5		_[
b	Pnor years' undistributed income. Subtract	,			
	line 4b from line 2b			* . * .	1.00
С	Enter the amount of prior years' undistributed	, ,		- 1	
	income for which a notice of deficiency has		-	- '	•
	been issued, or on which the section 4942(a)	-	1	, , ,	• 1
	tax has been previously assessed	-	1		
ч	Subtract line 6c from line 6b Taxable		 	. ,	
•	amount—see page 27 of the instructions			· ' ' ' ' '	
е	Undistributed income for 2008 Subtract line		 		
٠	4a from line 2a Taxable amount—see page				1 1
	27 of the instructions			ł	
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2010	[9,000
7	Amounts treated as distributions out of corpus		 	·	3,000
•	to satisfy requirements imposed by section	}	1		` ; ;
	• •		}		, "
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
_	instructions)				
8	Excess distributions carryover from 2004 not		1		
	applied on line 5 or line 7 (see page 27 of the			<i>></i>	
_	instructions)	<u> </u>	 		
9	Excess distributions carryover to 2010.			,-	
_	Subtract lines 7 and 8 from line 6a		 		
0	Analysis of line 9		1		,
	Excess from 2005	-	1		•
b	Excess from 2006]		-
С	Excess from 2007			÷ ,	
d	Excess from 2008			,	
e	Excess from 2009	L <u></u>			000 PF

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Total			▶ 3b	orm 990-PF (200
			<u> </u>	
	}			
N/A				
Total b Approved for future payment		- 	▶ 3a	45,00
				45.00
	ļ.			
			}	
			1	
	!			
				45,0
a Paid during the year Various Charities				
Name and address (home or business)	or substantial contributor	recipient		
Recipient	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
3 Grants and Contributions Paid During the	If recipient is an individual,	i	Ţ	
3 Grants and Contributions Paid During the	Teal of Apployed for a			

. Part XVI-				T = 7.7.7.	5-21-	
Enter gross an	nounts unless otherwise indicated	(a) Business code	d business income (b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See page 28 of
1 Program s	ervice revenue		 			the instructions)
	·	_				
		_				 -
						
		_				
-	and contracts from government agencies					
	up dues and assessments			- 1 1 1		
	savings and temporary cash investments			14	6,244	
	and interest from securities			14	7,889	
	ncome or (loss) from real estate					
	nanced property					
	bt-financed property	 				
	ncome or (loss) from personal property					
	stment income				· 	
	ss) from sales of assets other than inventory					1,984
	e or (loss) from special events					
•	it or (loss) from sales of inventory			- 		
	nue a	_				
		- -		- -		
		- 				
		- 				
e		-			14 122	1 004
	dd columns (b), (d), and (e)	L		0	14,133	1,984
	line 12, columns (b), (d), and (e)				13	16,117
	t in line 13 instructions on page 28 to verify calculation		-4 of Francis D			
Part XVI-E						
Line No. ▼	Explain below how each activity for which incom- accomplishment of the foundation's exempt purp instructions)					e
N/A	ilistroctions)				······································	
					 	
				 		
	<u></u>		<u></u>			
						
	<u> </u>					
						
·						· · · · · · · · · · · · · · · · · · ·
	 					
			 			
					··-	
	<u> </u>					
AA					ı	orm 990-PF (2009)

