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F4	epartm	ent of the Tr	-PF	A1=4:	The 4-1-1	or Se	ction T	4947(a)(1) Nonex reated as a Priva	empt Charitate Foundation	able Trust	artina raciona	2009
-		Revenue Sei alendar	year 2009,				oe able		/01 , 2009		orting requirements	06/30,20
_			nat apply		Initial reti	urn		Initial return	•	ublic charity	-	Final return
_			Name of for	ındatı	Amended	return		Addre	ss change		Name change A Employer identif	fication number
	Use	he IRS	I Tame of to	an out	OII						A Employer ruena	
		bel	THE POW	ERS	FAMILY	FOUND	ATIO	N			13-	-3637704
		rwise, rint			•			not delivered to street	address)	Room/suit	B Telephone number (see	page 10 of the instructions)
		type			N SACHS			BOX 73		Ì	15.	18) 640-5000
		pecific			e, and ZIP c		1.0.	BON 13			C if exemption applica	ition is
•		Ctions									pending, check here D 1 Foreign organiza	_
_			NEW YOR					·			2 Foreign organiza 85% test check t	
H	\neg		of organiza					exempt private fo			computation .	
1			947(a)(1) noi value of all			···		Other taxable pro		on crual	E if private foundation under section 507(b	_
•			n Part II, co			1	•	specify)		, au	,	n a 60-month termination
		▶ \$	10,2					nn (d) must be oi	cash basis)	ı)(1)(B) check here
Ŀ	art	Analy	sis of Reve	enue	and Exper	ises (The	(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursemen for charitable
		may no	ot necessani (a) (see pa	y equa	al the amour	its in		expenses per books	incon		income I/A	purposes
	1		ons, gifts grants,				 	NONE			NIA	(cash basis only
	2	Check >	If the	founda	ation is not re	guired to						
	3		n savings and	tempo	orary cash invi	estments	ļ	72.		72.	0	ATCH 1
	4		ds and intere					183,493.	1.8	3,493.	0	ATCH 2
			ents I income or (lo				ļ					<u> </u>
e			or (loss) from s					-147,878.				
Kevenue	b	Gross sa assets or	les price for all i line 6a		59	7,598.						
2	7		gain net inco	•		line 2) .				0.		
	8 9		t-term capita modifications	•	· • • • •	· · · · ·	<u> </u>					<u> </u>
		Gross sal	es less returns ances	· 1								
ı		Less Cos	st of goods sol	a.L								
	С	Gross p	ofit or (loss)	(attac	ch schedule)							
- 1	11	Other in	come (attach	-sche	dule)	/F		59. 35,746.	1.8	59. 3,624.	0.	ATCH 3
	<u>12</u> 13	Compens	ation of officer	s-due	ctors trustees	eic		0.		3,024.		
- 1	14	Other en	nployee sala	ries a	nd wages		18					
Ses	15		plans, emplo			2011.	191	 				
			es (attach sc	-		index 'adam'	I SS		· · · · · · · · · · · · · · · · · · ·			
Administrative Expenses	o c	Other or	ng fees (atta ofessional fe	CR-SC	hedule)» - (LIT						<u> </u>
2	17											
100	18		ach schedule)									
	19		tion (attach			-						
2	20 21		onferences,									
			and publicati									
	23		penses (atta					12,911.	1	2,641.	0	
Operating	24		erating and			•		12 011	,	2 (41	0	
3	25		i 13 through ions, gifts, g					12,911.	1	2,641.	0	469,
- 1			ions, girls, g		•			481,911.	1	2,641.	0.	469,
7	27		line 26 from									
			evenue over ex					-446,165.			- 	
			stment incor	-	_				17	0,983.	-00	
: or			net income				ee par	je 30 of the instruc	tions.			Form 990-PF (2
0 2								M V 09-9.			0914F1	P.F.

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250.

250. 469,000.

469,250.

13-3637704

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	d of year	
amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1 Cash - non-interest-bearing				
2 Savings and temporary cash investments	508.	113,299.	113,299	
3 Accounts receivable				
Less allowance for doubtful accounts				
4 Pledges receivable ▶				
Less allowance for doubtful accounts				
5 Grants receivable				
6 Receivables due from officers, directors, trustees, and other				
disqualified persons (attach schedule) (see page 16 of the instructions)				
7 Other notes and loans receivable (attach schedule)				
Less allowance for doubtful accounts				
9 Inventories for sale or use			-	
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 a Investments - U S and state government obligations (attach schedule)				
7 repaid expenses and deletted charges			· · · · · · · · · · · · · · · · · · ·	
	9,259,052.	8,728,581.	8,464,684	
b Investments - corporate stock (attach schedule) ATCH 5.	9,239,032.	0,720,301.	0,404,664	
c Investments - corporate bonds (attach schedule)				
and equipment basis		ľ		
(attach schedule)				
12 Investments - mortgage loans				
13 Investments other (attach schedule) ATCH 6	1,545,463.	1,516,978.	1,673,573	
equipment basis				
equipment basis Less accumulated depreciation (attach schedule)				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers - see the				
instructions Also, see page 1, item l)	10,805,023.	10,358,858.	10,251,556	
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 (attach schedule) 22 Other lightly deposite				
21 Mortgages and other notes payable (attach schedule)				
22 Other liabilities (describe)				
The state and the state of the				
23 Total liabilities (add lines 17 through 22)				
Foundations that follow SFAS 117, check here				
and complete lines 24 through 26 and lines 30 and 31.				
24 Unrestricted				
25 Temporarily restricted				
Foundations that do not follow SFAS 117,				
check here and complete lines 27 through 31. ▶ X				
27 Capital stock, trust principal, or current funds	10,805,023.	10,358,858.		
Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. X Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions)				
29 Retained earnings, accumulated income, endowment, or other funds	0.	0.		
30 Total net assets or fund balances (see page 17 of the				
instructions)	10,805,023.	10,358,858.		
31 Total liabilities and net assets/fund balances (see page 17				
of the instructions)	10,805,023.	10,358,858.		
art III Analysis of Changes in Net Assets or Fund E	Balances			
Total net assets or fund balances at beginning of year - Part II, col		ee with		
end-of-year figure reported on prior year's return)			10,805,023	
Enter amount from Part I, line 27a			-446,165	
Other increases not included in line 2 (itemize)			(
Add lines 1, 2, and 3			10,358,858	
		••••		
Total net assets or fund balances at end of year (line 4 minus line 5	5) - Part II, column (b), line		10,358,858	
The state of the s	-,,		Form 990-PF (2009)	

