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

2009

\* Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2009, or tax year beginning JUL 1, 2009, and ending JUN 30, 2010

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return  
☐ Amended return ☒ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions	Name of foundation <b>THE MORRIS &amp; SYLVIA TRACHTEN FAMILY FOUNDATION</b>		A Employer identification number <b>22-2518063</b>
	Number and street (or P O box number if mail is not delivered to street address) Room/suite <b>4950 SOUTH YOSEMITE ST., F2 - 184</b>		B Telephone number <b>(303)488-2057</b>
	City or town, state, and ZIP code <b>GREENWOOD VILLAGE, CO 80111</b>		C If exemption application is pending, check here <input type="checkbox"/>
	H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ <b>508,794.</b> (Part I, column (d) must be on cash basis)		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
			F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	228,500.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	8,830.	8,830.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	0.			
	b Gross sales price for all assets on line 6a 25,000.				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11	237,330.	8,830.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees	3,500.	0.		0.
	c Other professional fees				
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	4,219.	0.		0.
	22 Printing and publications				
	23 Other expenses STMT 3	343.	0.		0.
	24 Total operating and administrative expenses. Add lines 13 through 23	8,062.	0.		0.
	25 Contributions, gifts, grants paid	141,837.			141,837.
26 Total expenses and disbursements Add lines 24 and 25	149,899.	0.		141,837.	
27 Subtract line 26 from line 12	87,431.				
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)		8,830.			
c Adjusted net income (if negative, enter -0-)			N/A		

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<b>Part II Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	136,022.	207,452.	207,452.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations STMT 4	75,000.	75,000.	75,704.
	b Investments - corporate stock			
	c Investments - corporate bonds STMT 5	136,447.	151,388.	171,451.
<b>Liabilities</b>	11 Investments - land, buildings, and equipment basis ▶			
	Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 6	45,376.	46,909.	54,187.
	14 Land, buildings, and equipment basis ▶			
	Less: accumulated depreciation ▶			
	15 Other assets (describe ▶ <u>ACCRUED INTEREST</u> )	473.	0.	0.
	16 Total assets (to be completed by all filers)	393,318.	480,749.	508,794.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
<b>Net Assets or Fund Balances</b>	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ )			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>			
	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
<b>Net Assets or Fund Balances</b>	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>			
	and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	393,318.	480,749.	
	30 Total net assets or fund balances	393,318.	480,749.	
<b>Net Assets or Fund Balances</b>	31 Total liabilities and net assets/fund balances	393,318.	480,749.	

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	393,318.
2 Enter amount from Part I, line 27a	2	87,431.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	480,749.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	480,749.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 25000 FEDERAL FARM CREDIT 3/19/12	P	03/18/09	03/19/10
b			
c			
d			
e			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 25,000.		25,000.	0.
b			
c			
d			
e			

  

(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	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			0.
b			
c			
d			
e			

  

2 Capital gain net income or (net capital loss)	2	0.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8	3	N/A

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	224,505.	462,934.	.484961
2007	188,223.	286,150.	.657777
2006	141,603.	61,701.	2.294987
2005	100,745.	19,645.	5.128277
2004	145,516.	28,959.	5.024897

  

2 Total of line 1, column (d)	2	13.590899
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	2.718180
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	477,116.
5 Multiply line 4 by line 3	5	1,296,887.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	88.
7 Add lines 5 and 6	7	1,296,975.
8 Enter qualifying distributions from Part XII, line 4	8	141,837.

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	177.
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	0.
3 Add lines 1 and 2		3	177.
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	177.
6 Credits/Payments			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	378.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	378.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	201.	
11 Enter the amount of line 10 to be Credited to 2010 estimated tax <input type="checkbox"/> 201. Refunded <input type="checkbox"/>	11	0.	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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?	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 Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CT		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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**Part VII-A Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of Section 512(b)(13)? If "Yes," attach Schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14	The books are in care of ► MORRIS TRACHTEN Telephone no ► 561-495-5709 Located at ► 7514 GLENDEVON LANE, DELRAY BEACH, FL ZIP+4 ► 33446			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A <input type="checkbox"/>	1b	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ►		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) N/A	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

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**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(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 account, other allowances
MORRIS TRACHTEN	CEO/PRESIDENT			
7514 GLENDEVON LANE				
DELRAY BEACH, FL 33446	1.00	0.	0.	0.
SYLVIA TRACHTEN	SECRETARY			
7514 GLENDEVON LANE				
DELRAY BEACH, FL 33446	0.00	0.	0.	0.
DAVID TRACHTEN	DIRECTOR			
24 FOX HILL ROAD				
WOODBIDGE, CT 06525	0.00	0.	0.	0.
VICKI TRACHTEN SCHWARTZ	TREASURER/DIRECTOR			
4950 SOUTH YOSEMITE ST., F2-184				
GREENWOOD VILLAGE, CO 80111	1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3

0.