DAA

I	Part XVI	I Information R Exempt Organ	•	ansfers To and T	ransactions ar	nd RelationsI	hips With No	onchari	table		
4	Did the	organization directly or		e in any of the following	ng with any other or	ganization descri	ibed			Yes	No
		on 501(c) of the Code (· •	•	-					
		ations?			•					· · ·	
	a Transfe	ers from the reporting for	undation to a no	nchantable exempt or	ganization of				-	\$1	
	(1) Ca			-	9				1a(1)		x
	• •	ner assets							1a(2)		X
		ransactions							-		
		les of assets to a nonch	antable exempt	organization					16(1)	-	x
		rchases of assets from a		-					1b(2)		X
		ntal of facilities, equipme		, •					1b(3)		X
	٠.	imbursement arrangeme		Cio					1b(4)		X
	• •	ans or loan guarantees	,,,,,						1b(5)		x
		formance of services or	r membershin ar	fundraising solicitation	ne				1b(6)		X
	• •		•	-					1c		X
 c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market 											
		· ·	•	•		-					
		f the goods, other asset	=								
		any transaction or shar									
_	(a) Line no	(b) Amount involve	(C) Name	of nonchantable exempt	organization	(a) Description o	f transfers, transac	zuons, and	snanng arrange	ments	
N /	/A					· 					
_											
				··							
_											
											_
									- .		
_							 				
_											
_											
2	n la tha fa	undation disastly or indu	costly offiliated w	with as soluted to ano	or more tay eyempt	organizations					
2		undation directly or indi	-		•	Organizations			Ye	. T	ما ا
		ed in section 501(c) of th		nan section 50 r(c)(3))	or in section 5277				Te	s <u>an</u>	NO
	o if Yes,	complete the following: (a) Name of organization		(b) Tong of some			(s) December 6	of rolet-sea			
_	37 / 3	(a) Name of organization		(b) Type of orga	nization		(c) Description of	i relationsi	iib		
	N/A			<u> </u>							
											
_											
_		 		l							
	Under pe	naities of perjury, I declare t	hat I have examine	ed this return, including a	ccompanying schedule	s and statements, a	and to the best of r	ny knowled	ige and		
	beller, it k	True, correct, and complete	A .	eparer (otner than taxpay	. / 1	on all information	or which preparer	nas any Kr	lowledge		
	I XY	mola V. 11	angen		X7/19/10		_Truste	<u>e</u>			
ט	Sign	ature of officer or trustee	<u> </u>		Date		Title				
פ		1	1	_		Date	Charle of	1	Preparer's identify number (see Sign		1
ا	.σ _{>}	Preparer's	"	1		_//	Check if self-employed	x	page 30 of the inst		
20	Paid Preparer's Use Only	signature Minn	V S. Su	Danca.	CPH	7/16/10			P00568	923	
٠	Pai epa	Firm's name (or yours if	Gohn J	. LaBanca,	CPA						
İ	ž ň	self-employed), address,	A a = = =	ligan Dr					06-1360		
		and ZIP code		ngford, CT	06492			Phone no	203-284	1-0	507
_											

	•		Net Ion Gain / Loss	\$ 1,984	0 \$ 1,984		Charitable Purpose	\$ \$		Charitable Purpose
	f Assets		Expense Depreciation	<i>\$</i>	\$ 0	nting Fees	Adjusted Net	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u>axes</u>	Adjusted Net
Federal Statements	Form 990-PF, Part I, Line 6a - Sale of Assets	סי	Cost	e \$ 148,016 \$	\$ 148,016 \$	Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees	Net Investment	w w	t 3 - Form 990-PF, Part I, Line 18 - Taxes	Net Investment
Federal S	• 1	How Received	Sale Price	Purchase \$ 150,000 \$	150,000	nt 2 - Form 990-PF, P	Total	\$ 1,056 \$ 1,056	Statement 3 - Form 990	Fotal 133
	Statement 1		Date Sold			Stateme			SI	
		Description	Date Acquired				tion	ıg Fees		tion
06-1519384			Whom Sold	US Trust	Total		Description	Indirect Accounting Total		Description Taxes Total

06-1519384

Federal Statements

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	n						
		Beginning of Year		End of Year	Basis of Valuation		Fair Market Value
US Trust	\$	399,880	\$	743,893	Cost	\$_	763,140
Total	\$ [~]	399,880	\$	743,893		\$	763,140

06-1	151	93	84
00-			σ

Federal Statements

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	Amount	
Arnold Mangen	\$	
Total	\$	0