İ	Part IV Capital Gair	s and Losses for Tax on I	nvestment Income			1 ago o
	(a) List ar 2-story t	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1	a SEE PART IV SCHE			D DOMAININ		
_	b					
_	C			<u> </u>		
_	<u>d</u>			<u> </u>		 _
_	e			ļ <u>.</u>		l
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
_	<u>a</u>			ļ		
_	<u>b</u>	-				
_	<u>C</u>	 		 -		
	<u>d</u>			 		· · · · · · · · · · · · · · · · · · ·
_	Camplete only for secrets abo	numa ann is column (h) and ausa	d by the ferrodetion on 12/21/60			
-	Complete only for assets sho	owing gain in column (h) and owne	<u> </u>		Gains (Col. (h) g (k), but not less t	
_	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	ω,	Losses (from co	
	<u>a</u>			-		
_	<u>b</u>				<u>-</u>	
_	<u>c</u>					
	<u>d</u>			<u> </u>		
	<u>e</u>		If gain, also opter in Part I, line 7	 		
	Capital gain net income or	(net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2		147,878.
3		or (loss) as defined in sections 12:				
		line 8, column (c) (see pages 13 a	•			
_	If (loss), enter -0- in Part I, Part V Qualification Ur	line 8		3		
	for optional use by domestic section 4940(d)(2) applies, h		section 4940(a) tax on net investmen	t income)		
		he section 4942 tax on the distributed to the qualify under section 4940(e).	table amount of any year in the base	period?	<u>x</u>] Yes [No
1			see page 18 of the instructions before	making a	inv entries	
<u>-</u>	(a)			I making a	(d)	
_	Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
_	2008		-	-		
_	2007					
_	2006					····
	2005	D. 1 11AC (10015 500)	SUPPLY THE LIFE	1640	1.13.017.20	-
	2004 💥	TON WAS CLABLE FOR	\$ 4924 TAX THIS YEAR	THE	6 30 200)5/
2	Total of line 1, column (d)			2		NIA
3	3 7	or the 5-year base period - divide t	the total on line 2 by 5 or by the	-		10/14
•	-	ation has been in existence if less	• •	3		
4	Enter the net value of nonc	chantable-use assets for 2009 from	Part X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investment	t income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
В	Enter qualifying distribution	ns from Part XII, line 4	in Part VI, line 1b, and complete t	8 hat part i	using a 1% tax	rate See the
	Part VI instructions on pag	e 18				

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see pag	e 18 of	the in	struct	ions)	
`1a	Exempt operating foundations described in section 4940(d)(2), check here And enter "N/A" on line 1					
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			3,	120.
	here ▶ and enter 1% of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				
3	Add lines 1 and 2	3			3,	120.
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			3,	120.
6	Credits/Payments					
а		ļ				
b	, , , , , , , , , , , , , , , , , , , ,					
C	Tax paid with application for extension of time to file (Form 8868) 6c 3, 300.	:				
d						
7	Total credits and payments Add lines 6a through 6d	7			5,	793.
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			2 -	373.
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8 enter the Enter the amount of line 10 to be Credited to 2010 estimated tax amount overpaid	10		-	۷,.	73.
	t VII-A Statements Regarding Activities	11 ;				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did in	,		Γ	Yes	No
	participate or intervene in any political campaign?			1a	163	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19					
-	of the instructions for definition)?			1b		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material		• •			
	published or distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		• • •			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$ 0					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impor-	sed				
	on foundation managers > \$0.					1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
	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					
	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
	If "Yes," has it filed a tax return on Form 990-T for this year?			4b		ŊΛ
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions to the control of t	hat				
	month of the state level and the state level a			6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and			7	X	
	Enter the states to which the foundation reports or with which it is registered (see page 19 of		•			
	instructions) ► NY,					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	Gener	al			
	(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 494.	2(j)(3) d	or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV		е			
	27)? If "Yes," complete Part XIV			9		X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list					١.,
	names and addresses	<u></u>	<u></u>	10		X

4b

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

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Part VII-B Statements Regarding Activitie	es for Which Form 4	720 May Be Regui	red (continuea)		
5 a During the year did the foundation pay or incur any a(1) Carry on propaganda, or otherwise attempt to inf		4945(e))?	. Yes X No	,	
(2) Influence the outcome of any specific public elec	,	to carry on,			
directly or indirectly, any voter registration drive?					
(3) Provide a grant to an individual for travel, study,			. Yes X No	'	l
(4) Provide a grant to an organization other than a ci			□ ☑		
section 509(a)(1), (2), or (3), or section 4940(d)(2	· · · · •		Yes X No	'	
(5) Provide for any purpose other than religious cha	•		ㅁ ☞		
purposes, or for the prevention of cruelty to child				'	
b If any answer is "Yes" to 5a(1)-(5), did any of the		•		1	الم
Regulations section 53 4945 or in a current notice in				5b	101
Organizations relying on a current notice regarding di			▶ [X]		
c If the answer is "Yes" to question 5a(4), does the four	•	A 1 f .	^ — . —		
because it maintained expenditure responsibility for the	•		Yes No		
If "Yes," attach the statement required by Regulations	` ,				
a Did the foundation, during the year, receive any funds	• • •	• •	Yes X No		
on a personal benefit contract?			. Yes X No		
b Did the foundation, during the year, pay premiums, di	rectly or indirectly, on a per	rsonal benefit contract?		· · 6b	X
If "Yes" to 6b, file Form 8870			n. v.		
a At any time during the tax year, was the foundation a	• •	•	. Yes X No		
b If yes, did the foundation receive any proceeds or have art VIII Information About Officers, Direct			Highly Paid Empl	7b	$\perp \sim$
and Contractors		•		•	
List all officers, directors, trustees, foundation				ons).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
TTACHMENT 7		0.	0.		1
			İ		
					·
Compensation of five highest-paid employees if none, enter "NONE."	other than those inclu	ded on line 1 - see p	age 23 of the instruct	tions).	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense a other allows	
NONE					
· · · · · · · · · · · · · · · · · · ·					
			l l		
Il number of other employees paid over \$50,000					

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Part VIII Information About Officers, Directors, Trustees, Foundation Nand Contractors (continued)	lanagers, Highly Paid Emplo	yees,	
3 Five highest-paid independent contractors for professional services (see page 2	23 of the instructions). If none,	enter "NON	1E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compe	nsation
NONE			
	NONE		
Total number of others receiving over \$50,000 for professional services		▶	NONE
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical inform of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number	Expens	ses
1 PLEASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY DIR	ECT		
CHARITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SUPP	ORT,		
BY CONTRIBUTIONS, OTHER CHARITABLE ORGANIZATIONS EXEMP	T		(
2 UNDER INTERNAL REVENUE CODE SECTION 501(C)(3).			
3			
4			
Part IX-B Summary of Program-Related Investments (see page 23 of the ins	tructions)	 	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 an	d 2	Amour	nt
1 N/A			
			(
2 N/A			
			0
All other program-related investments. See page 24 of the instructions			
3 N/A			

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0.

Form 990-PF (2009) 13-3637704 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see page 24 of the instructions) 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 8,884,466. 1a Average of monthly cash balances 42,727. 1b Fair market value of all other assets (see page 24 of the instructions) 1,681,508. 1c Total (add lines 1a, b, and c) 10,608,701. 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 10,608,701. Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 159,131. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 10,449,570. Minimum investment return. Enter 5% of line 5 6 522,479. Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating Part XI foundations and certain foreign organizations check here > and do not complete this part) Minimum investment return from Part X, line 6 522,479. Tax on investment income for 2009 from Part VI, line 5 Income tax for 2009 (This does not include the tax from Part VI) 2b Add lines 2a and 2b 3,420. 2¢ Distributable amount before adjustments Subtract line 2c from line 1 519,059. 3 Recoveries of amounts treated as qualifying distributions 4 519,059 5 Deduction from distributable amount (see page 25 of the instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII. 519,059. Part XII Qualifying Distributions(see page 25 of the instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	469,250.
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	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	469,250.
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 page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	469,250.
	Note: The empiret as long Civillan used in Dort V as long (b) as a character when as long later a character when	Al 4- · · ·	

