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Return of Private Foundation

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

OMB No. 1545-0052

| | | Jar year 2009, or tax year | | 1, 2009 | | JUN 30 | | | |
|-------------------------------------|---------------|--|---------------------------------|---|---------------------------------------|---------------|---|--|-------------|
| | | | | | | 0 0 N 3 U | · · · · · · · · · · · · · · · · · · · | | |
| G G | neck : | | Initial return | Initial return of a fo | | Name change | Final return | | |
| | | | Amended return | Address chang | je <u> </u> | | d = = = = = = = = = = = = = = = = = = = | | |
| | the l | RS Name of foundation | TTAN E AND | MARTON O U | TEEMAN | A Employeri | denuncation | numper | |
| | ibel. | 1 | | MARION O. HO | JE E MAM | 22-2 | 548036 | | |
| | | e, FOUNDATION | D. box number if mail is not de | (autoral de la colorada and descara) | Room/suite | | | | |
| • | orint type | | | | 203 | B Telephone | number 521-29 | 10 | |
| See | | .c 5 / 0 1 1 H G 1 1 1 V | GTON AVENUE | | ZU3 | | | | \top |
| Instr | • | I CITY OF TOWN STATE AN | | 107 | | D 1. Foreign | | ending, check here | H |
| | L1- | | | | | 2. Foreign or | ganizations me | peting the 85% test, proputation | H |
| H C | - | type of organization: | | empt private foundation Other taxable private founda | * | check her | e and attach co | mputation | |
| <u></u> | | tion 4947(a)(1) nonexem rket value of all assets at e | | ng method: X Cash | Accrual | | | tus was terminated | |
| | | | · | her (specify) | Acciual | | |)(A), check here | |
| (ire | | art II, col. (c), line 16) | | mn (d) must be on cash b | nasis) | | | 60-month termination (B), check here | .' |
| | rt I | | | · · · · · · · · · · · · · · · · · · · | | | | (d) Disbursements | <u> </u> |
| Га | 111 | (The total of amounts in colur necessarily equal the amount | mns (b), (c), and (d) may not | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjus | me | for charitable purpos (cash basis only) | 363 |
| | 1 | Contributions, gifts, grant | | | | N/ | A | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | | Check X If the foundation | | | ···· | | - | | |
| | 3 | Interest on savings and tempo | rary | 56,772. | 56,772. | | | STATEMENT | 1 |
| | 4 | Dividends and interest fro | m securities | 611,240. | 611,240. | | | STATEMENT | |
| | | Gross rents | in scounics | 001,110 | | | - | | |
| ļ | | Net rental income or (loss) | | | | | | | |
| | | Net gain or (loss) from sale of a | essets not on line 10 | 386,428. | · · · · · · · · · · · · · · · · · · · | | REC | EIVED | |
| Revenue | b | Gross sales price for all assets on line 6a | 0,179,735. | | | | | 100 | 1 |
| ķ | | Capital gain net Income (from I | | | 386,428. | 60 | NOV | 1 | _ |
| æ | | Net short-term capital gail | | | · · · · · · · · · · · · · · · · · · · | Ö | | (v) | 1 |
| | 9 | Income modifications | | | **- *** | | | <u></u> <u>-</u> | : |
| | 10a | Gross sales less returns and allowances | ı | | * 117 | | OG. | EN, UT | |
| | | Less Cost of goods sold | | | | | | | |
| | C | Gross profit or (loss) | | | | | | | |
| | 11 | Other income | | 125,355. | 125,355. | | | STATEMENT | ' 3 |
| | 12 | Total. Add lines 1 throug | h 11 | 1,179,795. | 1,179,795. | | | | |
| _ | 13 | Compensation of officers, dire | octors, trustees, etc | 325,292. | 189,287. | | | 136,0 | |
| | 14 | Other employee salaries a | ınd wages | 58,240. | 29,120. | | | 29,1 | |
| | 15 | Pension plans, employee | benefits | 107,202. | 107,202. | | | | 0. |
| nses | 16a | Legal fees | STMT 4 | 133,013. | 133,013. | | | | 0. |
| Ded. | b | Accounting fees | STMT 5 | 17,400. | 17,400. | | | | 0. |
| 짋 | C | Other professional fees | STMT 6 | 29,106. | 29,106. | | | <u> </u> | 0. |
| ive | 17 | Interest | _ | 240. | 240. | | | | 0. |
| tra | 18 | Taxes | STMT 7 | 81,414. | 68,876. | | | 11,0 | 38. |
| æ | 19 | Depreciation and depletio | n | 3,698. | 0. | | | | |
| 8.M. | 20 | Occupancy | | 36,915. | 0. | | | <u> </u> | 0. |
| ď | 21 | Travel, conferences, and | • | 3,160. | 0. | | | | 0. |
| -E | 22 | Printing and publications | | | | | | | ~= |
| ≥ E | 23 | Other expenses | STMT 8 | 55,740. | 38,932. | 1 | | 11,8 | 0/. |
| | 24 | Total operating and adm | | 051 400 | 612 176 | 1 | | 100 0 | 150 |
| حق | ۱ | expenses. Add lines 13 t | | 851,420. | 613,176. | <u>'</u> | | 188,0 | 100 |
| Ш | 25 | Contributions, gifts, grant | - | 2,858,000. | | | | 2,858,0 | .00. |
| Z | 26 | Total expenses and disb | oursements. | 2 700 420 | 612 176 | | | 3,046,0 | 150 |
| ⇇ | 07 | Add lines 24 and 25 | . 10. | 3,709,420. | 613,176. | <u>'</u> | | 1 3,040,0 | , , , , |
| SCANNED NOV 1 9-20110 strative Expe | | Subtract line 26 from line | | -2,529,625. | | | | | |
| U) | Ι. | Excess of revenue over expen | | 2,323,023. | 566,619. | + | | + | |
| | | Net investment income (Adjusted net income (ir n | | | 300,019 | N/ | Δ | + | |
| 9235 | | | | Act Notice see the instruc | Hans | 1 14/ | <u></u> | Form 990-PF | (0000) |

Form 990-PF (2009)

FOUNDATION, INC.

22-2648036

Page 2

| <u> </u> | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-wear amounts only | Beginning of year | End of | <u> </u> |
|--------------------------|------|--|--------------------|---|---------------------------|
| P | art | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| \neg | 1 | Cash - non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 6,387,040. | 3,359,686. | 3,359,686. |
| ļ | | Accounts receivable ▶ | | | |
| | | Less: allowance for doubtful accounts ▶ | i | | |
| | 4 | Pledges receivable | | | |
| | • | Less: allowance for doubtful accounts | | | |
| | | Grants receivable | | | |
| | | · • | - | | |
| | 0 | Receivables due from officers, directors, trustees, and other | | | |
| | _ | disqualified persons | | | |
| i | 7 | Other notes and loans receivable | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| ई | 8 | Inventories for sale or use . | | | |
| Assets | | Prepaid expenses and deferred charges | | | |
| ⋖ | 10a | Investments - U.S. and state government obligations | | | 44 655 556 |
| | b | Investments - corporate stock STMT 9 | 49,433,797. | 49,209,687. | 44,075,772. |
| | C | Investments - corporate bonds | | | |
| | 11 | Investments - land, buildings, and equipment basis 2,384,816. | 1 | | |
| | | Less accumulated depreciation | 2,384,816. | 2,384,816. | 5,000,000. |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other STMT 10 | 8,394,758. | 9,143,901. | 10,019,464. |
| | 14 | Land, buildings, and equipment basis ► 61,951. | | | |
| | | Less accumulated depreciation STMT 11 ► 57,671. | 5,943. | 4,280. | 4,280. 4,350. |
| | 15 | Other assets (describe ► STATEMENT 12) | 32,573. | 4,350. | 4,350. |
| | | | | · · · · · · · · · · · · · · · · · · · | |
| | 16 | Total assets (to be completed by all filers) | 66,638,927. | 64,106 <u>,720.</u> | 62,463,552. |
| _ | 17 | Accounts payable and accrued expenses | 55,612. | 53,030. | |
| | 18 | Grants payable | , | | |
| S | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Ē | 21 | Mortgages and other notes payable | | · · · · · · | |
| Ë | | Other liabilities (describe) | . | | |
| | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 55,612. | 53,030. | |
| _ | | Foundations that follow SFAS 117, check here | | | 1 |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ces | 24 | Unrestricted | | | |
| | 25 | Temporarily restricted | · · · · · · | | 1 |
| 3ali | | Permanently restricted | | | |
| ᅙ | -" | Foundations that do not follow SFAS 117, check here | | | 1 |
| Ē | | and complete lines 27 through 31. | | | |
| ٦ | 27 | Capital stock, trust principal, or current funds | 0. | 0. | |
| ets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | 1 |
| SS | 29 | Retained earnings, accumulated income, endowment, or other funds | 66,583,315. | 64,053,690. | 1 |
| Net Assets or Fund Balan | 30 | Total net assets or fund balances | 66,583,315. | 64,053,690. | 1 |
| Z | " | Total not about of land balanees | 00,000,000 | | |
| | 31 | Total liabilities and net assets/fund balances | 66,638,927. | 64,106,720. | |
| Ξ | | | | , | <u></u> |
| LP | art | Analysis of Changes in Net Assets or Fund B | alances | | |
| 1 | Tota | I net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| | (mu | st agree with end-of-year figure reported on prior year's return) | | 1 | 66,583,315. |
| 2 | Ente | r amount from Part I, line 27a | | 2 | -2,529,625. |
| 3 | Othe | er increases not included in line 2 (itemize) | | 3 | 0. |
| 4 | Add | lines 1, 2, and 3 | | 4 | 64,053,690. |
| 5 | | reases not included in line 2 (itemize) | | 5 | 0. |
| 6 | Tota | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 30 | 6 | 64,053,690. |
| | | | | | Form QQQ_DE (2000) |

22-2648036 Page 3 Form 990-PF (2009) FOUNDATION, INC. Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (c) Date acquired (d) Date sold (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.) (mo., day, yr.) (mo., day, yr.) 18 b SEE ATTACHED STATEMENT ¢ d е (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale b C d 386,428. 9,793,307 10,179,735 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (k) Excess of col. (i) (j) Adjusted basis Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any b d 386,428. If gain, also enter in Part I, line 7 386,428. 2 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 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). N/A If (loss), enter -0- in Part I, line 8 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. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. 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) (d)
Distribution ratio
(col. (b) divided by col. (c)) Adjusted qualifying distributions Net value of noncharitable-use assets 62,878,163 .050013 3,144,748. 2008 67,481,697. .045895 3,097,046. 2007 .050260 3,303,979. 65,737,872. 2006 2,565,953. 62,192,662. .041258 2005 2,632,776. 58,238,629 .045207 2004 .232633 2 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years .046527 3 the foundation has been in existence if less than 5 years 64,331,865. 4 4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 2,993,169. 5 5 Multiply line 4 by line 3 5,666. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 2,998,835. 7 Add lines 5 and 6 7 3,046,050. 8 8 Enter qualifying distributions from Part XII, line 4 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.

