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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

2009

Department of the Treasury
Internal Revenue Service

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

For calendar year 2009, or tax year beginning 7/01, 2009, and ending 6/30, 2010

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

Use the IRS label. Otherwise, print or type. See Specific Instructions	DEVON ROTARY FOUNDATION TRUST FUND 250 BROAD STREET MILFORD, CT 06460	A Employer identification number 22-2959085
		B Telephone number (see the instructions)
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	C If exemption application is pending, check here <input type="checkbox"/> D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 123,244.	(Part I, column (d) must be on cash basis)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc. received (att sch)	20,792.			
2 Ck <input checked="" type="checkbox"/> if the foundn is not req to att Sch B				
3 Interest on savings and temporary cash investments	1,024.	1,024.	1,024.	
4 Dividends and interest from securities	2,130.	2,130.	2,130.	
5a Gross rents				
b Net rental income or (loss)		STATEMENT 1		
6a Net gain/(loss) from sale of assets not on line 10	-13.			
b Gross sales price for all assets on line 6a	24,875.			
7 Capital gain net income (from Part IV, line 2)				
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit/(loss) (att sch)				
11 Other income (attach schedule)	18,268.			
12 Total. Add lines 1 through 11	42,201.	3,154.	3,154.	
13 Compensation of officers, directors, trustees, etc	0.			
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach sch) SEE ST 3	400.			
c Other prof fees (attach sch)				
17 Interest				
18 Taxes (attach schedule) (see instr) SEE STM 4	14.			
19 Depreciation (attach sch) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) SEE STATEMENT 5	685.			
24 Total operating and administrative expenses. Add lines 13 through 23	1,099.			
25 Contributions, gifts, grants paid PART XV	20,026.			20,026.
26 Total expenses and disbursements. Add lines 24 and 25	21,125.	0.	0.	20,026.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	21,076.			
b Net investment income (if negative, enter -0-)		3,154.		
c Adjusted net income (if negative, enter -0-)			3,154.	

Part II Balance Sheets		Beginning of year (a) Book Value	End of year	
			(b) Book Value	(c) Fair Market Value
ASSETS	1 Cash — non-interest-bearing			
	2 Savings and temporary cash investments	47,543.	37,391.	37,391.
	3 Accounts receivable			
	Less allowance for doubtful accounts			
	4 Pledges receivable			
	Less allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule)	10,556.	27,901.	27,901.
	c Investments — corporate bonds (attach schedule)	9,630.	10,209.	10,209.
	11 Investments — land, buildings, and equipment: basis			
LIABILITIES	Less accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule)	29,043.	47,743.	47,743.
	14 Land, buildings, and equipment: basis			
	Less accumulated depreciation (attach schedule)			
	15 Other assets (describe)			
	16 Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)	96,772.	123,244.	123,244.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
FUND ASSETS	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/>			
	24 Unrestricted	79,105.	108,261.	
	25 Temporarily restricted	17,667.	14,983.	
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, building, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
BALANCE SHEET	30 Total net assets or fund balances (see the instructions)	96,772.	123,244.	
	31 Total liabilities and net assets/fund balances (see the instructions)	96,772.	123,244.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	96,772.
2	Enter amount from Part I, line 27a	2	21,076.
3	Other increases not included in line 2 (itemize) <input type="checkbox"/> SEE STATEMENT 6	3	5,396.
4	Add lines 1, 2, and 3	4	123,244.
5	Decreases not included in line 2 (itemize) <input type="checkbox"/>	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	123,244.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a N/A				
b				
c				
d				
e				

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2
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) (see the instructions) If (loss), enter -0- in Part I, line 8		3

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

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

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

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

☐ Yes☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008	26,976.		
2007	29,947.		
2006	95,067.		
2005	122,573.		
2004	69,204.		

2 Total of line 1, column (d)	2
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3
4 Enter the net value of noncharitable use assets for 2009 from Part X, line 5	4
5 Multiply line 4 by line 3	5
6 Enter 1% of net investment income (1% of Part I, line 27b)	6 32.
7 Add lines 5 and 6	7 32.
8 Enter qualifying distributions from Part XII, line 4	8 20,026.