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Р	art XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,		Years prior to 2008	2008	2009
	line 7				519,059.
2	Undistributed income, if any, as of the end of 2009				
a	Enter amount for 2008 only			469,114.	
t	Total for pnor years 20, 20, 20		0.		
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005				
С	From 2006				
d					
е	From 2008				
f	Total of lines 3a through e	0.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 469,250.				
а	Applied to 2008, but not more than line 2a			469,114.	
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)		0.		· · · · · · · · · · · · · · · · · · ·
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)	0.			
d	Applied to 2009 distributable amount				136.
е	Remaining amount distributed out of corpus	0.			
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))				
6	Enter the net total of each column as	İ			
	indicated below	_			
а	Corpus Add lines 3f 4c, and 4e Subtract line 5	0.			
b	Prior years' undistributed income Subtract				
_	line 4b from line 2b		0.		
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		0		
e	amount - see page 27 of the instructions Undistributed income for 2008 Subtract line		0.		
Ī	4a from line 2a Taxable amount - see page			0.	
	27 of the instructions			0.1	
f	Undistributed income for 2009 Subtract lines			1	
	4d and 5 from line 1 This amount must be distributed in 2010	Ì			518,923.
7	Amounts treated as distributions out of corpus				310, 723.
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	0.			
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the instructions)	0.		•	
9	Excess distributions carryover to 2010.				
•	Subtract lines 7 and 8 from line 6a	0.		İ	
10	Analysis of line 9		· ·· ·· · · · · · · · · · · · · · · ·		
	Excess from 2005		1		
	Excess from 2006 0 .				
	Excess from 2007 0 .	1		İ	
	Excess from 2008 0 .				
	Excess from 2009 0 .				

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For	rm 990-PF (2009)			1 2 - 36	537704			Page 10
_		ating Foundations	(see page 27 of the	instructions and Par		uestion 9)	NOT	APPLICABLE
$\overline{}$	If the foundation has					<u> </u>		
	foundation, and the ruling	-			•			
b			•	on described in section	• -	4942(j)	(3) or	4942(j)(5)
2.		Tax year	T	Prior 3 years				
2 a	Enter the tesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d)	2006	1	(e) Total
	For the minimum investment return from Part X for each year listed							
b	85% of line 2a							
С	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							
е	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							
а	"Assets" alternative test - enter							
	(1) Value of all assets (2) Value of assets qualifying under section							
b	4942(j)(3)(B)(i) Endowment" alternative test	· · · · · · · · · · · · · · · · · · ·						·
	enter 2/3 of minimum invest ment return shown in Part X							
_	line 6 for each year tisted							
С	"Support" alternative test - enter (1) Total support other than							
	gross investment income (interest dividends rents payments on securities							
	loans (section 512(a)(5)), or royalties)							
	(2) Support from general public and 5 or more							
	exempt organizations as provided in section 4942							
	(3) Largest amount of support from an exempt				-			
	organization (4) Gross investment income							·
Pa	rt XV Supplementa at any time di	ry Information (Curing the vear - see	omplete this part e page 28 of the in	only if the founda	tion had	\$5,000	or mo	re in assets
<u> </u>	Information Regarding			· · · · · · · · · · · · · · · · · · ·				
а	List any managers of the before the close of any	he foundation who h	ave contributed more	e than 2% of the total nore than \$5,000) (Se	contributi ee section	ons receive 507(d)(2))	ed by th	ne foundation
	JOHN J POWER	RS						
b	List any managers of the ownership of a partnership					an equally	large p	portion of the
	N/A							
	Information Regarding	Contribution, Grant, (Gift, Loan, Scholarshi	p, etc., Programs:				
	Check here ► X if the unsolicited requests for	r funds If the found	lation makes gifts, g	rants, etc (see page	able orga 28 of th	nizations ar e instructior	nd does	s not accept individuals or
	The name, address, and				ddressed			
þ	The form in which applica	ations should be subn	nitted and information a	and materials they shou	ıld ınclude			

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

JSA 9E1490 1 000

c Any submission deadlines

Form **990-PF** (2009)

3 Grants and Contributions Paid Di	uring the Year or App			
Recipient	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTIDUION	
a Paid during the year				
ATTACHMENT 8				
				1
	İ			
Total	. <u> </u>	L	▶ 3a	469,000
b Approved for future payment			<u> </u>	
JONE	1			
				15
•				
Total	<u></u>	·	▶ 3b	NONE
				Form 990-PF (2009

ter gross amounts unless otherwise in	ndicated	Unrela	ted business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
_	Rusi	(a) siness code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
Program service revenue	·	-		- CAGGOO GOOD	7.11.04.11	the instructions)
a	1					
b		-				
d	3					
e	1					
f						
g Fees and contracts from government	l agencies					
Membership dues and assessments						
Interest on savings and temporary cash in				14	72.	
Dividends and interest from securitie	s			14	183,493.	
Net rental income or (loss) from real	estate			 		
						
b Not debt-financed property						
Net rental income or (loss) from personal p						
Other investment income	1			18	-147,878.	
Gain or (loss) from sales of assets other th Net income or (loss) from special eve		+		+	147,070.	· · · · · · · · · · · · · · · · · · ·
Gross profit or (loss) from sales of inv						
Other revenue a						
988 GAIN				01	-21.	
PORTFOLIO INCOME				01	80.	
f						
Subtotal Add columns (b), (d), and (columns (b), (d), (d), and (columns (b), (d), (d), (d), (d), (d), (d), (d), (d	and (e) page 28 to verify	y calculati	ons)			35,74
Subtotal Add columns (b), (d), and (c) Fotal Add line 12 columns (b), (d), a e worksheet in line 13 instructions on Tt XVI-B Relationship of A e No. Explain below how conthered the accomplishment	page 28 to verify Activities to t each activity for of the founds	y calculate the Acc	ons) complishment of E	xempt Purp	13	
Subtotal Add columns (b), (d), and (c) Total Add line 12 columns (b), (d), a worksheet in line 13 instructions on T XVI-B Relationship of A Explain below how e the accomplishment	page 28 to verify Activities to t each activity for of the founds	y calculate the Acc	ons) complishment of E	xempt Purp	oses (e) of Part XVI-A contr	ibuted importantly
Subtotal Add columns (b), (d), and (cotal Add line 12 columns (b), (d), a worksheet in line 13 instructions on t XVI-B Relationship of A e No. Explain below how the accomplishment	page 28 to verify Activities to t each activity for of the founds	y calculate the Acc	ons) complishment of E	xempt Purp	oses (e) of Part XVI-A contr	ibuted importantly
Subtotal Add columns (b), (d), and (cotal Add line 12 columns (b), (d), a worksheet in line 13 instructions on t XVI-B Relationship of A e No. Explain below how the accomplishment	page 28 to verify Activities to t each activity for of the founds	y calculate the Acc	ons) complishment of E	xempt Purp	oses (e) of Part XVI-A contr	ibuted importantly
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subtotal Add columns (b), (d), and (cotal Add line 12 columns (b), (d), a worksheet in line 13 instructions on t XVI-B Relationship of A Explain below how the accomplishment	page 28 to verify Activities to t each activity for of the founds	y calculate the Acc	ons) complishment of E n income is reporter exempt purposes (c	xempt Purp	oses (e) of Part XVI-A contr	ibuted importantl
subtotal Add columns (b), (d), and (cotal Add line 12 columns (b), (d), a worksheet in line 13 instructions on t XVI-B Relationship of A Explain below how the accomplishment	page 28 to verify Activities to t each activity for of the founds	y calculate the Acc	ons) complishment of E n income is reporter exempt purposes (c	xempt Purp	oses (e) of Part XVI-A contr	ibuted importantl
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Subtotal Add columns (b), (d), and (cotal Add line 12 columns (b), (d), a worksheet in line 13 instructions on t XVI-B Relationship of A e No. Explain below how the accomplishment	page 28 to verify Activities to t each activity for of the founds	y calculate the Acc	ons) complishment of E n income is reporter exempt purposes (c	xempt Purp	oses (e) of Part XVI-A contr	ibuted importantl
subtotal Add columns (b), (d), and (cotal Add line 12 columns (b), (d), a worksheet in line 13 instructions on t XVI-B Relationship of A Explain below how the accomplishment	page 28 to verify Activities to t each activity for of the founds	y calculate the Acc	ons) complishment of E n income is reporter exempt purposes (c	xempt Purp	oses (e) of Part XVI-A contr	ibuted importantl
Subtotal Add columns (b), (d), and (cotal Add line 12 columns (b), (d), a worksheet in line 13 instructions on t XVI-B Relationship of A e No. Explain below how the accomplishment	page 28 to verify Activities to t each activity for of the founds	y calculate the Acc	ons) complishment of E n income is reporter exempt purposes (c	xempt Purp	oses (e) of Part XVI-A contr	ibuted importantl