**THE MORRIS & SYLVIA TRACHTEN  
FAMILY FOUNDATION**

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	283,456.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	200,926.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	484,382.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	484,382.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	7,266.
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	477,116.
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	23,856.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	23,856.
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5	<b>2a</b>	177.
<b>b</b>	Income tax for 2009 (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	177.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	23,679.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0.
<b>5</b>	Add lines 3 and 4	<b>5</b>	23,679.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	23,679.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	141,837.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	141,837.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	0.
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	141,837.

**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.

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				23,679.
2 Undistributed Income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004	144,076.			
b From 2005	99,770.			
c From 2006	138,573.			
d From 2007	174,070.			
e From 2008	201,392.			
f Total of lines 3a through e	757,881.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 141,837.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				23,679.
e Remaining amount distributed out of corpus	118,158.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below	876,039.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	144,076.			
9 Excess distributions carryover to 2010 Subtract lines 7 and 8 from line 6a	731,963.			
10 Analysis of line 9				
a Excess from 2005	99,770.			
b Excess from 2006	138,573.			
c Excess from 2007	174,070.			
d Excess from 2008	201,392.			
e Excess from 2009	118,158.			

N/A

- !

☐ 4942(j)(3) or ☐ 4942(j)(5)

- [illegible]

Form **990-PF** (2009)

## Part XV

### **3 Grants and Contributions Paid During the Year or Approved for Future Payment**

**Total**

## Part XVI-A

1 Program service revenue

a \_\_\_\_\_

b \_\_\_\_\_

c \_\_\_\_\_

d \_\_\_\_\_

e \_\_\_\_\_

f \_\_\_\_\_

g Fees and contracts from government agencies

- 2 Membership dues and assessments
- 3 Interest on savings and temporary cash investments
- 4 Dividends and interest from securities
- 5 Net rental income or (loss) from real estate
  - a Debt-financed property
  - b Not debt-financed property
- 6 Net rental income or (loss) from personal property
- 7 Other investment income
- 8 Gain or (loss) from sales of assets other than inventory
- 9 Net income or (loss) from special events
- 10 Gross profit or (loss) from sales of inventory
- 11 Other revenue
  - a \_\_\_\_\_
  - b \_\_\_\_\_
  - c \_\_\_\_\_
  - d \_\_\_\_\_
  - e \_\_\_\_\_

**13 Total** Add line 12, columns (b), (d), and (e)

(See worksheet in line 13 instructions to verify calculations )

**Part XVI-B**[illegible]

## Part XVII

## Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- |   |              |            |           |
|---|--------------|------------|-----------|
| <p><b>1. Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</b></p> <p><b>a Transfers from the reporting foundation to a noncharitable exempt organization of</b></p> <p>(1) Cash</p> <p>(2) Other assets</p> <p><b>b Other transactions</b></p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p><b>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</b></p> <p><b>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</b></p> |              | <b>Yes</b> | <b>No</b> |
|   | <b>1a(1)</b> |            | <b>X</b>  |
|   | <b>1a(2)</b> |            | <b>X</b>  |
|   | <b>1b(1)</b> |            | <b>X</b>  |
|   | <b>1b(2)</b> |            | <b>X</b>  |
|   | <b>1b(3)</b> |            | <b>X</b>  |
|   | <b>1b(4)</b> |            | <b>X</b>  |
|   | <b>1b(5)</b> |            | <b>X</b>  |
|   | <b>1b(6)</b> |            | <b>X</b>  |
|   | <b>1c</b>    |            | <b>X</b>  |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer or trustee

Draves

DIRECTOR

➤ **Title**

Preparer's  
signature

Date \_\_\_\_\_

☒ Check if self-employee

Preparer's identifying number

Firm's name (or yours if self-employed), address, and ZIP code

KONOWITZ, KAHN & COMPANY P.C.