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

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

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	32.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	32.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	32.
6 Credits/Payments			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	6a		
b Exempt foreign organizations — tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	50.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	50.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	18.	
11 Enter the amount of line 10 to be Credited to 2010 estimated tax	11	0.	
	18.	Refunded	

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? <i>If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities</i>		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) N/A		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If 'No,' attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

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Part VII-B	Statements Regarding Activities for Which Form 4720 May Be Required
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4b	X
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TEEA0305L 07/06/09

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No**b** If any answer is 'Yes' to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

N/A

Organizations relying on a current notice regarding disaster assistance check here

▶ ☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?N/A ☐ Yes ☐ No

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

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

X

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 7		0.	0.	0.

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

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

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

0

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

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

Total number of others receiving over \$50,000 for professional services 0**Part IX-A** Summary of Direct Charitable Activities

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

	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0.

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Form 990-PF (2009)

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

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

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

1 Minimum investment return from Part X, line 6		1	
2a Tax on investment income for 2009 from Part VI, line 5	2 a	32.	
b Income tax for 2009 (This does not include the tax from Part VI)	2 b		
c Add lines 2a and 2b		2 c	32.
3 Distributable amount before adjustments Subtract line 2c from line 1		3	-32.
4 Recoveries of amounts treated as qualifying distributions		4	
5 Add lines 3 and 4		5	-32.
6 Deduction from distributable amount (see instructions)		6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1		7	0.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	20,026.
b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	20,026.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	32.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	19,994.

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

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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				0.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years 20 __, 20 __, 20 __		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004 69,262.				
b From 2005 122,599.				
c From 2006 95,086.				
d From 2007 29,972.				
e From 2008 26,990.				
f Total of lines 3a through e	343,909.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 20,026.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	20,026.			
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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	363,935.			
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 instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	69,262.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	294,673.			
10 Analysis of line 9				
a Excess from 2005 122,599.				
b Excess from 2006 95,086.				
c Excess from 2007 29,972.				
d Excess from 2008 26,990.				
e Excess from 2009 20,026.				

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i> SEE STATEMENT 9				
Total			3a	20,026.
<i>b Approved for future payment</i>				
Total			3b	

2009

FEDERAL STATEMENTS

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CLIENT 149020

DEVON ROTARY FOUNDATION TRUST FUND

22-2959085

11/17/10

12:41PM

STATEMENT 1
FORM 990-PF, PART I, LINE 6A
NET GAIN (LOSS) FROM NONINVENTORY SALES PER BOOKS
ASSETS NOT INCLUDED IN PART IV

DESCRIPTION:	5000 STATE BANK OF INDIA		
DATE ACQUIRED:	10/24/2008		
HOW ACQUIRED:	PURCHASE		
DATE SOLD:	10/24/2009		
TO WHOM SOLD:			
GROSS SALES PRICE:	5,000.		
COST OR OTHER BASIS:	5,000.		
BASIS METHOD:	COST		
		GAIN (LOSS)	0.

DESCRIPTION:	5000 WILMINGTON TRUST		
DATE ACQUIRED:	5/12/2009		
HOW ACQUIRED:	PURCHASE		
DATE SOLD:	8/13/2009		
TO WHOM SOLD:			
GROSS SALES PRICE:	5,000.		
COST OR OTHER BASIS:	5,000.		
BASIS METHOD:	COST		
		GAIN (LOSS)	0.

DESCRIPTION:	5000 MEDALLION BANK		
DATE ACQUIRED:	10/23/2008		
HOW ACQUIRED:	PURCHASE		
DATE SOLD:	7/28/2009		
TO WHOM SOLD:			
GROSS SALES PRICE:	5,000.		
COST OR OTHER BASIS:	5,000.		
BASIS METHOD:	COST		
		GAIN (LOSS)	0.

DESCRIPTION:	58.48 CAPITAL WORLD BOND FUND		
DATE ACQUIRED:	VARIOUS		
HOW ACQUIRED:	PURCHASE		
DATE SOLD:	4/08/2010		
TO WHOM SOLD:			
GROSS SALES PRICE:	1,000.		
COST OR OTHER BASIS:	915.		
BASIS METHOD:	COST		
		GAIN (LOSS)	85.