Fo	rm 990-P	F (2009)						13-3637	704		P	age 13
P	art XV	11	Information Exempt Org		Transfers To	and Tran	sactions	and Rela	ationships With	Nonc	hari	tabl
1	ın s	ection	501(c) of the	Code (other tha		3) organizati	ons) or in		organization described, relating to political		Yes	No
										12(4)		X
												X
	b Othe					• • • • • •				· Ia(2)	 	 ^`
				naritable exempt o	organization					1b(1)		Х
	(2) [Purchas	es of assets from	a nonchantable e	xempt organization					1b(2)	 	Х
					ets					1b(3)		Х
										1b(4)		Х
										1b(5)		Х
					fundraising solicitati					1b(6)		Х
					ner assets, or paid e					1c		Х
									should always sho	w the	fair i	marke
									ndation received les			
	value	e in ar	ny transaction o	or sharing arrar	ngement, show in	column (d)	the value	of the goo	ods, other assets, o	r service	es red	ceived
(a)	Line no	+	Amount involved	(c) Name of	nonchantable exempt	organization	(d) Des	scription of trans	sfers, transactions, and sha	эппд апаг	ngemen	its
		N/	<u>'A</u>				N/A					
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		<u> </u>	·	 -								
2a									nizations described in			 ¬
					501(c)(3)) or in sect	tion 527?				Y6	es 🔝	∐ No
b	it Yes		lete the following lame of organization		(h) Tona			 	(-) Dt(l-t			
		(4)	taine of organization		(в) туре	of organization			(c) Description of relation	Isnip		
	-											
	Under	penalties	of perjury, I deck	are that I have ex	amined this return, in	ncluding accom	panying sche	dules and state	ements, and to the best	of my ki	nowledg	ge and
)	c0 -		F 20001011011	o. properor (onier me	wapayer of I		_		nas di	·y 1/21/04	-ieuye
_ [<u>Uir \</u>	y/our	1	 		4-14-	<u>//</u>	TRUSTEE			
Jare	₹ Sig	gnature (Vofficer or trustee				Date		Title			
<u>-</u> ∣	Paid Preparer's Use Only	Prepar signatu				Date		Check if self-emplo	yed Preparer: number (spage 30 of P00963	See Signa the instru	iture or	า
"	Paid Preparer's Use Only			RCRS 7	ASSOCIATES,	LLC			1 2 12 12 1			
	P. U		name (or yours if iployed), address,	—	ALL STREET -				EIN ► 13-40/8	114/		

Form 990-PF (2009)

Phone no 212-440-0800

and ZIP code

NEW YORK, NY

10005

THE POWERS FAMILY FOUNDATION FORM 990-PF - PART IV

Kind of P	CAPITAL GAINS AND LOSSES FOR TAX ON INVEST Kind of Property Description		0 D	Date acquired	Date sold			
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
169,696.		i	ENT I ATTACI (PE: SECURI)			P	VAR -115,926.	VAR
8,160.		SEE STATEME PROPERTY TY 8,953.				P	VAR -793.	VAR
05,923.		SEE STATEME PROPERTY TY 100,674.				Р	VAR 5,249.	VAR
		THRU K-1 - PROPERTY TY 50,227.		LUS MGRS: POF	RT 2 [S	Р	VAR -50,227.	VAR
13,819.				LUS MGRS: POF	RT 2 [S	Р		VAR
TAL GAIN (LO	SS)						-147,878.	
			1					

SUPPLEMENTARY STATEMENTS

PART: XV

LINE: 2

SUPPLEMENTAL INFORMATION

THE ORGANIZATION'S PRIMARY ACTIVITY IS TO SUPPORT, BY CONTRIBUTIONS, OTHER ORGANIZATIONS QUALIFYING FOR EXEMPTION UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE THE TRUSTEES CHOOSE THESE ORGANIZATIONS BASED UPON THEIR KNOWLEDGE OF THE ORGANIZATIONS' ACTIVITIES NO CONTRIBUTIONS, GRANTS, GIFTS, LOANS OR SCHOLARSHIPS ARE MADE TO INDIVIDUALS THE ORGANIZATION DOES NOT PRESENTLY RECEIVE APPLICATIONS OR CONDUCT PROGRAMS FOR DONATIONS IN ITS ACTIVITIES

- INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PF,

ADJUSTED NET INCOME	.00	0
NET INVESTMENT INCOME	26. 46.	72.
REVENUE AND EXPENSES PER BOOKS	26.	72.
		TOTAL
DESCRIPTION	GOLDMAN SACHS #00251 GOLDMAN SACHS #03764	

.

138,133. 24,835. 18,674. 1,851.

138,133. 24,835. 18,674. 1,851.

GOLDMAN SACHS #00251-DIVIDENDS GOLDMAN SACHS #03764-DIVIDENDS GMS ALPHA II PORTFOLIO-DIVIDENDS INTEREST ON BONDS

DESCRIPTION

183,493.

183,493.