P.O. BOX 190

NORTH HAVEN, CT 06473-0190

**EIN ▶**

Phone no (203) 239-6888

Form **990-PF** (2009)

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

**2009****Name of the organization**THE MORRIS & SYLVIA TRACHTEN  
FAMILY FOUNDATION**Employer identification number**

22-2518063

**Organization type** (check one).**Filers of:****Section:**

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization  
**THE MORRIS & SYLVIA TRACHTEN  
 FAMILY FOUNDATION**

Employer identification number

22-2518063

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MORRIS TRACHTEN 7514 GLENDEVON LANE DELRAY BEACH, FL 33446	\$ 228,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization

THE MORRIS & SYLVIA TRACHTEN  
FAMILY FOUNDATION ·

Employer identification number

**Part II Noncash Property** (see instructions)[illegible]

Name of organization

THE MORRIS & SYLVIA TRACHTEN  
FAMILY FOUNDATION

Employer identification number

22-2518063

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
1	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
2	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
3	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
4	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
JANNEY MONTGOMERY	8,830.	0.	8,830.
TOTAL TO FM 990-PF, PART I, LN 4	8,830.	0.	8,830.

FORM 990-PF	ACCOUNTING FEES	STATEMENT	2
-------------	-----------------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	3,500.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	3,500.	0.		0.

FORM 990-PF	OTHER EXPENSES	STATEMENT	3
-------------	----------------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REGISTRATION FEE	50.	0.		0.
SERVICE FEE	293.	0.		0.
TO FORM 990-PF, PG 1, LN 23	343.	0.		0.

FORM 990-PF	U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS			STATEMENT	4
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE	
25000 FEDL FARM CREDIT BANK DUE 3/17/11	X		25,000.	25,250.	
25000 FEDL FARM CREDIT BANK DUE 3/19/12	X		0.	0.	
25000 FEDL HOME LOAN BANK	X		25,000.	25,016.	
25000 FEDERAL HOME LOAN 12/30/13	X		25,000.	25,438.	
TOTAL U.S. GOVERNMENT OBLIGATIONS			75,000.	75,704.	
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS					
TOTAL TO FORM 990-PF, PART II, LINE 10A			75,000.	75,704.	

FORM 990-PF	CORPORATE BONDS		STATEMENT	5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
25000 GENL ELECTRIC CAP DUE 2/15/17	25,000.	26,756.		
25000 JPMORGAN CHASE DUE 1/15/18	24,750.	27,606.		
25000 MEDTRONIC INC. DUE 4/15/11	23,925.	24,844.		
25000 AMGEN INC. DUE 2/1/11	23,538.	24,719.		
15000 TRANSOCEAN INC.	14,213.	14,531.		
25000 GOLDMAN SACHS GR DUE 5/15/14	25,000.	25,389.		
15000 MORGAN STANLEY GLOBAL 4/1/14	14,962.	27,606.		
TOTAL TO FORM 990-PF, PART II, LINE 10C	151,388.	171,451.		

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
LOOMIS SAYLES FDS II INVT GRADE BOND	COST	27,076.	32,805.	
200 ISHARES TRUST	COST	19,833.	21,382.	
TOTAL TO FORM 990-PF, PART II, LINE 13		46,909.	54,187.	

FORM 990-PF

GRANTS AND CONTRIBUTIONS  
PAID DURING THE YEAR

STATEMENT 7

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ANTI-DEFAMATION LEAGUE 1952 WHITNEY AVENUE 3RD FLOOR HAMDEN, CT 06517	N/A	PUBLIC	1,250.
ALUT	N/A	PUBLIC	100.
ALYN HOSPITAL	N/A	PUBLIC	180.
AMERICAN FRIENDS OF MAGEN D. ADOM 5535 BALBOA BLVD, STE 114 ENCINO, CA 91316-1533	N/A	PUBLIC	100.
AMERICAN FRIENDS OF YESHIVA	N/A	PUBLIC	300.
AMERICAN JEWISH COMMUNITY 165 EAST 56 STREET NEW YORK, NY 10022-2746	N/A	PUBLIC	200.
AMIT 817 BROADWAY NEW YORK, NY 10003	N/A	PUBLIC	12,000.
B'NAI BRITH	N/A	PUBLIC	208.