THE MAXIMILIAN E. AND MARION O. HOFFMAN

| Form 990-PF (2009) FOUNDATION, INC. | | | | 2648036 | | age 4 |
|--|---|---|-------------|--------------|-------|----------------|
| Part VI Excise Tax Based on Investment | | | or 4948 | - see instru | ctior | 1S) |
| 1a Exempt operating foundations described in section 4940(d)(| 2), check here 🕨 🔛 and enter 🖰 | VA" on line 1. | | | | |
| Date of ruling or determination letter: | (attach copy of letter if necessa | ry-see instructions) | | | | |
| b Domestic foundations that meet the section 4940(e) require | nents in Part V, check here 🕒 🗶 | 」and enter 1% | 1 | | 5,6 | <u>66.</u> |
| of Part I, line 27b | | | | | | |
| c All other domestic foundations enter 2% of line 27b. Exempt | foreign organizations enter 4% of Pa | art I, line 12, col. (b) | | | | • |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts a | nd taxable foundations only. Others | enter -0-) . | 2 | ļ | | <u>0.</u> |
| 3 Add lines 1 and 2 | | | 3 | ļ | 5,6 | <u> </u> |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts | | enter -0-) | 4 | ļ | | -0. |
| 5 Tax based on investment income. Subtract line 4 from line | 3. If zero or less, enter -0- | | 5 | | 5,6 | <u> </u> |
| 6 Credits/Payments: | 1 | 1 1 7 7 7 | | | | |
| a 2009 estimated tax payments and 2008 overpayment credite | | - | 8. | | | |
| b Exempt foreign organizations - tax withheld at source | 61 | | _ | | | |
| c Tax paid with application for extension of time to file (Form 8 | · · | | — İ | | | |
| d Backup withholding erroneously withheld | 6 | <u> </u> | | 4.5 | | ~ ~ |
| 7 Total credits and payments. Add lines 6a through 6d | | | 7 | 17. | 3,/ | <u> 28.</u> |
| 8 Enter any penalty for underpayment of estimated tax. Check | | | 8 | ļ | | |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter | | | 9 | 1 | ~~ | |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8 | | | 10 | 16 | 8,0 | 62. |
| 11 Enter the amount of line 10 to be: Credited to 2010 estimat | | 68,062. Refunded | 11 | <u> </u> | | 0. |
| Part VII-A Statements Regarding Activitie | *** | | | | V 1 | |
| 1a During the tax year, did the foundation attempt to influence a | iny national, state, or local legislation | or did it participate or inter | rvene in | | Yes | |
| any political campaign? | | | _ | 1a | | X |
| b Did it spend more than \$100 during the year (either directly | | | | 1b | | Х |
| If the answer is "Yes" to 1a or 1b, attach a detailed de | - | nes of any materials pub | lished or | | | |
| distributed by the foundation in connection with the | activities. | | | 1.1 | | ۱., |
| c Did the foundation file Form 1120-POL for this year? | • | | | 1c | | Х |
| d Enter the amount (if any) of tax on political expenditures (se | | | _ | | | |
| · · | (2) On foundation managers. | | <u>0.</u> | 1 | | |
| e Enter the reimbursement (if any) paid by the foundation dur | ng the year for political expenditure | tax imposed on foundation | | | | |
| managers. ► \$0. | | | | _ | | |
| 2 Has the foundation engaged in any activities that have not p | | | | 2 | | X |
| If "Yes," attach a detailed description of the activities | | | | ŀ | | |
| 3 Has the foundation made any changes, not previously report | | iment, articles of incorporat | tion, or | _ | | ١., |
| bylaws, or other similar instruments? If "Yes," attach a co | , , | | | 3 | 77 | Х |
| 4a Did the foundation have unrelated business gross income o | | | | 48 | X | |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | | | 4b | Х | - |
| 5 Was there a liquidation, termination, dissolution, or substan | | | | 5 | | X |
| If "Yes," attach the statement required by General Ins | | | | | | ŀ |
| 6 Are the requirements of section 508(e) (relating to sections | 4941 through 4945) satisfied either: | | | | | |
| By language in the governing instrument, or | | | | | | 1 |
| By state legislation that effectively amends the governing | instrument so that no mandatory dir | ections that conflict with the | e state law | 1 _ | 17 | |
| remain in the governing instrument? | | | | 6 | X | |
| 7 Did the foundation have at least \$5,000 in assets at any time | e during the year? | | | 7 | | - |
| If "Yes," complete Part II, col. (c), and Part XV. | | _ | | | | |
| 8a Enter the states to which the foundation reports or with whi | | | | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished | a copy of Form 990-PF to the Attorn | ey General (or designate) | | | | |
| of each state as required by General Instruction G? If "N | • | | | 85 | Х | <u> </u> |
| 9 Is the foundation claiming status as a private operating four | | • | or calendar | | 1 | |
| year 2009 or the taxable year beginning in 2009 (see instru | ctions for Part XIV)? If "Yes," comp | olete Part XIV | | 9 | | X |
| 40 0 1 | | | | 1 40 | | . v |

THE MAXIMILIAN E. AND MARION O. HOFFMAN Page 5 Form 990-PF (2009) 22-2648036 FOUNDATION, INC. 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 X section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before X August 17, 2008? N/A 13 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? N/A Website address Telephone no. ▶860-521-2949 14 The books are in care of ▶ JUNE KWIATKOWSKI ZIP+4 ▶06107 Located at ▶ 970 FARMINGTON AVE., WEST HARTFORD, CT 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year **▶** 15 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations X section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? 16 Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X 1c before the first day of the tax year beginning in 2009? 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(1)(3) or 4942(1)(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? 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 N/A 2b statement - see instructions.) 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 Yes X No during the year?

Form **990-PF** (2009)

X

Х

3Ъ

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

THE MAXIMILIAN E. AND MARION O. HOFFMAN

Form 990-PF (2009) FOUNDATION. 22-2648036 Page 6 INC. 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for 🗌 Yes 🗶 No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 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 Yes No N/A expenditure responsibility for the grant? 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 Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other allowances (If not paid, enter -0-) (a) Name and address SEE STATEMENT 13 44,321 325,292 43,080. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (e) Expense account, other (b) Title, and average (c) Compensation (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position allowances compensation ISABELLA J. KWIATKOWSKI - 382 WARD BOOKKEEPER WALLINGFORD, 8,736 3,710. STREET, 40.00 58,240

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

| Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued) | ation Managers, Highly | |
|--|--|------------------|
| 3 Five highest-paid independent contractors for professional services. If none, ent | er "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | (-, /, | |
| | | |
| | | |
| | - | İ |
| | | |
| | | Ì |
| | - | |
| | | |
| | | |
| | _ | |
| | | ▶ 0 |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | |
| <u> </u> | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant stat number of organizations and other beneficiaries served, conferences convened, research papers pro | istical information such as the oduced, etc. | Expenses |
| 1 N/A | | |
| | | |
| | | 0. |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | 10 | |
| | | |
| 4 | | |
| * | | |
| | | |
| Part IX-B Summary of Program-Related Investments | <u></u> | |
| Describe the two largest program-related investments made by the foundation during the tax year of | on lines 1 and 2. | Amount |
| 1 N/A | | |
| 41/44 | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | | |
| | | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | <u> </u> | 0. |

Form **990-PF** (2009)

Page 8

| P | Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndation | s, see instructions.) |
|----|--|--|-----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| 8 | Average monthly fair market value of securities | 18 | 54,691,882. |
| | Average of monthly cash balances | 1b | 5,619,656. |
| | Fair market value of all other assets | 1c | 5,000,000. |
| | Total (add lines 1a, b, and c) | 1d | 65,311,538. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0. | . 1 | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 65,311,538. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 979,673. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 64,331,865. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 3,216,593. |
| ÷ | Distribute No. Amount () is a Control (0.00) and (0.00) and a control (oundation of | | |
| LP | foreign organizations check here and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 3,216,593. |
| | Tax on investment income for 2009 from Part VI, line 5 2a 5,666. | | |
| | Income tax for 2009. (This does not include the tax from Part VI.) 2b 218. | | |
| | Add lines 2a and 2b | 2c | 5,884. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 3,210,709. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 3,210,709. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 3,210,709. |
| P | art XII Qualifying Distributions (see instructions) | <u> </u> | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 3,046,050. |
| | Program-related investments - total from Part IX-B | 1b | 3,046,050. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | |
| b | | 3ь | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 3,046,050. |
| 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 | 5 | 5,666. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 5,666. 3,040,384. |
| • | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation | للت | |
| | 4940(e) reduction of tax in those years. | | 300001 |

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2008 | (c) 2008 | (d) 2009 |
|---|---------------|---------------------------------------|-------------|---------------------------|
| 1 Distributable amount for 2009 from Part XI, line 7 | | | | 3,210,709. |
| 2 Undistributed income, if any, as of the end of 2009 | | | | |
| a Enter amount for 2008 only | | | 2,840,601. | |
| b Total for prior years: | | 0. | | |
| 3 Excess distributions carryover, if any, to 2009: | | 0. | | |
| a From 2004 | | | | |
| b From 2005 | | | | |
| c From 2006 | | | | |
| d From 2007 | | | | |
| e From 2008 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2009 from | | | | |
| Part XII, line 4: ►\$ 3,046,050. | | | | |
| a Applied to 2008, but not more than line 2a | | | 2,840,601. | |
| 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 | | | | 205,449. |
| e Remaining amount distributed out of corpus | 0. | | | |
| 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: | | | | |
| & 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 | | | | · |
| 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 | | | | 3,005,260. |
| 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 | 0. | | | |
| 9 Excess distributions carryover to 2010. | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2005 | | • | | |
| b Excess from 2006 | | | | |
| c Excess from 2007 | | | 1 | |
| d Excess from 2008 | | | 1 | |
| e Excess from 2009 | | | L | |
| | | | | Form 990-PF (2009) |

a The name, address, and telephone number of the person to whom applications should be addressed:

MARION BARRAK, 860-521-2949

970 FARMINGTON AVE, SUITE 203, WEST HARTFORD, CT 06107

b The form in which applications should be submitted and information and materials they should include:

PRESCRIBED APPLICATION FORM WHICH MAY BE OBTAINED FROM THE FOUNDATION

c Any submission deadlines:

YES

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

NONE OTHER THAN POLITICAL LIMITATIONS

Form **990-PF** (2009)

Form 990-PF (2009)

923611 02-02-10

FOUNDATION, INC.

| Part XV Supplementary Informat | | | | |
|---|--|-------------|----------------------------------|---------|
| 3 Grants and Contributions Paid During th | ne Year or Approved for Future | Payment | 1 | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation | Purpose of grant or contribution | |
| Name and address (home or business) | any foundation manager | status of | contribution | Amount |
| | or substantial contributor | recipient | | |
| Paid during the year | | D. T. T. G. | | 2050000 |
| SEE ATTACHED LIST FOR | NONE | PUBLIC | GENERAL | 2858000 |
| DETAIL | Ì | CHARITY | | |
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| | | | <u> </u> | 005000 |
| Total | <u> </u> | | <u>▶ 3a</u> | 2858000 |
| b Approved for future payment | | | | |
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| NONE | | • | | |
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| | | | 1 | 1 |
| Total | | | <u> </u> | 0 |

02-02-10

| Form 990-PF (2009) FOUNDATION, IN | 1C | | | | 648036 Page 12 |
|---|----------------------|--|--|------------------------------|--|
| Part XVI-A Analysis of Income-Produ | = | usiness income | T Evel ded | by section 512, 513, or 514 | ······································ |
| Enter gross amounts unless otherwise indicated. | (a) Business | (b) Amount | (C) Exclu- sion code | (d) Amount | (e) Related or exempt function income |
| 1 Program service revenue: | code | | COGE | | |
| a b | - | · · · · · · | | | |
| | - | | | | |
| c | - | | | | |
| e | - | | 1 | | |
| f | - | • | 1 1 - | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | ··· ·· · · · · · · · · · · · · · · · · | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 56,772. | |
| 4 Dividends and interest from securities | | | 14 | 611,240. | |
| 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 | | | 14 | 125,355. | |
| 8 Gain or (loss) from sales of assets other | | | 1 | | |
| than inventory | | | 18 | 386,428. | |
| 9 Net income or (loss) from special events | | | | | ·_ · · · · · · · · · · · · · · · · · · |
| 10 Gross profit or (loss) from sales of inventory | | * | 1 | | |
| 11 Other revenue: | | | | | |
| a | _ | | 1 | | ·· |
| b | | | | | |
| c | _ | | | | |
| d | _ | | | | ······································ |
| e | _ | | + + | 1 170 705 | 0. |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0. | <u>. </u> | 1,179,795. | 1,179,795 |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 1,119,130 |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities | s to the Accon | nplishment of E | xempt I | Purposes | |
| Line No. Explain below how each activity for which in | | | A contribute | ed importantly to the accomp | plishment of |
| the foundation's exempt purposes (other that | an by providing fund | s for such purposes). | | | |
| N/A | | | | | |
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Form **990-PF** (2009)

THE MAXIMILIAN E. AND MARION O. HOFFMAN Form 990-PF (2009) 22-2648036 FOUNDATION, INC. Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 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? a Transfers from the reporting foundation to a noncharitable exempt organization of: Х (1) Cash 1a(1) (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) 1b(6) X (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market 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) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship

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

COMPANY, P.C.,

CT 06107

Signature of officer or trustee Preparer's Paid Preparer's Use Only signature

Firm's name (or yours

if self-employed), Z address, and ZIP code ILOMENO

WEST HARTFORD.

&

80 SOUTH MAIN STREET

PRESIDENT Date Title Date

Check if Preparer's identifying number selfemployed >

EIN ▶

Phone no.

860.561.0020 Form **990-PF** (2009)

CONTINUATION FOR 990-PF, PART IV 22-2648036 PAGE 1 OF 1

| Part IV | Capital Gains and Los | ses for Tax on Investment Income | | | | |
|--------------|-------------------------------|--|--|--|---|---------------------------------------|
| , | | describe the kind(s) of property solo | | (b) How acquired P - Purchase | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a GMO | SPECIAL SI | · | JU CHO THEO GOI | D - Donation | 1 , , ,,,, | VARIOUS |
| | ALTERNATIV | | | P | L | VARIOUS |
| | ALPHA ONLY | | | P | | 06/10/10 |
| | | INT'L EQUITY | | P | | 05/07/10 |
| | EMERGING M | | | P | | VARIOUS |
| | | QUITIES FUND | | P | | VARIOUS |
| | INT'L SMAL | | | P | | VARIOUS |
| | QUALITY FU | | | P | | VARIOUS |
| | SPEC SIT F | | | P | VARIOUS | VARIOUS |
| | ALTERNATIV | | | P | VARIOUS | VARIOUS |
| k GMO | INT'L SMAL | | - | P | VARIOUS | VARIOUS |
| 1 | 11(1 1 011111 | | | | | · · · · · · · · · · · · · · · · · · · |
| <u></u> | | | | | | |
| n | | | · · · · · · · · · · · · · · · · · · · | | | 1 |
| 0 | | | | | | |
| | | (f) Depreciation allowed | (g) Cost or other basis | |) Gain or (loss) | ' |
| (e) G | iross sales price | (or allowable) | plus expense of sale | | olus (f) minus (g) | |
| a | | · | 17,097. | | | -17,097. |
| b | 8,245. | | | | . | 8,245. |
| c | 425,355. | 117 | 897,412. | | | 472,057. |
| d | 370,000. | | 401,188. | | | -31,188. |
| e | 1,567,612. | | 1,327,450. | | | 240,162. |
| f | 535,000. | | 536,105. | | | -1,105. |
| g | 429,277. | · · · · · · · · · · · · · · · · · · · | 423,788. | • | | 5,489. |
| h | 4,233,017. | | 4,318,368. | ·· | | -85,351. |
| " | 340,000. | | 259,035. | - 11 - | | 80,965. |
| 1 | 9. | | | | | 9. |
| k | 2,271,220. | 3.45 | 1,612,864. | | | 658,356. |
| | ···· | ************************************** | | | | |
| m | | | | | | - |
| n | | | | · · · · · · | | |
| 0 | | | | | | |
| Complet | te only for assets showir | ng gain in column (h) and owned by | the foundation on 12/31/69 | (1) Lo | sses (from col. (h) |) |
| (i) F.M | I.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | Gains (excess but | of col. (h) gain ov not less than "-0-") | er col. (k), |
| 2 | | | | | | -17,097. |
| <u>a</u> | | | | | | 8,245. |
| | | | | | • | -472,057. |
| d d | | ······································ | | ***** | | -31,188. |
| e | | | · · · · · · · · · · · · · · · · · · · | | | 240,162. |
| f | | | - | | | -1,105. |
| | | | | | | 5,489. |
| g h | | | | , | , | -85,351. |
| 1 | | | | | | 80,965. |
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| | | | | | | |
| <u>n</u> | | | "- | | | . |
| 0 | . | <u></u> | | <u> </u> | | |
| 2 Capital g | ain net income or (net ca | apital loss) { If gain, also enter *- | r in Part I, line 7 0-" in Part I, line 7 | 2 | | 386,428. |
| 9 Netchor | t-term canital cain or (lo | ss) as defined in sections 1222(5) a | , I | | | |
| | ilso enter in Part I, line 8, | | πα (<i>υ).</i> | | | |
| | enter "-0-" in Part I. line | | J 1 | 3 | N/A | |

2009 DEPRECIATION AND AMORTIZATION REPORT

| FOR | 56 M | FORM 990-PF PAGE 1 | | | | | | 990-PF | | | | | | | |
|-------------|--------------------|---------------------------------------|------------------|--------|-------|-------|-----------------------------|------------------|------------------------|----------------------------|---------------------------|--|-------------------------------|---|---|
| | Asset No. | Description | Date Acquired | Method | Life | Soc> | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending ' Accumulated Depreciation |
| | 1 | FURNITURE & PIXTURES | 06/30/87 | ıs | 5.00 | HX16 | 17,627. | | | | 17,627. | 17,627. | | .0 | 17,627. |
| | 7 | FURNITURE & PIXTURES | 06/01/88 | SL | 5.00 | HX16 | 2,175. | | | | 2,175. | 2,175. | | 0 | 2,175. |
| | e . | OPPICE BQUIPMENT | 11/05/93 | SL | 5.00 | HY16 | 3,664. | | ; | | 3,664. | 3,631. | | • | 3,631. |
| | 4 | OPFICE EQUIPMENT & PURNITURE 09/01/94 | 09/01/94 | IS | 7.00 | HX16 | 21,022. | | | | 21,022. | 21,022. | | 0 | 21,022. |
| | S | OFFICE FURNITURE | 10/01/95 | SL | 7.00 | HX16 | 805. | | | | 805. | 805. | | 0 | 805. |
| · | | OFFICE RQUIPMENT | 08/11/99 | SL | 5.00 | HW16 | 995. | | | | 995. | 995. | | .0 | 995. |
| | 6 | OFFICE FURNITURE | 12/12/05 | SL | 7.00 | HX16 | 1,366. | | | | 1,366. | 669 | | 195. | 894. |
| | 10 | (D) DELL COMPUTER | 12/09/05 | SL | 5.00 | HX16 | 2,662. | • | | | 2,662. | 1,908. | | 399. | |
| | 11 | APPLE COMPUTER | 12/05/05 | IS | 5.00 | HX16 | 2,506. | , | | | 2,506. | 1,796. | | 501. | 2,297. |
| | 12 | XEROX WORKCENTER | 01/06/06 | SĽ | 5.00 | HX16 | 2,057. | | | | 2,057. | 1,439. | | 413. | 1,852. |
| | 13 | SOFTWARE | 03/12/07 | īs | 3.00 | ните | 725. | | | | 725. | 565. | | 160. | 725. |
| | 14 | IMAC COMPUTER | 11/02/07 | SL | 5.00 | 9 ТАН | 2,616. | | | | 2,616. | 872. | | 523. | 1,395. |
| | 15 | OFFICE RENOVATIONS | 05/14/09 150DB | 150DB | 15.00 | MQ1 7 | 2,523. | | | 1,262. | 1,261. | 16. | | 125. | 141. |
| <u>-</u> | 16 | OFFICE CHAIR-MICHAEL | 07/12/09 | 20008 | 7.00 | MQ190 | 1,264. | | | 632. | 632. | | _ | 790. | 158. |
| | 17 | ACER PC COMPUTER | 12/31/09 | 20008 | 5.00 | ж019в | 1,127. | | | 564. | 563. | | | 592. | 28. |
| ··· | 19 | OFFICE SQUIPMENT | 04/01/99 | SL | 7.00 | 9 TAH | 1,478. | | | | 1,478. | 1,467. | | 0 | 1,467. |
| | | * TOTAL 990-PF PG 1 DEPR | | | - | | 64,612. | | | 2,458. | 62,154. | 55,017. | | 3,698. | 55,212. |
| | | | | | | | | - | | | | | | | |
| 928 04-2 | 928111 04-24-09 | | | | | | (D) - Asset disposed | pesoc | | • | ITC, Salvage, | Bonus, Comn | nercial Revita | * ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone | tion, GO Zone |