TOTAL

ADJUSTED

NET

INVESTMENT INCOME

EXPENSES PER BOOKS

REVENUE AND

- DIVIDENDS AND INTEREST FROM SECURITIES

PART

FORM 990PF,

NET

INCOME

PAGE 17

~

FORM 990PF, PART I - OTHER INCOME

ADJUSTED NET INCOME 0.	0
NET INVESTMENT INCOME -21.	.59.
REVENUE AND EXPENSES PER BOOKS -21.	59.
	TOTALS
DESCRIPTION 988 GAIN OTHER PORTFOLIO INCOME	

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CHARITABLE PURPOSES 0. 250.	250.
ADJUSTED NET INCOME 0. 0.	0.
NET INVESTMENT INCOME 98. 0. 12,543.	12,641.
REVENUE AND EXPENSES PER BOOKS 98. 250. 12,543.	12,911.
-	TOTALS
DESCRIPTION FOREIGN TAX PAID NYS FILING FEES PORTFOLIO DEDUCTIONS NON-DEDUCT EXPENSES	

20040914F1

PAGE 20

3:19:03 PM V 09-9.3 54528Z 526W 4/12/2011

l	Ŋ	I
	ATTACHMENT	

- CORPORATE STOCK

PART II

FORM 990PF,

THE POWERS FAMILY FOUNDATION

13-3637704

ENDING <u>FMV</u>	6,114,503. 2,350,181.	8,464,684.
ENDING BOOK VALUE	6,196,582. 2,531,999.	8,728,581.
BEGINNING BOOK VALUE	6,159,123. 3,099,929.	9,259,052.
		TOTALS
DESCRIPTION	GOLDMAN SACHS #00251 GOLDMAN SACHS #03764	

THE POWERS FAMILY FOUNDATION

INVESTMENTS
OTHER
_
II
11
PART
990PF, PART

AITACHMENT 6	ENDING <u>FMV</u>	1,673,573.	1,673,573.
ATTACH	ENDING BOOK VALUE	1,516,978.	1,516,978.
	BEGINNING BOOK VALUE	1,545,463.	1,545,463.
	DESCRIPTION	GMS ALPHA II PORTFOLIO - HEDGE	TOTALS

EXPENSE ACCT

CONTRIBUTIONS

ALLOWANCES AND OTHER

BENEFIT PLANS TO EMPLOYEE

COMPENSATION

TITLE AND AVERAGE HOURS PER

WEEK DEVOTED TO POSITION

NAME AND ADDRESS

0

0

0

TRUSTEE - AS NEEDED

BOWLING GREEN STATION, P.O. BOX 73

NEW YORK, NY 10274-0073

C/O GOLDMAN SACHS FAMILY OFFICE

LINDA E. POWERS

0

0

0

TRUSTEE - AS NEEDED

BOWLING GREEN STATION, P.O. BOX 73

NEW YORK, NY 10274-0073

C/O GOLDMAN SACHS FAMILY OFFICE

JOHN J. POWERS

0

. 0

0

TRUSTEE - AS NEEDED

BOWLING GREEN STATION, P.O. BOX 73 NEW YORK, NY 10274-0073

C/O GOLDMAN SACHS FAMILY OFFICE

CHARLES A. DAVIS

GRAND TOTALS

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT

THE POWERS FAMILY FOUNDATION

13-3637704

V 09-9 3

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S4528Z 526W 4/12/2011

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 8

469,000

AMOUNT

SEE ATTACHED LIST

RECIPIENT NAME AND ADDRESS

501 (C) (3)

NONE

GENERAL CHARITABLE PURPOSES

469,000

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 8 PAGE 23

SCHEDULE D (Form 1041)

Capital Gains and Losses

Attach to Form 1041, Form 5227, or Form 990-T. See the instruc

OMB No 1545-0092

2009

Department of the Treasury Internal Revenue Service ► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

Name of estate or trust Employer identification number THE POWERS FAMILY FOUNDATION 13-3637704 Note: Form 5227 filers need to complete onlyParts I and II Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (see page 4 of the instructions) (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold the entire year (d) Sales price (mo , day, yr) (mo, day, yr) Subtract (e) from (d) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 13,026. 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back 13,026. Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the instructions) the entire year Subtract (e) from (d) (mo , day, yr) (mo , day, yr 6a **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6b -160,904.Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11

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

column (3) on the back

Schedule D (Form 1041) 2009

Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a,

-160,904.

Pa	summary of Parts I and II			neficiaries'	(2) Es		(3) Total
	Caution: Read the instructions before completing this p		(see	page 5)	or tru	1515	13,026.
13 14	Net short-term gain or (loss)	13					13,020.
	Total for year	14a					-160,904.
b		14b					
	28% rate gain	14c					
15	Total net gain or (loss). Combine lines 13 and 14a	15					-147,878.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form int V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV.	990-T					
	t IV Capital Loss Limitation				,		
6	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, lir	e 4c, if a t	rust) , the sr	maller of		
а	• •			•		16	(3,000.)
ote arr	The loss on line 15, column (3) or b \$3,000 If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pagy yoveWorksheeton page 7 of the instructions to figure your capital loss carryove	r	e 22 (or F	om 990-T, li	ine 34), is a	loss, c	omplete the Capital Loss
	t V Tax Computation Using Maximum Capital Gains Rate						
	1 1041 filers. Complete this part only if both lines 14a and 15 in colu			ns, or an an	nount is er	ntered	in Part I or Part II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more		ero				
	ion: Skip this part and complete the worksheet on page 8 of the instructi ther line 14b, col (2) or line 14c, col (2) is more than zero, or	ons II					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero						
	1 990-T trusts. Complete this part only if both lines 14a and 15 are	e gain	s, or qua	lified divide	ends are i	nclude	d in income in Part I
f Fo	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pai	rt and	complete	the works	sheet on p	age 8	of the instructions if
ithe	r line 14b, col (2) or line 14c, col (2) is more than zero						
7	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		. 17				
8	Enter the smaller of line 14a or 15 in column (2)	•				1	
	but not less than zero						
9	Enter the estate's or trust's qualified dividends						
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T)						
D	Add lines 18 and 19						
1	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g, otherwise, enter -0 ▶ 21	_					
2	Subtract line 21 from line 20 If zero or less, enter -0		. 22				
3	Subtract line 22 from line 17 If zero or less, enter -0-		. 23				
						1	
	Enter the smaller of the amount on line 17 or \$2,300		. 24				
5	Is the amount on line 23 equal to or more than the amount on line 24?						
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box						
	No. Enter the amount from line 23]	
	Subtract line 25 from line 24		. 26				
	Are the amounts on lines 22 and 26 the same?						
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	22	27		·		
}	Enter the amount from line 26 (If line 26 is blank, enter -0-)		. 28	, -			
	Subtract line 28 from line 27		29				
	Multiply line 29 by 15% (15)		• —			30	
	Figure the tax on the amount on line 23 Use the 2009 Tax Rate				d Trusts		
	(see the Schedule Ginstructions in the instructions for Form 1041)					31	•
	Add lines 30 and 31					32	
	Add lines 30 and 31				d Truete	32	·············
	see the Schedule Ginstructions in the instructions for Form 1041)					33	
,	Tax on all taxable income Enter the smaller of line 32 or line 33 h						

G, line 1a (or Form 990-T, line 36) .

Schedule D (Form 1041) 2009

SCHEDULE D-1 (Fòrm 1041)

Continuation Sheet for Schedule D (Form 1041)

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

► See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. 2009

Employer identification number Name of estate or trust THE POWERS FAMILY FOUNDATION 13-3637704 Short-Term Capital Gains and Losses - Assets Held One Year or Less (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (b) Date (f) Gain or (loss) Subtract (e) from (d) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold acquired (mo , day, yr) (mo , day, yr) 1a SEE STATEMENT I ATTACHED VAR VAR 8,160. 8,953. -793. THRU K-1 - GS ALPHA PLUS 13,819. MGRS: PORT 2 [SERIES] VAR VAR 13,819.

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

13,026. Schedule D-1 (Form 1041) 2009

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side

Employer identification number

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year					
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a SEE STATEMENT I ATTACHED	VAR	VAR	469,696.	585,622.	-115,926.
SEE STATEMENT II ATTACHED	VAR	VAR	105,923.	100,674.	5,249.
THRU K-1 - GS ALPHA PLUS MGRS: PORT 2 [SERIES]	VAR	VAR		50,227.	-50,227.
					· · · · · · · · · · · · · · · · · · ·
6b Total. Combine the amounts in column	(f) Enter here and	on Schedule D, lin	e 6b		-160,904.

