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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

		of the Treasury enue Service Note. The foundation may be	be able to use a copy of this		ting requirements	2009
			23, 2009		JUN 30, 2010	
		all that apply X Initial return Amended return	Initial return of a fo	rmer public charity	Final return	
Oth	the label. erwise print	Name of foundation Arthur R. Cores Esoph Research Foundation Number and street (or PO box number if mail is not de	ageal Cancer		A Employer Identification 27-0950706 B Telephone number (305)534-1	
See Insti	Spec	ific City or town, state, and ZIP code	empt private foundation		C If exemption application is p D 1. Foreign organizations 2. Foreign organizations me check here and attach co	ending, check here
	ır ma om F	rket value of all assets at end of year J Accounting	her (specify)	Accrual	E if private foundation star under section 507(b)(1) F if the foundation is in a under section 507(b)(1)	i(A), check here FL
	irt l	· -	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1 2 3	Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments	60,370.		N/A	
	4 5a	Dividends and interest from securities Gross rents Net rental income or (loss)	3.	3.	Hali adhida a dha	Statement 1
Revenue	7 8		D 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	0.	-	
	b	Income modifications Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) Other income	+			
	12	Total. Add lines 1 through 11	60,373.	3.		
	13 14 15	Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits	0.	0.		0.
Expenses	16a b c	Legal fees Stmt 2 Accounting fees Other professional fees	8,678.	0.		8,678.
Operating and Administrative	17 18 19	Interest Taxes Depreciation and depletion				
nd Adır	20 21 22	Occupancy Travel, conferences, and meetings Printing and publications	195.	0.		98.
ating a	23	Other expenses Stmt 3 Total operating and administrative	10,782.	0.		10,782.
Opera	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	19,655. 10,000.	0.		19,558. 10,000.
_	26	Total expenses and disbursements. Add lines 24 and 25	29,655.	0.		29,558.
	а	Subtract line 26 from line 12 Excess of revenue over expenses and disbursements	30,718.	3.		
	C	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)			N/A	
9235 02-0	01 2-10	LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instruc	tions.	·	Form 990-PF (2009)

For	m 99	0-PF(2009) Research Foundation		27-0)950706 Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		00.710	20 710
		Savings and temporary cash investments		30,718.	30,718.
	3	Accounts receivable			
	ĺ	Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable		ĺ	
		Less allowance for doubtful accounts			
şţs	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖		Investments - U S and state government obligations			
	b	Investments - corporate stock			<u> </u>
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe			
			0.	20 710	30,718.
_		Total assets (to be completed by all filers)	- 0.	30,718.	30,710.
	17	Accounts payable and accrued expenses			
	18	Grants payable			•
es	19	Deferred revenue -			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
		7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.	0.	
_	23	Total llabilities (add lines 17 through 22)	0.		
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
Ş	24	Unrestricted			
<u>ala</u>	25	Temporarily restricted	-		
D D	26	Permanently restricted Foundations that do not follow SFAS 117, check here			
ᆵ					
þ	27	and complete lines 27 through 31. Capital stock, trust principal, or current funds	0.	0.	
ets	27	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
LSS	28	Retained earnings, accumulated income, endowment, or other funds	0.	30,718.	
Net Assets or Fund Balances	30	Total net assets or fund balances	0.	30,718.	
Z	30	I Utal liet assets of falla paramees		,	
	31	Total liabilities and net assets/fund balances	0.	30,718.	
			Balances		
_				 _	
1		I net assets or fund balances at beginning of year - Part II, column (a), line	3 30		0
	•	st agree with end-of-year figure reported on prior year's return)		1	30,718.
2		er amount from Part 1, line 27a		2	30,718.
3		er increases not included in line 2 (itemize)		3	30,718.
4		lines 1, 2, and 3		5	30,718.
5 6		reases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (h) line 30	6	30,718.
0	rUli	n not assets of fund balances at end of year time 4 fillings line of " Fait II, t	A CONTRACTOR INTO CO.		