11

| FORM 990-PF INTEREST ON SAVINGS AN | D TEMPORARY CA | ASH I | INVESTMENTS | STATEMENT | 1 |
|--|----------------|--------------|---------------------------------------|---------------------|-----|
| SOURCE | | | | AMOUNT | |
| BANK OF AMERICA CD | • | | - | 36,0 | |
| BANK OF AMERICA CHECKING | | | | | 91. |
| BANK OF AMERICA MMKT FUND INTEREST FROM SPECIAL SITUATIONS K- | 1 | | | 3,93 16,5 | |
| TOTAL TO FORM 990-PF, PART I, LINE | | | - | 56,7 | 72. |
| FORM 990-PF DIVIDENDS AND | INTEREST FROM | SECT | JRITIES | STATEMENT | 2 |
| | <u> </u> | | | COLUMN /A | |
| SOURCE | GROSS AMOUNT | | PITAL GAINS DIVIDENDS | COLUMN (A AMOUNT | , |
| GMO | 512,263. | | 0. | 512,2 | 63. |
| GMO K-1 ALTERNATIVE ASSETS | 5,214. | | 0. | 5,2 | |
| GMO K-1 SPECIAL SITUATIONS | 515. | | 0. | | 15. |
| VANGUARD | 93,248. | | 0. | 93,2 | 48. |
| TOTAL TO FM 990-PF, PART I, LN 4 | 611,240. | | 0. | 611,2 | 40. |
| | | | · · · · · · · · · · · · · · · · · · · | | |
| FORM 990-PF OT | HER INCOME | | | STATEMENT | 3 |
| | . (A) | | (B) | (C) | |
| | REVENUE | | NET INVEST- | | D |
| DESCRIPTION | PER BOOK | S | MENT INCOME | | |
| SWAP INC FROM K-1 | 3, | 517. | 3,517 | | |
| SEC 988 GAIN FROM K-1 | | 26. | 26 | | |
| MSF ORDINARY EARNINGS | | 853. | 37,853 43,687 | | |
| SUB PART F INC FROM K-1 FED'L INC TAX REFUND | | 687. 272. | 43,687 40,272 | | |
| TOTAL TO FORM 990-PF, PART I, LINE | 11 125, | 355. | 125,355 | • | |
| | | | | | |

| FORM 990-PF | LEGAL | FEES | Si | TATEMENT | 4 |
|---|------------------------------|-----------------------------------|-------------------------------|----------------------------|----------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITAE PURPOSE | |
| JASPAN, SCHLESINGER, HOFFMAN GREER BENEFIT CONSULTANTS, | 130,300. | 130,300. | | | 0. |
| INC FROM ALT ASSETS K-1 | 2,000. 713. | 2,000. 713. | | | 0. 0. |
| TO FM 990-PF, PG 1, LN 16A | 133,013. | 133,013. | | | 0. |
| FORM 990-PF | ACCOUNTI | NG FEES | S | TATEMENT | 5 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITAE PURPOSE | |
| FILOMENO & CO | 17,400. | 17,400. | | | 0. |
| TO FORM 990-PF, PG 1, LN 16B | 17,400. | 17,400. | | | 0. |
| FORM 990-PF C | THER PROFES | SIONAL FEES | S | TATEMENT | 6 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITAE PURPOSE | |
| BANK & CUSTODIAL FEES | 29,106. | 29,106. | | | 0. |
| - | | | | | 0. |

| FORM 990-PF | XAT | es | | STATEMENT 7 |
|--|--|--------------------------------------|--|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOM | |
| PAYROLL TAXES STATE FILING TAXES TAXES - OTHER | 26,301. 1,500. 53,613. | 0. | | 11,038. 0. 0. |
| TO FORM 990-PF, PG 1, LN 18 | 81,414. | 68,876. | | 11,038. |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT 8 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOM | |
| INSURANCE TRUSTEE EXPENSES OFFICE EXPENSE TELEPHONE SECURITY GUARD EXPENSE NET LOSS FROM ASSET DISPOSAL NJ REAL ESTATE EXPENSES | 27,645. 3,804. 5,760. 1,238. 938. 355. 16,000. | 0. 839. 1,238. 938. 355. | | 8,083. 3,804. 0. 0. 0. |
| TO FORM 990-PF, PG 1, LN 23 | 55,740. | | | 11,887. |
| FORM 990-PF | CORPORAT | E STOCK | | STATEMENT 9 |
| DESCRIPTION | | во | OK VALUE | FAIR MARKET VALUE |
| ALPHA ONLY ALTERNATIVE ASSET OPP EMERGING COUNTRY DEBT EMERGING MARKETS FLEXIBLE EQUITIES INT'L SMALL COMPANIES SPECIAL SITUATIONS STRATEGIC FIXED INCOME QUALITY EQUITY TOTAL BOND MARKET ADMIRAL TREASURY MM FUND INFL-PROT SEC FUND CURR HEDGE INT'L EQ | | 1 | 1,288,558. 466,967. 905,226. 3,174,345. 1,051,895. 0. 1,418,923. 8,964,485. 1,068,752. 990,673. 3,500,000. 1,967,807. 4,412,056. | 8,305,709. 501,195. 713,887. 3,710,143. 931,385. 0. 1,598,509. 7,786,362. 9,845,416. 1,013,455. 3,500,000. 2,074,606. 4,095,105. |

| FORM 990-PF OT | HER INVESTMENTS | | STATEMENT 10 |
|---|-------------------------------|-----------------------------|------------------------|
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| GMO MULTI STRATEGY HEDGE FUND PARTNERSHIP OUTSIDE COST BASIS | COST COST | 8,566,097. 577,804. | 9,441,660. 577,804. |
| TOTAL TO FORM 990-PF, PART II, LI | NE 13 | 9,143,901. | 10,019,464. |
| FORM 990-PF DEPRECIATION OF ASS | ETS NOT HELD FOR | INVESTMENT | STATEMENT 11 |
| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE |
| FURNITURE & FIXTURES | 17,627. | 17,627. | 0. |
| FURNITURE & FIXTURES | 2,175. | 2,175. | 0. |
| OFFICE EQUIPMENT | 3,664. | 3,631. | 33. 0. |
| OFFICE EQUIPMENT & FURNITURE | 21,022. 805. | 21,022. 805. | 0. |
| OFFICE FURNITURE OFFICE EQUIPMENT | 995. | 995. | 0. |
| OFFICE EQUIPMENT OFFICE FURNITURE | 1,366. | 894. | 472. |
| APPLE COMPUTER | 2,506. | 2,297. | 209. |
| XEROX WORKCENTER | 2,057. | 1,852. | 205. |
| SOFTWARE | 725. | 725. | 0. |
| IMAC COMPUTER | 2,616. | 1,395. | 1,221. |
| OFFICE RENOVATIONS | 2,523. | 1,403. | 1,120. |
| OFFICE CHAIR-MICHAEL | 1,264. | 790. | 474. |
| ACER PC COMPUTER | 1,127. | 592. | 535. |
| OFFICE EQUIPMENT | 1,478. | 1,467. | 11. |
| TOTAL TO FM 990-PF, PART II, LN 1 | 61,950. | 57,670. | 4,280. |
| FORM 990-PF | OTHER ASSETS | | STATEMENT 12 |
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET VALUE |
| SECURITY DEPOSIT | 4,350. | 4,350. | 4,350. |
| DUE FROM LANDLORD | 28,223. | 0. | 0. |
| TO FORM 990-PF, PART II, LINE 15 | 32,573. | 4,350. | 4,350. |
| | | | |

STATEMENT 13

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

| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | EXPENSE |
|--|--------------------------|-------------------|---------------------------------|---------|
| ROBERT M. JERESATY, M.D. 36 LAKEVIEW DRIVE WEST HARTFORD, CT 06117 | DIRECTOR 2.00 | 10,000. | 0. | 0. |
| MARIE GUSTIN, PHD 365 SHUTTLEMEADOW AVENUE NEW BRITAIN, CT 06052 | DIRECTOR 2.00 | 10,000. | 0. | 0 . |
| JOSEPH J. FAULISO 998 PROSPECT AVENUE HARTFORD, CT 061051126 | DIRECTOR 2.00 | 10,000. | 0. | 0 |
| MICHAEL B. CHAHO 60 EDDY STREET AVON, CT 06001 | TREASURER | 94,692. | 14,231. | 18,707 |
| JOSEPH B. CHAHO 8 PORTER DRIVE WEST HARTFORD, CT 06117 | V. PRES./SECRE 40.00 | ETARY 81,800. | 12,270. | 5,615 |
| MARION L. BARRAK 66 EDDY STREET AVON, CT 06001 | PRESIDENT/DIRE 40.00 | ECTOR 118,800. | 17,820. | 18,758 |
| TOTALS INCLUDED ON 990-PF, PAG | GE 6, PART VIII | 325,292. | 44,321. | 43,080 |

| FORM 990-T | INCOME | (LOSS) | FROM | PARTNERSHIPS | STATEMENT | 14 |
|-------------------------|----------|--------|------|--------------|-----------|-----|
| DESCRIPTION | | | | | AMOUNT | |
| GMO SPECIAL SITUATIONS | | | | | 2,4 | 56. |
| TOTAL TO FORM 990-T, P. | AGE 1, L | INE 5 | | | 2,4 | 56. |

4562

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization 990-PF

(Including Information on Listed Property)

► See separate instructions.