THE POWERS FAMILY FOUNDATION CHARITABLE CONTRIBUTIONS FYE 6/30/2010

DATE	CONTRIBUTION	CITY STATE	AMOUNT
9/15/2009 The National Mentorin	g Partnership	New York, NY	2,500 00
9/25/2009 Fibrolamellar Cancer F	oundation	Greenwich, CT	10,000 00
11/6/2009 Mountain Mission Scho	ol	Grundy, VA	35,000 00
11/6/2009 Clemson University		Clemson, SC	5,000 00
11/6/2009 Buckley Country Day S	chool	Roslyn, NY	5,000 00
3/15/2010 Tuesday's Children		Manhasset, NY	1,000 00
3/16/2010 St Simons Land Trust		St Simons Is, GA	1,000 00
3/18/2010 Boston College		Boston, MA	5,000 00
3/22/2010 Quinniplac University		Hamden, CT	2,000 00
3/29/2010 Buckley Country Day Se	chool	Roslyn, NY	5,000 00
3/30/2010 Fibrolamellar Cancer Fe	pundation	Greenwich, CT	2,000 00
4/27/2010 St Mary's Church		New York, NY	1,000 00
5/11/2010 The Feinstein Institute	of Medical Research	Westbury, NY	10,000 00
5/20/2010 Indians Rock Communit	y Foundation	East Hills, NY	2,000 00
5/25/2010 Boston College		Boston, MA	300,000 00
6/11/2010 Tuesday's Children		Manhasset, NY	15,000 00
6/29/2010 Durham University		Durham DH1 3HP, UK	20,000 00
6/29/2010 Tuesday's Children		Manhasset, NY	7,500 00
6/29/2010 Boston College		Boston, MA	10,000 00
6/29/2010 Ira Sohn Research Four	ndation	New York, NY	5,000 00
6/29/2010 Trinity Pawling School		Pawling, NY	25,000 00
TOTAL CONTRIBUT	TONS PATN *		\$469,000 00

^{*}ALL CONTRIBUTIONS WERE MADE TO THE GENERAL PURPOSE FUND OF PUBLIC CHARITABLE ORGANIZATIONS THAT WERE CLASSIFIED UNDER SECTION 501 (c) (3) OF THE INTERNAL REVENUE CODE

POWERS FAM FDN RESTRICTED ACCT XXX-03764-4 (ND) From 01-Jan-2010 To 30-Jun-2010

Base Currency USD and Custodian Goldman Sachs & Company

Gain/Loss	(6,836 20) 2,054 26 4,186 05 (7,096 86) (4,805 19) (13,200 58) 3,321 23 (78,922 89) (1,178 45) (670 00) (3,652 14) (2,632 47)	15,926 36)	(793 48)	(793'48)
Proceeds Cost (Base) Gain/Loss	56,836 20 13,945 74 40,813 95 18,019 74 12,200 93 33,517 78 16,851 34 353,635 29 4,362 01 2,480 00 9,420 37 6,790 21 16,748 36	469,695 57 585,621 93 (115,926 36)	8,953 76	8,953 76
Proceeds	50,000 00 16,000 00 45,000 00 10,922 88 7,395 74 20,317 20 20,172 57 274,712 40 3,183 56 1,810 00 5,768 23 4,157 74	469,695 57	8,160 28	8,160 28
Qt	1,651 26 50,000 00 723 327 16,000 00 4,756 87 45,000 00 1,206.95 10,922 88 817 209 7,395 74 2,245 00 20,317 20 2,229 01 20,172 57 30,354 96 274,712 40 351 775 3,183 56 200 1,810 00 637 373 5,768 23 459 419 4,157 74 1,133.18 10,255 25	7	901 688	"
Date Sold / (4-Mar-10 8-Apr-10 17-May-10 17-May-10 17-May-10 17-May-10 17-May-10 17-May-10 17-May-10		17-May-10	
Trade Date Date Sold / (11-Mar-05 18-Jan-01 11-Mar-05 13-Dec-07 13-Dec-07 12-Dec-08 11-Mar-05 8-Dec-05 12-Dec-06 12-Dec-06		11-Dec-09 17-May-10	
Realized Gains/Losses Symbol Description	GS MID-CAP VALUE FUND INSTITUTIONAL SHARES GOLDMAN SACHS GROWTH OPPORTUNITES FUND CLASS I GOLDMAN SACHS STRATEGIC GROWTH CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I	TOTAL LONG-TERM GAIN/LOSS	GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I	TOTAL SHORT-TERM GAIN/LOSS
Realized Symbol	688MCX 66001X 60011X 60011X 60011X 60011X 60011X 60011X 60011X		GCIIX	

POWERS FAMILY FOUNDATION XXX-00251-5 (ND) From 01-Jul-2009 To 30-Jun-2010

Base Currency USD and Custodian Goldman Sachs & Company

Realized (Realized Gaıns/Losses Symbol Description		- - - - - - - - - - - - - - - -	ä	ı		
		Hade Date	Date Sold / (Š	Proceeds	Cost (Base) Gain/Loss	Gain/Loss
GSTGX	GOLDMAN SACHS SHORT DURATION GOVERNMENT FUND - 1	10-Mar-04	20, 141,00	206 272	7111		1
GSTGX	GOLDMAN SACHS SHORT DIRATION COVERNMENT FILMS	+0-1814-01	60-Inc-63	200 223	2,141 63	2,069 42	72 21
GSTGX		10-Mar-04	22-Sep-09	239 239	2,497 66	2,399 57	60 86
XULVU VULVU	COLDIAM SACIS SHORT DURATION GOVERNMENT FUND - I	10-Mar-04	28-Oct-09	277 426	2,904 65	2,782 58	122 07
XO LOO	COLDINAN SACHS SHORT DURATION GOVERNMENT FUND - I	10-Mar-04	3-Nov-09	276 399	2,893 90	2,772 28	121 62
XO LOO	COLDMAN SACHS SHORT DURATION GOVERNMENT FUND - I	31-Mar-04	3-Nov-09	1,055 71	11,053 25	10,578 18	475 07
X	OCEDIMAN SACHS SHORT DURATION GOVERNMENT FUND - I	30-Apr-04	3-Nov-09	1,663 21	17,41383	16,465 80	948 03
\0.00 \0.00	GOLDWAN SACHS SHOK! DURA HON GOVERNMENT FUND - I	28-May-04	3-Nov-09	1,302.68	13,639 02	12,818 33	820 69
VILOD VCFOC	GOLDWAN SACHS CORE FIXED-INC I MUTUAL FUND CLASS I	30-May-03	3-Dec-09	26 316	250 00	278 95	(28 95)
X9 - 65	GOLDIMAN SACHS SHOK! DURA!!ON GOVERNMENT FUND - I	28-May-04	27-Jan-10	262.56	2,712.24	2,583 59	128 65
55165 50100	GOLDIMAN SACHS SHOK! DUKATION GOVERNMENT FUND - I	28-May-04	23-Feb-10	40 354	417 26	397 08	20 18
40160 40160	GOLDIMAN SACHS SHOR! DURA! ION GOVERNMENT FUND - I	30-Jun-04	4-Mar-10	1,659 20	17,172.68	16,293 30	879 38
GSTGX	GOLDMAN SACHS SHOR! DURATION GOVERNMENT FUND - I	31-Aug-04	4-Mar-10	1,408 27	14,575 54	13,899 57	675 97
X51.05	GOLDIMAN SACHS SHOK! DURA!ION GOVERNMENT FUND - I	28-May-04	4-Mar-10	56 281	582 51	553 81	28 70
25165	GOLDIMAN SACHS SHOK! DUKATION GOVERNMENT FUND 1	30-Jul-04	4-Mar-10	1,707 18_	17,669 27	16,781 54	887 73