DESCRIPTION:	61.747 CAPITAL WORLD GROWTH & INCOME		
DATE ACQUIRED:	VARIOUS		
HOW ACQUIRED:	PURCHASE		
DATE SOLD:	4/08/2010		
TO WHOM SOLD:			
GROSS SALES PRICE:	2,000.		
COST OR OTHER BASIS:	1,756.		
BASIS METHOD:	COST		
		GAIN (LOSS)	244.

2009

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CLIENT 149020

DEVON ROTARY FOUNDATION TRUST FUND

22-2959085

11/17/10

12 41PM

STATEMENT 1 (CONTINUED)
FORM 990-PF, PART I, LINE 6A
NET GAIN (LOSS) FROM NONINVENTORY SALES PER BOOKS
ASSETS NOT INCLUDED IN PART IV

DESCRIPTION:	49.826 HARTFORD CAPITAL APPRECIATION		
DATE ACQUIRED:	VARIOUS		
HOW ACQUIRED:	PURCHASE		
DATE SOLD:	4/08/2010		
TO WHOM SOLD:			
GROSS SALES PRICE:	2,000.		
COST OR OTHER BASIS:	1,904.		
BASIS METHOD:	COST		
		GAIN (LOSS)	96.
DESCRIPTION:	102.886 BP PLC		
DATE ACQUIRED:	9/04/2009		
HOW ACQUIRED:	PURCHASE		
DATE SOLD:	5/06/2010		
TO WHOM SOLD:			
GROSS SALES PRICE:	4,875.		
COST OR OTHER BASIS:	5,313.		
BASIS METHOD:	COST		
		GAIN (LOSS)	-438.
		TOTAL \$	<u><u>-13.</u></u>

STATEMENT 2
FORM 990-PF, PART I, LINE 11
OTHER INCOME

	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
HARLEY RAFFLE	\$ 18,268.		
TOTAL	\$ <u>18,268.</u>	\$ 0.	\$ 0.

STATEMENT 3
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	\$ 400.			
TOTAL	\$ <u>400.</u>	\$ 0.	\$ 0.	\$ 0.

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STATEMENT 4
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CORPORATION TAXES	\$ 14.			
TOTAL	\$ 14.	\$ 0.	\$ 0.	\$ 0.

STATEMENT 5
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MISCELLANEOUS	\$ 685.			
TOTAL	\$ 685.	\$ 0.	\$ 0.	\$ 0.

STATEMENT 6
FORM 990-PF, PART III, LINE 3
OTHER INCREASES

UNREALIZED GAIN ON INVESTMENTS				\$ 5,396.
TOTAL				\$ 5,396.

STATEMENT 7
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
PAUL LEWIS OTZEL 23 FLAX MILL TERRACE MILFORD, CT 06460	SECRETARY/TREAS 0	\$ 0.	\$ 0.	\$ 0.
RAYMOND A MACALUSO 14 SANDPIPER CRESCENT MILFORD, CT 06460	DIRECTOR 0	0.	0.	0.
PAUL W. AUSTIN 136 PLATT LANE MILFORD, CT 06460	DIRECTOR 0	0.	0.	0.
JAMES SECONDI 99 MELBA STREET MILFORD, CT 06460	DIRECTOR 0	0.	0.	0.

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STATEMENT 7 (CONTINUED)
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
DAVID SLOSSBERG 14 HONEYSUCKLE LANE MILFORD, CT 06461	DIRECTOR 0	\$ 0.	\$ 0.	\$ 0.
MICHAEL ZANARINI 54 ROLLER TERRACE MILFORD, CT 06461	DIRECTOR 0	0.	0.	0.
JAMES MARONEY 8 POINT BEACH MILFORD, CT 06460	DIRECTOR 0	0.	0.	0.
SAMUEL ALAGNO 6 ELIZABETH STREET SHELTON, CT 06484	DIRECTOR 0	0.	0.	0.
TOTAL		\$ 0.	\$ 0.	\$ 0.