Attach to your tax return.

Business or activity to which this form relates

2009 Attachment

Attachment Sequence No. 67

THE MAXIMILIAN E. AND MARION O. HOFFMAN 22-2648036 FORM 990-PF PAGE 1 FOUNDATION, INC. Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 250,000. Maximum amount. See the instructions for a higher limit for certain businesses 2 2 Total cost of section 179 property placed in service (see instructions) 800,000. 3 3 Threshold cost of section 179 property before reduction in limitation Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions (c) Elected cost (a) Description of property (b) Cost (business use only) 6 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 1,196. the tax year 15 15 Property subject to section 168(f)(1) election 2,191. 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) 125. 17 MACRS deductions for assets placed in service in tax years beginning before 2009 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (a) Depreciation deduction (a) Classification of property year placed in service (business/investment use only - see instructions) 3-year property 19a 200DB 28. 563. 5 YRS. MQ 5-year property 200DB 158. 632. YRS. MO 7-year property c 10-year property d 15-year property e f 20-year property 25 yrs. S/L 25-year property MM S/L 27.5 yrs. h Residential rental property MM S/L 1 27.5 yrs. MM S/L 39 yrs. i Nonresidential real property S/L Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L ь 12-year 12 yrs. ММ S/L 40-year 40 yrs. Part IV | Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 3,698. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 916251 11-04-09 LHA For Paperwork Reduction Act Notice, see separate instructions. Form 4562 (2009) FOUNDATION, INC.

22-2648036 Page 2

| secretion, or smusement, Notes for any evaluate for all principly you are using the standard minage, rate or deducting base expense, complete only 24e, 24b, columns (a) Notes of the grant of the process of the proces | Part V | Listed Propert | | | rtain oth | er vehicl | es, cell | ular telej | phone | s, certain (| compute | rs, and p | oroperty | used for | entertai | nment, |
|--|-----------|----------------------|-------------------------------|-----------------|----------------|-----------------------|-------------|----------------|--|---|----------------|--|---------------------------------------|---------------|-------------|--|
| Section A. Depreciation and Other Information (Caution) See the instructions for limits for passenger automobiles) Net Duy to have enferred to support the business/investment use claimed? | , | recreation, or a | imusement.) vehicle for wi | hich vou ane u | sina the s | standard | mileac | e rate or | dedu | ctina lease | expens | e. comp | leteonly | 24a. 24l | o. column | ns (a) |
| 26. By by these exidence to support the business/investment use claimed? Yes No 24b if Yes, is the avidence written? Yes No 10 to 10 | | through (c) of S | Section A, all | of Section B, | and Sec | tion C if a | applica | ble. | | | | | | | , | |
| table to the community of the community | | | | | | | ution: | See the i | instruc | tions for li | mits for j | passeng | er autom | obiles) | | |
| Type of groperty (list whickes 1) placed a green green property of the state of green property of green of the state of th | 24a Do yo | u have evidence to s | support the bu | siness/investme | nt use cla | ımed? | <u> </u> | es L | _ No | 24b If "Y | es," is th | e evider | ce writte | en? 🖳 | | |
| growth programment of the placed in switchment with primarily and the basis of the | _ | (a) | | | | | | | ecution | | | | | | | |
| 25 Special depreciation allowance for qualified steads or property placed in service during the tax year and used more than 50% in a qualified business use. 26 Property used more than 50% in a qualified business use. 27 Property used 50% or less in a qualified business use. 28 Property used 50% or less in a qualified business use: 28 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 20 Property used 50% or less in a qualified business use: 20 Property used 50% or less in a qualified business use: 21 Property used 50% or less in a qualified business use: 22 Property used 50% or less in a qualified business use: 23 Property used 50% or less in a qualified business use: 24 Add amounts in column (i), lines 25 through 27. Enter here and on leg 21, page 1 25 Section 8 Information on line 27, page 1 26 Section 8 Information on line 27, page 1 27 Property used 50% or less in a qualified business use: 28 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: 29 Property used 50% or less in a qualified business use: | | | | investment | Oth Oth | | | siness/inve | stment | | | | | | | |
| used more than 50% in a qualified business use: 28 Property used more than 50% in a qualified business use: 28 96 96 96 97 98 98 98 98 98 98 98 | (1131.4 | emolos mac j | service | use percenta | ge ou | ici Dasis | | use only | <u>'</u> - | 1 | | | | | COS | <u></u> - |
| Property used more than 50% in a qualified business use: 15 | 25 Specia | al depreciation allo | owance for q | ualified listed | property | placed i | n servi | ce dunng | g the t | ax year an | d | | | | | |
| Section Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. | | | | | <u> </u> | | <u> </u> | | <u></u> | | | 25_ | | | | |
| Section Sect | 26 Prope | rty used more tha | n 50% in a c | ualified busin | ess use: | | | | | | | | | | | |
| St. | | | | | | | _ | | | | <u> </u> | | | | | |
| Property used 50% or less in a qualified business use: | | | | | | | | _ | | | | | | - | | |
| SAL | | | | | - 1 | | ļ | | | <u>l </u> | <u> </u> | | | : | | |
| 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 21, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 21, page 1 29 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 20 Add amounts in column (h), lines 26. Enter here and on line 21, page 1 20 Add amounts in column (h), lines 26. Enter here and on line 21, page 1 20 Add amounts in column (h), lines 26. Enter here and on line 21, page 1 20 (d) (e) (f) (g) (h) (e) (d) (e) (f) (h) (e) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h | 27 Prope | rty used 50% or le | ess in a qual | fied business | use: | | | | | | T | | | | | |
| 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (h), lines 25. Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other frome than 5% owner, or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (e) (d) (e) (f) Vehicle V | | | <u> </u> | | | | _ | | | | · | | | | | |
| 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Acd amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Enter here and on line 7, page 1 29 Acd amounts in column (h), lines 26. Enter here and on line 7, page 1 29 Enter here and on line 7, page 1 29 Enter here and on line 7, page 1 29 Enter here and on line 7, page 1 29 Enter here and on line 7, page 1 29 Enter here and on line 7, page 1 29 Enter here and on line 7, page 1 20 Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owners" or related person. 20 Total business/investment miles driven during the year. 20 Total business/investment miles driven during the year. 20 Total ordinating miles driven during the year. 21 Total ordinating here year. 22 Total other personal (uncommuting miles driven during the year. 23 Was the vehicle available for personal use during off-duty hours? 24 Was the vehicle available for personal use during off-duty hours? 25 Was the vehicle available for personal use during off-duty hours? 26 Was the vehicle available for personal use of vehicles in the page 2 pa | | | | | _ | | _ | | | - | t | | | | | |
| Section B - Information on Use of Vehicles Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. 30 Total business/investment miles driven during the year (a) (b) (c) (d) (e) (f) Vehicle | | | | | <u> </u> | | <u> </u> | | | L | S/L · | - T | | | | |
| Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) (e) (f) Total business/investment miles driven during the year (do not include commuting miles) 30 Total niles driven during the year (as Total other personal (noncommuting) miles driven during the year (Add lines 30 through 32. 31 Total other personal (noncommuting) miles driven during the year (Add lines 30 through 32. 34 Was the vehicle used primarily by a more than 5% owner or related person? 35 Was the vehicle available for personal use (as a commercial person) 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than few evhicles to your employees obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you owned the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," on not complete Section B for the covered vehicles. Part VI Amortization Code Amortization of costs that begins during your 2009 tax year. | | | | _ | | | | , page 1 | | | | 28 | L | _ | | |
| Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) (e) (f) Vehicle | 29 Add a | mounts in column | ı (i), line 26. E | Inter here and | on line 7 | ⁷ , page 1 | <u> </u> | <u></u> | | | | | <u> </u> | 29 | | |
| If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) (e) (f) | | | | | | | | | | | | | | | | |
| those vehicles. (a) (b) (c) (d) (e) (f) Vehicle Vehic | Complete | this section for ve | ehicles used | by a sole prop | orietor, p | artner, o | r other | "more th | nan 5% | 6 owner," · | or related | d persor |), | Alexa - | | _ |
| Total commuting miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year (and one tinclude commuting miles) 32 Total other personal (noncommuting) miles driven during the year. Add lines 30 through 32. 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? 37 Do you maintain a written policy statement that prohibits personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 39 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 39 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 40 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI Amortization (a) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d | | - | your employe | ees, first answ | er the qu | estions | ın Sect | ion C to | see IT | you meet | an excer | στιοπ το σ | completii | ng this s | ection to | ır |
| Total business/investment miles driven during the year (do not include commuting miles) 1 Total commuting miles driven during the year 22 Total other personal (inoncommuting) miles driven 32 Total other personal (inoncommuting) miles driven during the year. Add lines 30 through 32 | those ven | icies. | | | i . | , | | | 1 | | | | | <u> </u> | | |
| year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32. 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Was the vehicle available for personal use during off-duty hours? 37 Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles. Part VI Amortization of costs that begins during your 2009 tax year. 42 Amortization of costs that began before your 2009 tax year. 43 Amortization of costs that began before your 2009 tax year. 44 Total. Add amounts in column (f). See the instructions for where to report. | | _ | | | 1 | | | | Ι. | | | • | | · . | | |
| 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven during the year. Add lines 30 through 32. 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 40 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI Amortization of costs that begins during your 2009 tax year. 43 Amortization of costs that began before your 2009 tax year. 44 Total. Add amounts in column (f), See the instructions for where to report. | | | | luring the | Veh | iicle | Ve | hicle | <u> </u> | Vehicle | Ver | nicle | Veh | licle | Veni | cie |
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GRANT LIST 2010 TOTAL OF GRANTS APPROVED TO DATE: \$2,858,000 MINIMUM DISTRIBUTION: \$2,840,601