TOTAL LONG TERM GAINS

5,249 44

100,674 00

105,923 44



POWERS FAMILY FOUNDATION Holdings

Period Ended June 30, 2010

FIXED INCOME

	Quantity /		Market Veine		,	Unrealized /		
MVESTMENT CDANE CINCOLLINGOLAR	Current Face	Market Price	Accrued Income	Unit Cost	Aujustea Cost / Original Cost	Cain (Loss)	Yield to Maturity in Percentage	Estimated Annual Income
MACCO INCINE COMPLETIVED INCOMIC								
GS CORE HIXED INCOME FUND								
GULUMAN SACHS CORE HIXED-INC I MUTUAL FUND CLASS I	315,686 198	0008 6	3,093,724 74	9.6944	3,060,392.93	33,331 81		105,439 19
The state of the s						593,974 73		
GS SHURI DURATION GOVERNMENT FUND								
GULDMAN SACHS SHURT DURATION GOVERNMENT FUND - I Mondy's Ass	124,444.428	10.4000	1,294,222.05	9.7022	1,185,412.78	108,809.27	7	22,026 66
ppu s incom						636,895.49		
IOTAL INVESTMENT GRADE FIXED INCOME			4,387,946.79		11,245,805.71	142, MI.CB		127,465.85
PUBLIC EQUITY								
						Unrealized/		
	Quantity	Market Price	Market Value /	Hart Cast	9000	Economic	Dividend	Estimated
US EQUITY				THE COST	Cust Dasis	nau (Loss)	Aieid	Annual Income
GS LARGE CAP VALUE FUND								
GOLDMAN SACHS LARGE CAP VALUE CLASS I (GSLIX)	102,758 048	9 8700	1,014,221.93	11 7577	1,208,196.80	(193,974.87)	1 3678	13,872.34
						114,221.91		
GS GROWTH OPPORTUNITIES FUND								
GOLDMAN SACHS GROWTH OPPORTUNITES FUND CLASS I	19,564 007	19 6000	383,454 54	18 8440	368,664 14	14,790 40	0 0204	78 26
(פנטוא)						133,454 54		

Page 4 of 2

LONG POSITION I

Statement Detail

POWERS FAMILY FOUNDATION Holdings (Continued)

PUBLIC EQUITY (Continued)							Period Ende	Period Ended June 30, 2010
	9		Market Value /	' !		Unrealized / Economic	Dividend	Estimated
US EQUITY	Anniano	MUNICALITICS	Accrued income	Unit Cost	Cost Basis	Gain (Loss)	Vield	Annual Income
GS SMALL CAP VALUE FUND								
GOLDMAN SACHS SMALL CAP VALUE CLASS I (GSSIX)	10,023 766	32 8100	328,879.76	35 6950	373,415.01	(ナジングジンシン) 0.8351	0.8351	2,746.51
TOTAL LIP COLLITY						37,6/3./0		
וחואר חש בתחוו ג			1,726,556.23		1,950,775.45	(22.912,45 (224,219.72)	0.9671	16,697.10
			Market Value		Adjusted Cost / 6	Unrealized		Estimated
TOTAL PORTFOLIO			6114503.02	7.	6196581.46	(82.078,		/Annual Income
					, , , , , , , , , , , , , , , , , , , ,	1000		San San San San San San San San San San



POWERS FAMILY FOUNDATION RESTRICTED ACCT Holdings

Statement Detail

Period Ended June 30, 2010

PUBLIC EQUITY

	Quantity	Market Price	Market Value / Accrued Income	Unit Cost	Cost Basis	Unrealized / Economic Gain (Loss)	Dividend	Estimated
US EQUITY								
GS STRATEGIC GROWTH FUND								
GOLDMAN SACHS STRATEGIC GROWTH CLASS I (GSTIX)	135,405 127	8 7300	1,182,086.76	8 5831	1,162,199.31	19,887.45	0.3895	4,603 77
						30,086.76		
GS LARGE CAP VALUE FUND								
GOLDMAN SACHS LARGE CAP VALUE CLASS I (GSLIX)	14,604 058	9 8700	144,142 05	13 0598	190,725 92	(46,583 87)	1 3678	1,971 55
	;					(5,857 96)		
GS GROWTH OPPORTUNITIES FUND								
GOLDMAN SACHS GROWTH OPPORTUNITES FUND CLASS I	15,991 588	19 6000	313,435 12	19 5266	312,261.27	1,173.86	0.0204	63 97
(GGO)X)						95,435 11		
GS MID CAP VALUE FUND								
GS MID-CAP VALUE FUND INSTITUTIONAL SHARES (GSMCX)	25,141,721	28 2300	709,750.78	34.4416	865,921.35	(156,170.57)	1.3496	9,579 00
						60,080.79		
TOTAL US EQUITY			2,349,414.71		2,531,107.85	(181,693.13)	0.6903	16,218.28
NON-US EQUITY								
GS STRUCTURED INTERNATIONAL EQUITY FUND								
GS STRUCTURED INTL EQUITY INSTITUTIONAL CLASS I	89 782	8 5300	765.84	9 9300	891 54	(125 70)	2 9074	72 27
(CCIIX)						13,986 41		
TOTAL PUBLIC EQUITY			2,350,180.55		2,531,999.39	(181,818.83)	0.6910	16,240.55