THE MORRIS & SYLVIA TRACHTEN FAMILY FOUN

22-2518063

CONGREGATION BETH ISRAEL 232 ORCHARD STREET NEW HAVEN, CT 06511	N/A	PUBLIC	100.
BOYS TOWN JERUSALEM FOUNDATION OF AMERICA, INC. 1 PENN PLAZA, SUITE 6250 NEW YORK, NY 10119-002	N/A	PUBLIC	12,000.
CAMERA	N/A	PUBLIC	100.
CHABAD LUBAVITCH OF PUERTO RICO INC. CAROLINA, PR	N/A	PUBLIC	1,000.
CHAI LIFELINE 151 W 30TH STREET NEW YORK, NY 10001	N/A	PUBLIC	100.
COMMUNITY OF PERFORMING	N/A	PUBLIC	230.
DELRAY ERUV	N/A	PUBLIC	100.
DELRAY ORTHODOX SYNAGOGUE 7319 W. ATLANTIC AVENUE DELRAY BEACH, FL 33446	N/A	PUBLIC	1,140.
DOCTORS W/O BORDERS USA 333 SEVENTH AVENUE, 2ND FLOOR NEW YORK, NY 10001	N/A	PUBLIC	500.
EZRA ACADEMY OF GREATER NEW HAVEN INCORPORATED 75 RIMMON ROAD WOODBRIDGE, CT 06525	N/A	PUBLIC	360.

THE MORRIS & SYLVIA TRACHTEN FAMILY FOUN

22-2518063

HILLEL FOUNDATION AT UNIVERSITY 54 N. EAGLEVILLE ROAD STORSS, CT 06268	N/A	PUBLIC	1,000.
JCC	N/A	PUBLIC	562.
JDC HAITIAN EARTHQUAKE RELIEF	N/A	PUBLIC	100.
JEWISH HIGH SCHOOL 2710 PARK AVENUE BRIDGEPORT, CT 06604	N/A	PUBLIC	50,300.
JEWISH FEDERATION OF GREATER NEW HAVEN 360 AMITY ROAD WOODBRIDGE, CT 06252	N/A	PUBLIC	30,400.
JEWISH FEDERATION FLORIDA 9901 DONNA KLEIN BLVD. BOCA RATON, FL 33428	N/A	PUBLIC	2,168.
LENNY MARGOLIS ENDOWMENT FUND	N/A	PUBLIC	5,000.
MACCABI USA 1926 ARCH STREET, 4R PHILADELPHIA, PA 19103	N/A	PUBLIC	200.
NORTH AMERICAN CONFERENCE ON ETHIOPIAN JEWRY 255 WEST 36TH STREET, SUITE 701 NEW YORK, NY 10018	N/A	PUBLIC	3,420.
ORTHODOX UNION ELEVEN BROADWAY NEW YORK, NY 10004	N/A	PUBLIC	100.

THE MORRIS & SYLVIA TRACHTEN FAMILY FOUN

22-2518063

PARKINSON'S	N/A	PUBLIC	200.
REUNITE	N/A	PUBLIC	100.
THE TOWERS FOUNDATION INC. 18 TOWER LANE NEW HAVEN, CT 06519	N/A	PUBLIC	610.
TOYS FOR TOTS	N/A	PUBLIC	250.
WESTVILLE SYNAGOGUE 74 WEST PROSPECT STREET NEW HAVEN, CT 06515	N/A	PUBLIC	4,915.
YAD SARAH 450 PARK AVENUE, 7TH FLOOR NEW YORK, NY 10022-2750	N/A	PUBLIC	500.
YESHIVAT AISH HATORAH NEW YORK, NY	N/A	PUBLIC	11,000.
ZIONIST ORGANIATION OF AMERICA 4 EAST 34TH STREET NEW YORK, NY 10016	N/A	PUBLIC	360.
VARIOUS < \$100	N/A	PUBLIC	684.

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

141,837.



• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print  File by the extended due date for filing your return. See instructions.	Name of exempt organization <b>THE MORRIS &amp; SYLVIA TRACHTEN FAMILY FOUNDATION</b>	Employer identification number <b>22-2518063</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>4950 SOUTH YOSEMITE ST., F2 - 184</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>GREENWOOD VILLAGE, CO 80111</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

**0 4**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

• The books are in the care of **MORRIS TRACHTEN - 7514 GLENDEVON LANE - DELRAY BEACH, FL 33446**

Telephone No. **561-495-5709**

FAX No. ☐

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **MAY 15, 2011**

5 For calendar year ☐, or other tax year beginning **JUL 1, 2009**, and ending **JUN 30, 2010**

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

**OUR RECORDS ARE INCOMPLETE. SOME DATA IS MISSING. WE WILL NEED MORE TIME TO COMPILE OUR FIGURES AND PREPARE AN ACCURATE RETURN.**

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$	<b>378.</b>
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	\$	<b>715.</b>
<b>c</b> <b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	<b>8c</b>	\$	<b>0.</b>

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ☐

Title ☐

Date ☐

Form 8868 (Rev. 1-2011)