| 1) Multi -year •••• 6 of 9 | THE CONNECTICUT CENTER FOR SCIENCE AND EXPLORATION 50 Columbus Boulevard. Suite 500, Hartford, Connecticut, 06106. (Funding for the Capital Campaign.) Ref. 080/05. Contact: Ron Katz, Director of Development Approved: 5/17/05. 5 grants: \$200,000; May 20, 2008: 4 grants: \$250,000 Implemented: 6/1/10 CK # 4418 \$250,000 # 6 of 9 | \$250,000 6 of 9 |
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| 2) Multi -year 4 of 5 & 5 of 5 | AVON OLD FARMS SCHOOL 500 Avon Old Farms Road, Avon, Connecticut, 06001. (Funding to support the Performing Arts Department.) Ref. 011/07 Contact: Peter Evans, Dean, Director of Development. Approved: October 24, 2007. Implemented: 1/06/10 CK # 4297 \$40,000 # 4 of 5 CK # 4447 \$40,000 # 5 of 5 Implemented: 6/11/10 | \$40,000 4 of 5 \$40,000 5 of 5 |
| 3) Multi -year 4 of 5 & 5 of 5 | FRIENDSHIP SERVICE CENTER, INC., PO BOX 1896, New Britain, Connecticut, 06050-1896 (Funding for their capital campaign.) Ref. 018/07. Contact: Ellen Perkins Simpson, Executive Director. Approved: October 24, 2006. Implemented: 6/1/10 CK # 4419 \$20,000 (2 payments) # 4 of 5 &# 5 of 5</td><td>\$20,000 4 of 5 & 5 of 5</td></tr><tr><td>4) Multi -year 3 of 5 & 4 of 5</td><td>HOLY APOSTLES COLLEGE 33 Prospect Hill Road, Cromwell, Connecticut, 06416 (Funding for their capital campaign.) Ref. 004/08 Contact: Rev. Douglas L. Mosey, C.S.B Approved: October 30, 2007. Implemented: 6/3/10 CK # 4432 \$100,000 (2 payments): # 3 of 5 & # 4 of 5</td><td>\$100,000 3 of 5 & 4 of 5</td></tr><tr><td>5) Multi -year 3 of 3</td><td>ST. BARSAWMO CHURCH 495 Mac Kay Avenue, Oradell, New Jersey (Funding to help construct a new church.) Ref. 005/07 Contact: Dave Judy, Director of Development. Approved: October 30, 2007. Implemented: 5/13/2010 CK # 4399 # 3 of 3 \$75,000</td><td>\$75,000 3 of 3</td></tr><tr><td>6) Multi -year 2 of 4</td><td>ARCHDIOCESE OF THE SYRIAN ORTHODOX CHURCH FOR THE EASTERN UNITED STATES, 260 Elm Street, Teaneck, NJ 07666 (Funding for the Archdiocesan Center.) Ref. 001/09 Contact: Archbishop Mor Cyril Aphrem Karim. Approved: October 22, 2008. Implemented: 5/24/2010 CK # 4408 \$75,000 # 2 of 4</td><td>\$75,000 2 of 3</td></tr></tbody></table> | |

| 7) Multi -year 2 of 6 | SAINT FRANCIS HOSPITAL AND MEDICAL 114 Woodland Street, Hartford, Connecticut, 06105-1299 (Funding for the new Hoffman Foundation Emergency Room.) Ref. 019/09 Contact: Christopher Dadlez, President. Approved: October 22, 2008. Implemented: 6/15/10 CK # 4454 \$250,000 # 2 of 6 | \$250,000 2 of 6 |
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| 8) Multi -year 2 of 2 | MERCY HOUSING AND SHELTER, INC., 211 Wethersfield Ave., Hartford, Connecticut, 06114 (General support.) Ref. 032/09 Contact: Sister Patricia McKeon, Executive Director Approved: October 22, 2008. Implemented: 6/3/10 CK # 4431 # 2 of 2 | \$25,000 2 of 2 |
| 9) Multi -year 2 of 2 | MALTA HOUSE OF CARE, FOUNDATION, INC., 99 Pratt Street, Third Floor, Hartford, Connecticut, 06103 (Funding for Healthcare for the uninsured.) Contact: Barbara Bertucca, Director of Philanthropy. Approved: October 22, 2008. Implemented: 1/12/10 CK # 4305 \$50,000 # 2 of 2 | \$50,000 2 of 2 |
| 10) Multi –year grant 2 of 2 | PROVIDENCE COLLEGE 549 River Avenue, Providence, Rhode Island, 02981-0001 (Support for scholarships.) Ref. 051/09 Contact: Jackie M. Nowell, Director, Corporate and Foundation Relations. Approved: February 4, 2009. Implemented: 5/24/2010 CK # 4409 #2 of 2 \$125,000 | \$125,000 2 of 2 |
| 11) Multi –year grant 2 of 2 | THE YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF NEW BRITAIN 22 Glen Street, PO BOX 2545, New Britain, Connecticut, 06050-2545 (Support for Mayor's Work plan to end homelessness). Ref. 049/09 Contact: Robin Sharp, Executive Director. Approved: February 04, 2009. Implemented: 5/13/2010 CK # 4400 2 of 2 \$30,000 | \$30,000 2 of 2 |
| 12) Multi –year 1 of 4 | ARCHDIOCESE OF HARTFORD, 134 Farmington Avenue, Hartford, Connecticut, 06105 (Support for the Campaign for The Cathedral of Saint Joseph & Saint Thomas Seminary). Ref. 025/10 Contact: Bishop Henry Mansell. Approved: October 28, 2009. Implemented: 12/3/09 CK # 4259 1 of 4 \$100,000 | \$100,000 #1 of 4 |
| 13) Multi -year 1 of 2 & 2 of 2 | SALK INSTITUTE FOR BIOLOGICAL STUDIES 10010 North Torrey Pines Rd. La Jolla, California (Funding for Hoffman fellows). Ref. 001/10 Contact: Amy Fouts-Wampler, Associate Director, Foundation Relations. Approved: October 28, 2009. Implemented: 12/9/09 CK # 4243 \$50,000 # 1 of 2 CK # 4433 \$50,000 # 2 of 2, Implemented: 6/3/10 | \$50,000 # 1 of 2 & \$50,000 2 of 2 |

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| 14) | SACRED HEART SCHOOL 58 Hunters Ave., Taftville, Connecticut, 06380 (Funding to help purchase furniture and educational supplies.) Ref. 002/10 Contact: Sister Mary David, SCMC, Principal. Approved: October 28, 2009. Implemented: 12/01/09 CK# 4244 \$5,000 | \$5,000 |
| 15) | DISCOVERY CENTER, 790 Farmington Avenue, Suite 4A, Farmington, Connecticut, 06032 (Funding for the educational diversity program.) Ref. 003/10 Contact: Allen Wilson, Executive Director. Approved: October 22, 2008. Implemented: 12/2/08 CK # 4245 \$5,000 | \$5,000 |
| 16) | NATIONAL THEATRE OF THE DEAF, INC., 139 North Main Street, West Hartford, Connecticut, 06107 (Funding for their production fund.) Ref. 004/10 Contact: Aaron Kubey, Executive Director & President. Approved: October 28, 2009. Implemented: 1/04/10 CK # 4292 \$5,000 | \$5,000 |
| 17) | ST. JAMES SCHOOL 36 Perimeter Road, Manchester, Connecticut, 06096 (General support funding.) Ref. 005/10 Contact: Rev. Kevin Cavanaugh, Pastor Approved: October 28, 2009. Implemented: 12/1/09 CK# 4246 \$5,000 | \$5,000 |
| 18) | READ TO GROW, INC., 53 School Ground Road, Unit 3, Branford, Connecticut, 06405 (Funding for literacy packets for children.) Ref. 007/10 Contact: Suzanne Santangelo, Executive Director. Approved: October 28, 2009. Implemented: 12/01/09 CK # 4247 \$5,000 | \$5,000 |
| 19) | HARC, INC., 900 Asylum Street, Hartford, Connecticut, 06109 (Support for year- round recreational program.) Ref. 008/10 Contact: Stephen Becker, Ed. D., President/CEO Approved: October 28, 2009. Implemented: 12/2/09 CK # 4249 \$5,000 | \$5,000 |
| 20) | DE LA SALLE ACADEMY 202 West 97 th street, New York, New York, 10025 (Scholarship funding.) Ref. 009/10 Contact: Brother Brian Carty, FSC Approved: October 28, 2009. Implemented: 1/27/10 CK# 4310 \$5,000 | \$5,000 |

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| 21) | CHARLOTTE HUNGERFORD HOSPITAL 540 Litchfield St., PO BOX 988, Torrington, Connecticut, 0679 (Funding for a Patient Care Support Network.) Ref. 010/10 Contact: Daniel J. McIntyre, CEO. Approved: October 28, 2009. Implemented: 12/1/09 CK # 4248 \$ 25,000 | \$25,000 |
|-------------|--|-----------|
| 22) | UNIVERSITY OF HARTFORD, 200 Bloomfield Ave., West Hartford, Connecticut, 06117 (Support for the Arabic Language& Culture Program.) Ref. 013/10 Contact: Walter Harrison, President. Approved: October 28, 2009. Implemented: 12/2/09 CK # 4250 \$50,000 | \$50,000 |
| 23) | SISTERS OF CHARITY OUR LADY MOTHER CHURCH 54 West Main St., PO BOX 691, Baltic, CT., 06330 (To help replace two old boilers/furnaces.) Ref. 014/10 Contact: Mother Anthony, Superior General. Approved: October 28, 2009. Implemented: 12/02/09 CK # 4251 \$12,000 | \$12,000 |
| 24) | CONNECTICUT COMMUNITY CARE, INC., 43 Enterprise Dr. Bristol, Connecticut, 06010 (to support services to low-income families caring for Alzheimer's/ Dementia family members.) Ref. 015/10 Contact: Judith Green, Director of Development & Marketing. Approved: October 28, 2009. Implemented: 12/3/09 CK # 4255 \$5,000 | \$5,000 |
| 25) | BAY PATH COLLEGE 588 Longmeadow Street, Longmeadow, MASS., 01106 (Scholarship support.) Ref. 017/10 Contact: Carol A., Leary, Ph.D. Approved: October 28, 2009. Implemented: 1/04/10 CK # 4286 \$25,000 | \$25,000 |
| 29) | JUNIOR ACHIEVEMENT OF SOUTHWEST NEW ENGLAND, INC., 11 Asylum Street, Hartford, Connecticut, 06103 (For program materials and volunteer training.) Ref. 019/10 Contact: Harvey M. Talmadge, Executive Director. Approved: October 28, 2010. Implemented: 12/2/10 CK # 4252 \$5,000 | \$5,000 |
| <i>30</i>) | HOSPITAL FOR SPECIAL CARE, 2150 Corbin Avenue, New Britain, Connecticut, 06053 (Renovation of Outpatient Center building.) Ref. 020/10 Contact: Dr. John Votto, President. Approved: October 28, 2010. Implemented: 12/2/10 CK # 4253 \$5,000 | \$500,000 |