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

					▶ 🔯
Do not comp	filing for an Additional (N plete Part II unless you ha	B-Month Extension, complete only Part I and check Not Automatic) 3-Month Extension, complete only large already been granted an automatic 3-month extension	Part II (on page on on a previous	e 2 of thi	is form).
Part I	Automatic 3-Month E	Extension of Time. Only submit original (no copi	ies needed).		
A corporation Part I only	n required to file Form 99	90-T and requesting an automatic 6-month extension	check this bo	ox and c	omplete
	porations (including 1120 ncome tax returns.	O-C filers), partnerships, REMICs, and trusts must use	e Form 7004 to	request	an extension o
one of the re electronically returns, or a c	eturns noted below (6 m if (1) you want the addit composite or consolidated	ou can electronically file Form 8868 if you want a 3-m nonths for a corporation required to file Form 990-T) tional (not automatic) 3-month extension or (2) you filed Form 990-T. Instead, you must submit the fully complished filing of this form, visit www.irs.gov/efile and click or). However, you le Forms 990-B leted and signe	u cannot L, 6069, d page 2	file Form 8868 or 8870, group (Part II) of Form
Type or	Name of Exempt Organization	ition	Employ	yer identi	fication number
	THE POWERS FAMILY	FOUNDATION	13-363	7704	
File by the	Number, street, and room	or suite no If a PO box, see instructions			
due date for filing your	C/O BCRS ASSOCIATE	S, LLC 100 WALL STREET - 11 FLOOR			
return See instructions	City, town or post office, s	state, and ZIP code. For a foreign address, see instructions			
	NEW YORK, NY 10005				
Check type o	of return to be filed (file	a separate application for each return)			
☐ Form 990		Form 990-T (corporation)		Forn	n 4720
☐ Form 990-	·BL	Form 990-T (sec. 401(a) or 408(a) trust)		☐ Form	n 5227
☐ Form 990-	・ドフ	Form 990-T (trust other than above)		Forn	n 6069
L LOUIN 990.		i com coo i (mast offici than above)			
☑ Form 990-	PF	Form 1041-A		Forn	n 8870
Form 990- The books a	PF are in the care of ► BCRS b ≥ 212-440-0800	☐ Form 1041-A 5 ASSOCIATES, LLC FAX No ▶		Forn	
Telephone N If the organiz	PF are in the care of ► BCRS lo ► 212-440-0800 zation does not have an	☐ Form 1041-A 5 ASSOCIATES, LLC FAX No ► office or place of business in the United States, che	eck this box	Form	▶ □
The books a Telephone N If the organiz If this is for a for the whole g	are in the care of ► BCRS	☐ Form 1041-A 5 ASSOCIATES, LLC FAX No ▶	eck this box	Form	▶ □
● The books a Telephone N If the organiz If this is for a for the whole ga list with the r 1	are in the care of ►BCRS Io ► 212-440-0800 Zation does not have an a Group Return, enter the group, check this box In an automatic 3-mon FEB. 15 20 11 ganization's return for: lendar year 20 or	FAX No Form 1041-A FAX No	eck this box (GEN) s box file Form 990 nization named	Form Form a -T) external above T	▶ □ If this is nd attach ension of time The extension is
● The books a Telephone N If the organiz If this is for a for the whole ga list with the r 1	are in the care of ►BCRS Sorting = 10	FAX No Form 1041-A FAX No	eck this box (GEN) s box file Form 990 nization named	Form Form a -T) external above T	▶ ☐ If this is nd attach ension of time The extension is
Form 990- The books a Telephone N If the organiz If this is for a for the whole g a list with the r I request until for the org □ cali □ X tax	are in the care of ► BCRS O ► 212-440-0800 Zation does not have an a Group Return, enter the group, check this box names and EINs of all m t an automatic 3-mon FEB. 15 , 20 11 ganization's return for: lendar year 20	FAX No Form 1041-A FAX No	eck this box (GEN) s box file Form 990 nization named	Form Form □ Form	If this is nd attach ension of time the extension is
Form 990- The books a Telephone N If the organiz If this is for a for the whole g a list with the r I request until for the org □ cal □ cal □ x I tax If this tax	are in the care of ►BCRS Sortion ► 212-440-0800 Sortion Example Example Sortion Example Example Sortion Example Example Sortion Example Example Sortion Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Example Sortion Sortion Example Sortion	FAX No Form 1041-A FAX No Form 1041-A FAX No Form 1041-A Office or place of business in the United States, che is organization's four digit Group Exemption Number Form 1. Form 1. For part of the group, check this nembers the extension will cover with (6 months for a corporation required to form 1. To file the exempt organization return for the organ form 1. For	eck this box (GEN) s box file Form 990 nization named JUNE 30 return Char	Form Form □ Form	If this is nd attach ension of time the extension is
Form 990- The books a Telephone N If the organiz If this is for a for the whole ga list with the r I request until for the org	are in the care of ►BCRS Sort	FAX No Form 1041-A FAX No Form 1041-A FAX No Form 1041-A Office or place of business in the United States, che is organization's four digit Group Exemption Number Form 1. Form 1. For part of the group, check this nembers the extension will cover with (6 months for a corporation required to form 1. To file the exempt organization return for the organ form 1. For	GEN 990 File Form 990 File Form 90	Forn Forn a T) exter above T a 3a \$	If this is nd attach ension of time he extension is 2010 counting period
Form 990- The books a Telephone N If the organiz If this is for a for the whole ga a list with the r I request until for the org X tax If this tax If this appl less any n b If this appl payments c Balance D deposit wi	are in the care of ► BCRS So ► 212-440-0800 Station does not have an a Group Return, enter the group, check this box in names and EINs of all metal an automatic 3-mon FEB. 15	FAX No ► office or place of business in the United States, che le organization's four digit Group Exemption Number ► □ . If it is for part of the group, check this nembers the extension will cover to file the exempt organization required to find the exempt organization return for the organization return for the organization return for the organization return □ Final results	geck this box (GEN) s box file Form 990 nization named JUNE 30 return Char tive tax, nated tax required, Payment	Form	If this is nd attach ension of time the extension is

Form 8868 (F	Rev 4-2009)			Page 2
Note Only	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II complete Part II if you have already been granted an automatic 3-month extension on a prefiling for an Automatic 3-Month Extension, complete only Part I (on page 1)	and check reviously filed	his box Form 8	x ► [X] 3868
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original	al (no copie	s need	ded)
Type or	Name of Exempt Organization	Employer	dentific	ation number
print	THE POWERS FAMILY FOUNDATION	13-36377	′04	
File by the	Number, street, and room or suite no. If a PO box, see instructions	For IRS us	e only	
extended due date for	c/o BCRS ASSOCIATES, LLC, 100 WALL STREET - 11TH FL			
filing the return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10005			
Check typ	e of return to be filed (File a separate application for each return)			
Form 9	90 🛛 Form 990-PF 🔲 Form 1041-A		Form (6069
☐ Form 99	90-BL		Form 8	8870
Form 99	30-EZ			
STOP! Do n	not complete Part II if you were not already granted an automatic 3-month extension	on a previou	sly file	d Form 8868
• The book	s are in the care of ▶ BCRS ASSOCIATES, LLC			
	No ► 212-440-0811 FAX No ► N/A			
•	anization does not have an office or place of business in the United States, check this	box		
	or a Group Return, enter the organization's four digit Group Exemption Number (GEN			If this is
	le group, check this box If it is for part of the group, check this box			attach a
	names and EINs of all members the extension is for	-		
4 I reque	est an additional 3-month extension of time until MAY 16	2011		
5 For cal	endar year , or other tax year beginning JULY 1 , 2009 , and endi	na JUN	1E 30	20.10
6 If this t	ax year is for less than 12 months, check reason Initial return Final return	Change	in acco	unting period
7 State in	n detail why you need the extension ALL INFORMATION NECESSARY TO FI	LE A COM	LETE	AND
	RATE TAX RETURN IS NOT YET AVAILABLE.			
8a If this a	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative ta	ıx.]	
	y nonrefundable credits. See instructions	8a	\$	5,793 00
b If this a	ipplication is for Form 990-PF, 990-T 4720, or 6069, enter any refundable credits as	nd		
	ed tax payments made Include any prior year overpayment allowed as a credit and a			
	paid previously with Form 8868	8b	\$	5,793 00
c Balance	Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, depo-	sit		
with FTD	coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instruction	ns 8c	\$	0 00
	Signature and Verification			
Jnder penalties of its true, correct,	of perjury, I declare that I have examined this form including accompanying schedules and statements, and and complete and that I am authorized to prepare this form	to the best of r	ny knowl	edge and belief
(
Signature 🕨 🚶	Title ► CPA	Date ► ()2/15/	/2011
		Fo	rm 886	8 (Rev 4-2009)

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