Part IV Capital Gains	and Los	ses for Tax on In	vestmen	t Income		-				
					` P	(b) How acquired (c) P - Purchase D - Donation		(c) Date (mo , d	acquired ay, yr)	(d) Date sold (mo , day, yr)
1a									-	
b NO	NE									
С		·-								
<u>d</u>					<u> </u>					
<u>e</u>					<u> </u>					
(e) Gross sales price		preciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (
<u>a</u>										
b										
С										
d										
<u>e</u>						-				
Complete only for assets showing								(I) Gains (C	ol (h) gain not less thar	minus
(i) F M V as of 12/31/69		Adjusted basis as of 12/31/69		cess of col (I) col. (J), if any				Losses	(from col (l	1))
<u>a</u>						_				
<u>b</u>										
C										
<u>d</u>		····								
<u>e</u>					-					
2 Capital gain net income or (net ca	pital loss)	If gain, also enter of the first of the firs			}	2				
3 Net short-term capital gain or (los	s) as define	ed in sections 1222(5) and	d (6)							
If gain, also enter in Part I, line 8,							1			
If (loss), enter -0- in Part I, line 8				. =	لليا	3_				
		ction 4940(e) for					nent in	come		77 / 7
(For optional use by domestic private	foundation	is subject to the section 4	940(a) tax or	net investment ir	come)				N/A
If section 4940(d)(2) applies, leave th	nis part blan	nk								
										Yes No
Was the foundation liable for the sec				•	iiou z					L Tes L INU
If "Yes," the foundation does not qual Enter the appropriate amount in	ach colum	n for each year, see instri	ictions before	making any entri	es			-		
(a)	1	(b)			(c)			T		(d)
Base periód years Calendar year (or tax year beginnii	יוי מי	Adjusted qualifying dist	ributions	Net value of no			use asset	s		ution ratio ided by col. (c))
2008	·9 ···/					-		_	, , , , , , , , , , , , , , , , , , , ,	
2007								<u> </u>		
2006										
2005										
2004										
		-								
2 Total of line 1, column (d)								2		-
3 Average distribution ratio for the	5-year base	period - divide the total of	on line 2 by 5,	or by the number	of ye	ars		İ		
the foundation has been in existe	nce if less th	han 5 years						3		
4 Enter the net value of noncharitat	le-use asse	its for 2009 from Part X, I	ine 5					4		
5 Multiply line 4 by line 3								5		
6 Enter 1% of net investment incon	ne (1% of P	art 1, line 27b)						6		
	-	•								
7 Add lines 5 and 6								7		
8 Enter qualifying distributions from	n Part XII, lı	ne 4						8		
If line 8 is equal to or greater than See the Part VI instructions	line 7, che	ck the box in Part VI, line	1b, and comp	plete that part usin	ıg a 1	% tax	rate			

8b

10

Х

Х

See Statement 4

If "Yes," complete Part II, col. (c), and Part XV.

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

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)

year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If Yes, attach a schedule listing their names and addresses

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

	Rescuton Toundation			
Pa	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ http://corescancer.org			
14	The books are in care of ▶ John F. Yee Telephone no ▶617-62	1-0	020	
	Located at ▶83 Cambridge Parkway Unit W 802, Cambridge, MA ZIP+4 ▶02			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
Ρε	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
12	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(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? Yes X No			
	All and the second section for the second se			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(5) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after termination of government service. If terminating within 90 days)			
	or If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	45		
		1b		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	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			v
	before the first day of the tax year beginning in 2009?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
2	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? Yes X No			
	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
0	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<u> </u>	!		
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		
	during the year?			
t	o if "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		•	
	Form 4720, to determine if the foundation had excess business holdings in 2009.)	3b		
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
t	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X

				
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1) <u>. If none</u>	, 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				
	\dashv			
	_1			
Total number of other employees paid over \$50,000				

923551 02-02-10

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I	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 statistica number of organizations and other beneficiaries served, conferences convened, research papers produc	Il information such as the ed. etc	Expenses
1 N/A		
		<u> </u>
2		
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line	20 1 and 2	Amount
1 Not Applicable	53 1 4110 2	Airount
Not rippilousic		
		0.
2		
		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2009)

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	20,089.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	20,089.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	20,089.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	301.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	19,788.
6	Minimum Investment return. Enter 5% of line 5 Adjusted for Short Tax Period	6	930.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part)	d certain	
1	Minimum investment return from Part X, line 6	1	930.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	930.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	930.
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	930.
-	art XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		20 550
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	29,558.
	Program-related investments - total from Part IX-B	1b	<u>U.</u>
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	
	Cash distribution test (attach the required schedule)	3b	20 EEO
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	29,558.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	29,558.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies fo	or the section

Part XIII	Undistributed	Income	(see instructions
Lair VIII	Olidistributed	HICOHIG	(See manuchom