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| 31) | REAL ART WAYS, 56 Arbor Street, Hartford, Connecticut, 06106 (For education programs.) Ref. 021/10 Contact: John A. Wilkins, Executive Director. Approved: October 28, 2009. Implemented: 12/03/09 CK # 4256 \$5,000 | \$5,000 |
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| 32) | MARC COMMUNITY RESOURCES, LTD., 12 Fairview Street, PO BOX 126, Portland, Connecticut, 06480. (Support for the Saturday for Kids program.) Ref. 022/10 Contact: Maryanne Steele, Director of Development. Approved: October 22, 2008. Implemented: 12/3/08 CK # 4257 \$5,000 | \$5,000 |
| 33) | LITERACY VOLUNTEERS OF CENTRAL CT., INC., 20 High Street, 3rd Floor, New Britain, Connecticut, Ref. 023/10 Contact: Darlene S. Hurtado, Executive Director. Approved: October 28, 2010. Implemented: 1/06/10 CK # 4258 \$5,000 | \$5,000 |
| 34) | BRISTOL HOSPITAL INCORPORATED, PO BOX 977, Bristol, Connecticut, 0601-0977 (Support to help create a Breast Health Center.) Ref. 024/10 Contact: Kurt G. Barwis, CEO. Approved: October 28, 2009. Implemented: 1/6/10 CK # 4298 \$5,000 | \$50,000 |
| 35) | OUR LADY OF MOUNT CARMEL SCHOOL, 115 Lewis Avenue, Meriden, Connecticut, 06450 (Support for a playground at the school.) Contact: Norine McDermott, Principal. Approved: October 28, 2010. Implemented: 12/8/10 CK # 4264 \$10,000 | \$10,000 |
| 36) | COVENANT TO CARE, INC., 120 Mountain Avenue, Suite 212, Bloomfield, Connecticut, 06002 (Support for Mentoring program.) Ref. 028/10 Contact: Carl J. Hallberg, Executive Director Approved: October 28, 2009. Implemented: 12/8/09 CK # 4265 \$5,000 | \$5,000 |
| | OUR PIECE OF THE PIE, INC., 20- 28 Sargeant Street, Hartford, Connecticut, 06105 (Support for the "Pathways to Success" program.) Contact: Bob Rath, President/CEO Ref. 029/10 Approved: October 28, 2009. Implemented: 12/8/09 CK # 4266 \$5,000 | \$5,000 |
| 38) | VOLUNTEERS IN PSYCHOTHERAPY, INC., 7 South Main Street, West Hartford, Connecticut, 06107 (Support for therapy sessions.) Contact: Richard Shulman, Ph. D. Psychologist/Director. Approved: October 28, 2010. Implemented: 12/8/2009 CK # 4267 \$10,000 | \$10,000 |

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| 39) | HARTFORD INTERVAL HOUSE, INC., PO BOX 340207, Hartford, Connecticut, 06134 (Support for the Community & Volunteer Education Program.) Contact: Cecile Enrico, Executive Director. Ref. 033/10 Approved: October 28, 2009. Implemented: 1/27/10 CK# 4309 \$25,000 | \$25,000 |
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| 40) | BOYS & GIRLS VILLAGE, INC., 528 Wheeler Farms Road, Milford, Connecticut, 06461-1874 (Funding for increased psychiatric treatment to clients.) Contact: Chester J. Brodnicki, LCSW, Interim Chief Executive Officer. Ref. 034/10 Approved: October 28, 2009. Implemented: 12/8/2009 CK # 4268 \$5,000 | \$5,000 |
| 41) | SHORELINE ARTS ALLIANCE, INC. 725 Boston Post Road, Guilford, Connecticut, 06437 (Support for 2010 Shakespeare on the Shoreline.) Contact: Evelyn Atreya, CEO/Executive Director. Approved: October 28, 2009. Implemented: 1/04/10 CK # 4287 \$5,000 | \$5,000 |
| 42) | CONNECTICUT CHORAL ARTISTS, INC., 233 Pearl Street, Box 19, Hartford, Connecticut, 06103 (Support for the 2009-2010 concert series.) Ref. 036/10 Contact: Laura Oliver, Executive Director. Approved: October 28, 2009. Implemented: 1/4/10 CK # 4289 \$7,500 | \$7,500 |
| 43) | CHARTER OAK HEALTH CENTER, 21 Grand Street, Hartford, Connecticut, 06106 (General support.) Ref. 037/10 Contact: Alfreda T. Turner, President & CEO. Approved: October 28, 2009. Implemented: 1/4/2010 CK # 4291 \$10,000 | \$10,000 |
| 44) | THE CHILDREN'S MUSEUM 950 Trout Brook Drive, West Hartford, Connecticut, 06119-1437 (To help purchase a 5 year license for One World, One Sky.) Ref. 038/10 Contact: Kevin B. Sullivan, President & CEO. Approved: October 28, 2009. Implemented: 1/4/10 CK # 4290 \$10,000 | \$10,000 |
| 45) | FULL FORCE DANCE THEATRE, INC., 3 Finger Lane, West Hartford, Connecticut, 06107 (General support.) Contact: Lisa Mahoney, President, Board of Directors. Approved: October 28, 2009. Implemented: 1/6/10 CK # 4300 \$10,000 | \$10,000 |

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| 46) | HARTFORD SYMPHONY ORCHESTRA, INC., 99 Pratt Street, Suite 500, Hartford, Connecticut, 06103-1629 (Support for 2009-2010 Masterworks series.) Ref. 040/10 Contact: Kristen M. Phillips, Executive Director. Approved: October 28, 2009. Implemented: 1/4/10 CK# 4288 \$25,000 | \$25,000 |
|-------------|---|----------|
| 47) | YOUTH UNITED FOR SURVIVAL, PO BOX 261140, Hartford, Connecticut, 06126-1140. (Support for the Better Horizons program.) Contact: Louis J. Gilbert, Executive Director. Approved: October 28, 2009. Implemented: 1/6/10 CK# 4299 \$5,000 | \$5,000 |
| 48) | NATIONAL ALLIANCE ON MENTAL ILLNESS OF CONNECTICUT, INC. 241 Main Street, 5 th Floor, Hartford, Connecticut, 06106 (Support for Parents & Teachers as Allies Initiative.) Ref. 044/10 Contact: Kate Matthias, MPH, JD, Executive Director. Approved: January 22, 2010. Implemented: 3/31/09 CK# 4050 \$5,000 | \$5,000 |
| <i>49</i>) | SAINT PHILIP CHURCH, 1Father Conlon Place, Norwalk, Connecticut, 06851-3897. (To help restore the Georgian Mansion on parish grounds.) Ref. 045/10 Contact: Rev. Michael A. Boccaccio, Pastor. Approved: January 22, 2010. Implemented: 3/2/10 CK# 4347 \$25,000 | \$25,000 |
| 50) | HOLE IN THE WALL GANG FUND, INC., 555 Long Wharf Drive, New Haven, Connecticut, 06511. (Support for the music program.) Ref. 046/10 Contact: James H. Canton, CEO. Approved: January 22, 2010. Implemented: 3/1/10 CK# 4339 \$10,000 | \$10,000 |
| 51) | CONNECTICUT COMMUNITY FOR ADDICTION RECOVERY, INC., 198 Wethersfield Ave., Hartford, Connecticut, 06114. (Support for computer training of addicts in recovery.) Ref. 047/10 Contact: David Wilson, Executive Director. Approved: January 22, 2010. Implemented: 3/14/10 CK# 4341 \$5,000 | \$5,000 |
| 52) | GIFTS OF LOVE, INC., PO BOX 463, Old Avon Village, 35 East Main Street, Avon, Connecticut, 06001 (Support for Food Pantry program.) Ref. 048/10 Contact: Diana Goode, Executive Director. Approved: January 22, 2010. Implemented: 3/2/10 CK # 4343 \$10,000 | \$10,000 |

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| 53) | VILLA MARIA SCHOOL, 161 Sky Meadow Drive, Stamford, Connecticut, 06903. (Support for program expenses.) Contact: Sister Carol Ann Nawracaj. Approved: January 22, 2010. Implemented: 3/2/10 CK # 4348 \$2,500 | \$2,500 |
| 54) | SACRED HEART SCHOOL, 35 Orange Street, New Britain, Connecticut, 06053 (Support to help upgrade technology.) Ref. 051/10 Contact: Rita Mc McCartney, Executive Director. Approved: February 4, 2009. Implemented: 3/27/10 CK # 4037 \$5,000 | \$16,000 |
| 55) | SUSAN B. ANTHONY PROJECT, INC. 179 Water Street, Torrington, Connecticut, 06790. (Funding for the rebuilding Lives & Client Assistance Program.) Ref. 052/10. Contact: Barbara Spiegel, Executive Director. Approved: January 22, 2010. Implemented: 3/2/10 CK # 4349 \$10,0000 | \$10,000 |
| 56) | MIDDLESEX COUNTY HISTORICAL SOCIETY, 151 Main Street, Middletown, Connecticut, 06457. (Support for the capital campaign.) Ref. 053/10. Contact: Deborah D. Shapiro, Executive Director. Approved: January 22, 2010. Implemented: 3/1/10 CK# 4355 \$10,000 | \$10,000 |
| 57) | SACRED HEART CHURCH 66 Cottage Street, PO BOX 296, East Berlin, Connecticut, 06023 (To help refurbish pews and renovate kneeler pads and seat cushions.) Ref. 054/10 Contact: Rev. Edmond Nadolny, Pastor. Approved: January 22, 2010. Implemented: 3/1/10 CK # 4338 \$10,000 | \$10,000 |
| 58) | SAINT MARY-SAINT JOSEPH SCHOOL 35 Valley Street, Willimantic, Connecticut, Connecticut, 06226 (To help update their computer lab.) Ref. 056/10 Approved: January 22, 2010. Implemented: 3/2/10 Contact: Sister M. Elaine, SCMC, Principal. CK # 4346 \$20,000 | \$20,000 |
| 59) | THE HARTFORD JAZZ SOCIETY, INC., 116 Cottage Grove Road, Suite 202, Bloomfield, Connecticut, 06002-3200 (Support for 2010 Jazz at the Atheneum Series.) Ref. 058/10 Contact: Daniel Feingold, President. Approved: January 22, 2010. Implemented: 3/1/10 CK # 4342 \$5,000 | \$5,000 |