STATEMENT 8
FORM 990-PF, PART XV, LINE 2A-D
APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:	DEVON ROTARY CLUB
NAME:	PAUL LEWIS OTZEL
CARE OF:	PO BOX 421
STREET ADDRESS:	MILFORD, CT 06460
CITY, STATE, ZIP CODE:	
TELEPHONE:	
FORM AND CONTENT:	APPLICATION IS ATTACHED AND AVAILABLE ONLINE AT WWW.DEVONROTARY.ORG AND AT KAPUSTA & OTZEL, 250 BROAD STREET, MILFORD, CT 06460
SUBMISSION DEADLINES:	APRIL, 2009
RESTRICTIONS ON AWARDS:	SEE APPLICATION REGARDING VARIOUS SCHOLARSHIP LIMITATIONS AND AWARDS

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STATEMENT 9
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
DEVON ROTARY KNIGHTS BASKETBALL LEAGUE MILFORD, CT 06460,	NONE	N/A	TO PROMOTE COMMUNITY SPIRIT	\$ 50.
EVAN HART MILFORD, CT 06460,	NONE	N/A	SCHOLARSHIP	1,000.
JULIE KRZYKWA MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
BING ZHENG MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
NAYAB MIR MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
ANDREW KELLEY MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
VIRGINIA ORMAN MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
SAMANTHA ZOFCAK MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
SHENALI PARIKH MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
BRYCE DELGRANTE MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
MELISSA KANDRACH MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
CITY OF MILFORD MILFORD, CT 06460,	NONE		TO PROMOTE COMMUNITY SPIRIT	3,976.
VINCENT CANEPARI MILFORD, CT 06460,	NONE		SCHOLARSHIP	500.
JORDAN BOOTS MILFORD, CT 06460,	NONE		SCHOLARSHIP	500.
JENNIFER GILBERT MILFORD, CT 06460,	NONE		SCHOLARSHIP	500.
JETSENNY BLANDON MILFORD, CT 06460,	NONE		SCHOLARSHIP	500.
RYAN CIESLA MILFORD, CT 06460,	NONE		SCHOLARSHIP	500.

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DEVON ROTARY FOUNDATION TRUST FUND

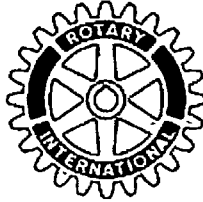
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STATEMENT 9 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
AVERY ROURKE MILFORD, CT 06460,	NONE		SCHOLARSHIP	\$ 500.
ALYSSA DUNN MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
SAMANTHA EDWARDS MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
SABINE QUETANT MILFORD, CT 06460,	NONE		SCHOLARSHIP	1,000.
TOTAL				\$ 20,026.



22-2959085

Devon Rotary Club

PO Box 421
Milford, CT 06460

Devon Rotary 2010 Scholarships

Paul Austin Scholarship

This scholarship is a \$1000 scholarship per year, renewable for four years. It is designated for a student graduating from Jonathan Law who will be attending a 4-year college in the Fall. This scholarship is based on academics, service, need, and high school activities. It is renewable provided that the student maintains a 3.0 college GPA and is enrolled as a full time student.

Frederick De Luca Foundation Scholarship

This \$1,000 scholarship is made possible through a grant from the DeLuca Foundation. It is designated for a graduating senior from Jonathan Law who will be attending a 4-year college in the Fall. Preference is given to Subway employees. This scholarship is based on academics, service, need, and high school activities.

Judge Bernard F. Joy Memorial Scholarship

This is a \$1,000.00 scholarship for any student graduating from a Milford high school or Milford resident graduating from any high school who is continuing his or her education at an accredited post high school institution. This is designated for a student who is interested in legal, paralegal, real estate, social work, social services or other law related fields. It is based on community service and need.

Dodie Ireland Memorial Scholarship

This scholarship was established in memory of Gloria "Dodie" Ireland, a past member of the Devon Rotary who was extremely devoted to youth, and especially to the students at Platt Tech. This \$1,000 scholarship has been designated for a graduate of Platt RVTS who will be continuing his or her education at an accredited post-graduate institution.

Duke Scholarship

This scholarship is a \$1,000 award made possible by a donation from the Hassenmayer family. It is for any student graduating from a Milford high school or Milford resident graduating from any high school who is continuing his or her education at an accredited post-graduate institution. It is designated for a student who will be studying animal sciences, pre-veterinary studies, or any related major. It is based on service, need, and academics.

Albert Secondi Memorial Scholarship.

This is a \$500 scholarship for any student graduating from a Milford high school or Milford resident graduating from any high school who is continuing his or her education at 4-year college. This is designated for a student who will be studying business. Special preference will be given to those interested in hospitality and tourism. Consideration will also be given to students of Italian descent. This scholarship is based on need, academics, and service.

Devon Rotary City Wide Scholarship

This is a \$1,000 scholarship for any student graduating from a Milford high school or Milford resident graduating from any high school. This award is based on Academics, service, need, and activities

Robert Malone, MD Memorial Scholarship

This is a \$500 scholarship for any student graduating from a Milford high school or Milford resident graduating from any high school who is continuing his or her education at an accredited post-graduate institution. This is designated for a student who is interested in medicine or other health related fields. It is based on service, academics, and need.

John D. Gaynor Memorial Scholarship

This is a \$1,000 scholarship for any student graduating from a Milford high school or Milford resident graduating from any high school who is continuing his or her education at a 4-year college. This is designated for a student who will be pursuing a degree in business, with additional consideration given to students who are interested in entrepreneurship. This scholarship is based on service, academics, and need.

Barbara Burwell Gaynor Memorial Scholarship

This is a \$1,000 scholarship for any student graduating from a Milford high school or any Milford student graduating from any high school who is continuing his or her education at a 4-year college. This is a designated for a student who will be pursuing a degree in education with the hopes of becoming a teacher. This scholarship is based on service, academics, and need.

Steven G. Memorial Scholarship

This is a \$1,000 a year scholarship renewable for 4-years. It is open to any student graduating from a Milford high school or any Milford resident graduating from any high school. This is designated for a student studying marine biology, aquatic sciences, or a related major, or for a student who has shown concern for the environment and an interest in marine life. This scholarship is based on service, academics, and need.

Edward V. Bierne Memorial Scholarship

This is a one-time \$1,000 scholarship. It is open to students from Jonathan Law High School who are interested in studying Biology or other life sciences at a 4-year college. This award is made possible by a donation from Jesse Thompson in honor of Edward V. Bierne, a former city science teacher.

Sheri Katzmartsic Previs Memorial Scholarship

This is a one-time \$1,000 scholarship. It is designated for a female athlete from Jonathan Law who has overcome adversity in the pursuit of her passion. This award is made possible by donations from Sheri's family and friends. It is given in honor of Sheri Katzmartsic Previs a 1992 graduate of Jonathan Law High School and a four-time letter winner in two sports.

Devon Rotary 2010 Scholarship Application



22-2959085

NAME OF SCHOLARSHIP ORGANIZATION:

APPLICANT INFORMATION

Full legal name

LAST

FIRST

MIDDLE

Mailing Address

Phone Number:

Email Address:

EDUCATION

High School

Address:

Phone:

Guidance Counselor's name:

Actual or Expected Graduation Date:

If you have attended more than one high school, please attach a separate piece of paper with the high school name(s), dates you attended, and reason for leaving.

EMPLOYMENT HISTORY

If you have worked regularly, please include it below. You may list the informal work that you have done such as baby-sitter, odd-jobs, lawn mowing, or other similar types of work, but you do not need to provide the names of the families for whom you have worked.

Name of employer

City, State:

Type of work:

Dates employed:

From:

To:

Average hours
per week:

Name of employer

City, State:

Type of work:

Dates employed:

From:

To:

Average hours
per week:

If you have additional employers, please attach on a separate sheet of paper the name of the employer(s), city, state, type of work, dates employed, and average number of hours worked per week.

Do you plan to work
in college?

If so where?

Will you work this
summer?

If so, what are your expected summer earnings?

VOLUNTEER AND COMMUNITY SERVICE

Name of Organization:

City, State:

Type of service:

Dates volunteered: From: To: Average hours per week:

Name of Organization:

City, State:

Type of service:

Dates volunteered: From: To: Average hours per week:

Name of Organization:

City, State:

Type of service:

Dates volunteered: From: To: Average hours per week:

EXTRACURRICULAR, SPORTS, AND OTHER ACTIVITIES

Briefly list the clubs, sports, and other activities in which you have been involved, and indicate any leadership positions held, awards or accomplishments. Activities can be either in school or out of school activities. If you need extra space, please attach an additional sheet. Feel free to attach a resume, but please also fill in this area in order of importance of the activity to you.