| 60) | CONNECTICUT FOUNDATION FOR DENTAL OUTREACH 835 Queen Street, Southington, Connecticut, 06489 (Support for the CTMOM free dental clinic.) Ref. 059/10 Contact: Carol J. Dingelday. Approved: January 22, 2010. Implemented: 3/1/10 | \$30,000 |
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| 61) | HARTFORD STAGE COMPANY 50 Church Street, Hartford, Connecticut, 06103 (Capital grant for the Act Now for the Future building project.) Ref. 060/10 Contact: Michael Stotts, Managing Director. Approved: January 22, 2010. Implemented: 3/3/10 CK # 4354 \$50,000 | \$50,000 |
| 62) | FAMILY CENTERS, INC., 40 Arch Street, PO BOX 7550, Greenwich, Connecticut, 06836-7550 (Support for the bereavement support system.) Ref. 061/10 Contact: Robert M. Arnold, President/CEO. Approved: January 22, 2010. Implemented: 3/3/10 CK # 4352 \$5,000 | \$5,000 |
| 63) | AVON CONGREGATIONAL CHURCH 6 West Main Street, Avon, Connecticut, 06001 (Support for an improved and enlarged playground for their day care.) Ref. 062/10 Contact: Rev. Kenneth D. Fuller, Pastor. Approved: January 22, 2010. Implemented: 3/29/10 CK # 4375 \$15,000 | \$15,000 |
| 64) | CONNECTIKIDS, INC., 814 Asylum Avenue, Hartford, Connecticut, 06105. (Support for tutoring mentoring & arts enrichment programs.) Ref. 063/10 Contact: Richard A. Herrera, Executive Director Approved: January 22, 2010. Implemented: 3/1/10 CK # 4340 \$5,000 | \$5,000 |
| 65) | AVON COMMUNITY RECREATIONAL NEIGHBORHOOD, INC., PO BOX 992, Avon, Connecticut, 06001 (To help replace Avon Middle School tennis courts.) Ref. 064/10 Contact: Laura Young, President. Approved: January 22, 2010 Implemented: 36/29/10 CK # 4378 \$10,000 | \$10,000 |
| 66) | AMERICAN RED CROSS CONNECTICUT CHAPTER, 209 Farmington Ave., Farmington, Connecticut, 06032. (Support general operating & Emergency Services.) Ref. 065/10 Contact: Diane J. Auger, Regional CEO. Approved: May 11, 2010. Implemented: 6/17/10 CK # 4456 \$10,000 | \$10,000 |

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| 67) | BRISTOL BOYS & GIRLS CLUB, INC., 105 Laurel Street, Bristol, Connecticut, 06010 (General operating support.) Ref. 067/10 Contact: Michael Suchopar. Approved: May 11, 2010. Implemented: 6/15/10 CK # 4450 \$5,000 | \$5,000 |
| 68) | BOYS & GIRLS CLUB OF NEW BRITAIN, INC., 150 Washington Street, New Britain, Connecticut, 06051. (To help complete renovations to the Club.) Ref. 068/10 Contact: Rev. Michael F. Dogali, Pastor. Approved: May 11, 2010. Implemented: 6/15/10 CK # 4453 \$100,000 | \$100,000 |
| 69) | NUTMEG BIG BROTHERS BIG SISTERS, 30 Laurel Street, Suite 3, Hartford, Connecticut, 06106-1377. (One-time grant for general operating support of the mentoring program.) Contact: Laura Green, President & CEO Ref. 073/09 Approved: May 11, 2010. Implemented: 6/7/10 CK # 4436 \$10,000 | \$10,000 one-time |
| 70) | ASYLUM HILL LEARNING ZONE, INC., 814Asylum Street, Hartford, Connecticut, 06105 (Support for the Baby Academy program.) Ref. 071/10 Contact: Mary R. McNamara, President. Approved: May 11, 2010. Implemented: 6/2/10 CK # 4426 \$15,000 | \$15,000 |
| 71) | CAPITAL CLASSICS, INC., Po box 370096, West Hartford, Connecticut, 06137. (Support for production costs.) Ref. 072/10 Contact: Laura Sheehan, Artistic Director. Approved: May 11, 2010. Implemented: 6/11/10 CK # 4449 \$5,000 | \$5,000 |
| 72) | COMMUNITY MENTAL HEALTH AFFILIATES, INC., 29 Russell Street, New Britain, Connecticut, 06052. (Support for Technology Infrastructure Upgrade.) Ref. 073/10 Contact: Raymond J. Gorman, president/CEO. Approved: May 11, 2010. Implemented: 6/15/10 CK # 4451 \$50,000 | \$50,000 |
| 73) | BOY SCOUTS OF AMERICAN CONNECTICUT RIVERS COUNCIL, 60 Darlin Street, PO BOX 280098, East Hartford, Connecticut, 06128-0098 (Support for the Learning for Life/Exploring Program.) Ref. 074/10 Contact: Carolyn M. Mazure, Ph.D., Director. Approved: May 21 2009. Implemented: 6/2/10 CK # 4423 \$5,000 | \$5,000 |

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| 74) | CONNECTICUT COALITION FOR ORGAN AND TISSUE DONATION INC., PO BOX 4000, Woodbridge, Connecticut, 06525 (Support for Donate Life Connecticut's Volunteer Program.) Ref. 075/10 Contact: Caitlyn Bernabucci, Board Chair. Approved: May 11, 2010. Implemented: 6/17/10 CK # 4459 \$5,000 | \$5,000 |
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| 75) | MERCY HIGH SCHOOL 1740 Randolph Ave., Middletown, Connecticut, 06457. (Funding for technology upgrades.) Ref. 076/10 Contact: Mary A. McCarthy, RSM. Approved: May 11, 2010 Implemented: 6/2/10 CK # 4422 \$10,000 | \$10,000 |
| 76) | SAINT BERNADETTE CATHOLIC SCHOOL, 20 Burr Street, New Haven, Connecticut, 06512 (To help update the science curriculum & supplementary materials.) Sherry Steines, Principal. Ref. 077/10 Approved: May 11, 2010. Implemented: 6/7/10 CK # 4429 \$10,000 | \$10,000 |
| <i>77</i>) | CONNECTICUT COLLEGE, 270 Mohegan Avenue, New London, Connecticut, 06320-4196 (Scholarship support.) Ref. 078/10 Contact: Leo I. Higdon. Approved: May 11, 2010. Implemented: 6/7/10 CK # 4439 \$25,000 | \$25,000 |
| 78) | KATHERINE HEPBURN CULTURAL ARTS CENTER, 300 Main Street, Old Saybrook, Connecticut, 06457. (Support for Connecticut Free Shakespeare on the green presentation.) Contact: Chuck Still, Executive Director. Ref. 079/10 Approved: May 11, 2010. Implemented: 6/11/10 CK # 4445 \$5,000 | \$5,000 |
| 79) | THE MARK TWAIN HOUSE, 351 Farmington Ave., Hartford, Connecticut, 06105. (One -time general operating support.) Ref. 080/10 Contact: Jeffrey Nichols, CEO/ Executive Director. Approved: May 11, 2010 Implemented: 6/15/10 CK # 4452 \$100,000 | \$100,000 one-time |
| 80) | NORTHWEST CATHOLIC HIGH SCHOOL 29 Wampanoag Dr., West Hartford, Connecticut, 06117 (To help complete sound & lighting upgrades in the school auditorium.) Contact: Margaret R. Williamson, Principal/Chief Administrator. Ref. 082/10 Approved: May 11, 2010. Implemented: 6/2/10 CK # 4420 \$25,000 | \$25,000 |

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| 81) | EPILEPSY FOUNDATION OF CONNECTICUT, INC., 386 Main Street, Middletown, Connecticut, 06457 (Support for Camp Courage camping program.) Ref. 083/10 Contact: Linda A. Wallace, Executive Director. Approved: May 21, 2010. Implemented: 6/3/10 CK # 4430 \$10,000 | \$10,000 |
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| 82) | HARTFORD CHILDREN'S THEATRE 360 Farmington, Avenue, Connecticut, 06105. (Funding for children's productions.) Ref. 085/10 Contact: Dulcie Giadone, Executive Director. Approved: May 11, 2010. Implemented: 6/7/10 CK # 4435 \$5,000 | \$5,000 |
| 83) | SAINT PAUL SCHOOL 461 Alling Rd., Kensington, Connecticut, 06037-2170. (General support.) Contact: Fr. Mark Curesky, OFN Conv. Pastor. Approved: May 11, 2010. Implemented: 6/7/10 CK # 4438 \$25,000 | \$25,000 |
| 84) | HOLY PASSIONIST RETREAT CENTER, 303 Tunxis Rd., West Hartford, Connecticut, 06107. (Support for capital improvements to comply w/ADA.) Ref. 087/10 Contact: Rev. David Cinquergrani, CP, Retreat Director. Approved: May 11, 2010 Implemented: 6/7/10 CK # 4437 \$25,000 | \$25,000 |
| 85) | SACRED HEART HIGH SCHOOL, 142 Elm Street, Waterbury, Connecticut, 06706. (Partial tuition support for inner city youth.) Ref. 088/10 Contact: Eileen Regan, Interim President. Approved: May 11, 2010. Implemented: 6/2/10 CK # 4421 \$10,000 | \$10,000 |
| 86) | EAST CATHOLIC HIGH SCHOOL, 115 New State Rd., Manchester, Connecticut, 06042-1898. (Support for the SOAR education program.) Ref. 089/10 Contact: Christian J. Cashman, Principal. Approved: May 11, 2010. Implemented: 6/11/10 CK # 4448 \$10,000 | \$10,000 |
| 87) | FAMILY LIFE EDUCATION 39 Grace St., Hartford, Connecticut, 06106. (To help fund Family Services programming.) Ref. 090/10 Contact: Candida Flores, Executive Director. Approved: May 11, 2010. Implemented: 6/11/10 CK # 4444 \$15,000 | \$15,000 |

MINIMUM DISTRIBUTION FYE JUNE 30, 2010: \$2,840,601 TOTAL OF GRANTS APPROVED TO DATE: \$2,858,000