Activity**Positions, Awards, Accomplishments****HONORS AND AWARDS****COLLEGE APPLICATIONS**

Please list the name(s) of the college(s) or trade school(s) where you have applied and the status of your application(s).

College Applied to

Status

Amount of Financial Aid offered by college

FIELD OF STUDY

College Major(s)

College Minor(s)

Future Career Goals:

OTHER SCHOLARSHIPS

Please list the name(s) of any other scholarships(s) you have applied for, and the status of your applications.

Scholarship Name:

Awarding Organization:

Amount applied for:

Status:

☐ Pending

☐ Awarded

\$

☐ Denied

Scholarship Name:

Awarding Organization:

Amount applied for:

Status:

☐ Pending

☐ Awarded

☐ Denied

Scholarship Name:

Awarding Organization:

Amount applied for:

Status:

☐ Pending

☐ Awarded

☐ Denied

FAMILY INFORMATION

Father's Name

Father's Occupation

Father's Employer

Employer's Address

Mother's Name

Mother's Occupation

Mother's Employer

Employer's Address

Parent's Marital Status

Who do you live with?

Does your custodial parent receive child support?

How much per month?

Number of siblings

Ages of siblings

ADDITIONAL INFORMATION

Please attach a page briefly explaining any personal or family circumstances or information that you would like the scholarship committee to take into consideration when reviewing your application:

GENERAL APPLICATION COVER SHEET

I have enclosed the following materials:

- ☐ General Scholarship Application Cover sheet
- ☐ Official High School transcript (grades, GPA, class rank, and SAT scores)
- ☐ Letters of recommendation (1 Academic)
- ☐ SAR (Student Aid Report) Please include all pages
- ☐ I have not yet received my SAR, but will send it to you by _____ (Month/Day/Year)
- ☐ Brief essay detailing your future goals, plans, and reasons for needing this scholarship.
- ☐ Cover Letter
- ☐ Additional materials required for this scholarship (list)

Please check with you guidance office to find out their deadline for submitting our scholarship. Devon Rotary requires the submission of the original application plus 3 copies.

DISCLAIMER AND SIGNATURE

The undersigned hereby certifies that the information provided in this application is true to the best of their knowledge. Knowingly providing erroneous or misleading information will render this application ineligible for consideration.

If you are awarded funds and you are unable to use them for the intended purpose you agree to contact the scholarship committee.

Student's Signature

Date

Parent's Signature

Date

Please Circle the Scholarships that You Would Like to be Considered for:

Paul Austin Scholarship

Frederick De Luca Foundation Scholarship

Judge Bernard F. Joy Memorial Scholarship

Dodie Ireland Memorial Scholarship

Duke (the dog) Scholarship

Albert Secondi Memorial Scholarship

Devon Rotary City Wide Scholarship

Robert Malone MD Memorial Scholarship

John D. Gaynor Memorial Scholarship

Barbara Burwell Gaynor Memorial Scholarship

Steven G. Memorial Scholarship

Edward V. Bierne Memorial Scholarship

Sheri Katzmartsic Previs Memorial Scholarship

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545 1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box. ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns***Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization	Employer identification number
	DEVON ROTARY FOUNDATION TRUST FUND	22-2959085
	Number, street, and room or suite number. If a P.O. box, see instructions	
	250 BROAD STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	MILFORD, CT 06460	

Check type of return to be filed (file a separate application for each return)

- | | | |
|-------------------------------------------------|----------------------------------------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ► ATTY. PAUL OTZEL

Telephone No ► (203) 874-6773 FAX No ► _____

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15, 20 11, to file the exempt organization return for the organization named above.

The extension is for the organization's return for

- ☐ calendar year 20__ or
- ☒ tax year beginning 7/01, 20 09, and ending 6/30, 20 10

2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	50.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	50.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions**BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.**Form **8868** (Rev 4-2009)