1 Distributable amount for 2009 from Part XI, time 7			(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Item 7 O O O O O O O O O O O O O O O O O O	1	Distributable amount for 2009 from Part XI.				
2 Ludisimulations carryover, if any, to 2009 a From 2004 From 2005 From 2005 From 2005 From 2006 From 2006 From 2006 From 2008 From 2009 From 2008 From 2008 From 2009	•	·				0.
a Enter amount for 2008 only b Total for prior years Sexess distributions carryever, if any, to 2009 a From 2006 From 2006 From 2006 From 2007 From 2008 1 Total of lens Sa through 4 Qualifying distributions for 2009 from 2007 a Applied to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied for 2008 distributions out of corpus (Election required - see instructions) Frateal and self-induction after or corpus (Election required - see instructions) Frateal and self-induction after or corpus (Election required - see instructions) Frateal and self-induction after or corpus (Election required - see instructions) Frateal and self-induction after or corpus (Election required - see instructions) Frateal and self-induction after or corpus (Election required - see instructions) Frateal and self-induction after or corpus (Election required - see instructions) Frateal and self-induction after or corpus (Election required - see instructions) Frateal and self-induction after or corpus (Election required - see instructions) Frateal and self-induction after or corpus (Election required - see instructions) O - Corpus (Election required - see instructions) Frateal and self-induction column as indicated believe. O - Corpus (Election required - see instructions) O - Corpus (Election or column as indicated believe.) O - Corpus (Election of prory years' undistributed income for 2008 Subtract line 4 from line 2a Exable amount - see instructions O - Corpus (Election search of prory years' undistributed income for 2008 Subtract line 4 from line 2a Exable amount - see instructions O - Corpus to satisfy requirements imposed by section 170(0)(1)(1) or 494(2)(13) as been previously assessed O - Corpus to satisfy requirements imposed by section 170(0)(1)(1) or 494(2)(13) as a been previously assessed O - Corpus to satisfy requirements imposed by section 170(0)(1)(1) or 494(2)(13) as a section 2005 D - Excess	2	· ·	* '	 	***	······································
3 Excess distributions carryover, if any, to 2009 a From 2004 b From 2005 e From 2006 d From 2007 e From 2008 1 Total of thes 3 through e 4 Qualifying distributions for 2009 from Part XI, lime 4 ™ S N / A 4 Applied to undistributed more of prore part XI, lime 4 ™ S N / A 4 Applied to undistributed more of prore part XI, lime 4 ™ S N / A 4 Applied to undistributed more of prore part XI, lime 4 ™ S N / A 4 Applied to undistributed more of prore part XI, lime 4 ™ S N / A 4 Applied to undistributed more of prore part XI, lime 4 ™ S N / A 4 Applied to undistributed more of prore part XI, lime 4 ™ S N / A 4 Applied to undistributed more of prore 0		-			0.	
2		-	Ha Himinia and man make	######################################		
a From 2004 b From 2005 c From 2006 d From 2007 e From 2008 1 Total of lines 3 at through a O . Outlinging distributions for 2009 from Part XII, line 4 > S N/A Applied to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied to 2008 starbutions of proof years (Election required - see instructions) C related as distributions out of corpus (Election required - see instructions) O . Election required - see instructions) O . Applied to 2009 distributions amount Applied to 2009 distributions amount O . Bernaming amount distributed du of corpus Election required - see instructions) O . C . Election required - see instructions D . Elements and the see an explained to 2000 If the new total of each column as indicated below: I a Corpus Assume 3t, 4c, and 46 Subtract line 40 from line 2b C Enter the amount of prory years' undistributed income Subtract line 40 from line 2b C Enter the amount of prory years' undistributed income Subtract line 44 from line 2b C Enter the amount of prory years' undistributed income Subtract line 44 from line 2b C Enter the amount of prory years' undistributed income Subtract line 44 from line 2b C Enter the amount of prory years' undistributed income for 2008 Subtract line 44 from line 2b Taxable amount - see instructions C Indistributed more for 2008 Subtract line 4a from line 2b Taxable amount - see instructions C Indistributed more for 2008 Subtract line 4a from line 2 Taxable amount - see instructions O . Amounts treated as distributions out of corpus to saltsy requirements imposed by section 1700 (1/17) or 4942(0/13) E Excess from 2005 E Excess from 2007 Excess from 2008 E Excess from 2009	-			0.		
a From 2004 b From 2005 c From 2006 d From 2007 e From 2008 1 Total of lines 3 at through a O . Outlinging distributions for 2009 from Part XII, line 4 > S N/A Applied to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied to 2008 starbutions of proof years (Election required - see instructions) C related as distributions out of corpus (Election required - see instructions) O . Election required - see instructions) O . Applied to 2009 distributions amount Applied to 2009 distributions amount O . Bernaming amount distributed du of corpus Election required - see instructions) O . C . Election required - see instructions D . Elements and the see an explained to 2000 If the new total of each column as indicated below: I a Corpus Assume 3t, 4c, and 46 Subtract line 40 from line 2b C Enter the amount of prory years' undistributed income Subtract line 40 from line 2b C Enter the amount of prory years' undistributed income Subtract line 44 from line 2b C Enter the amount of prory years' undistributed income Subtract line 44 from line 2b C Enter the amount of prory years' undistributed income Subtract line 44 from line 2b C Enter the amount of prory years' undistributed income for 2008 Subtract line 44 from line 2b Taxable amount - see instructions C Indistributed more for 2008 Subtract line 4a from line 2b Taxable amount - see instructions C Indistributed more for 2008 Subtract line 4a from line 2 Taxable amount - see instructions O . Amounts treated as distributions out of corpus to saltsy requirements imposed by section 1700 (1/17) or 4942(0/13) E Excess from 2005 E Excess from 2007 Excess from 2008 E Excess from 2009	3	Excess distributions carryover, if any, to 2009		- 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1	**************************************	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
b From 2005 c From 2008 d From 2007 e From 2008 1 Total of lines 3s through e 4 Qualifying distributions for 2009 from Part XII, line 4 ≥ S N/A a Applied to 2008, but not more than line 2a b Applied to undistributed incorne of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributible amount A Applied to 2009 distributible amount Bernaming amount distributed out of corpus (Election required - see instructions) d Applied to 2009 distributible amount d Remaining amount distributed out of corpus (Election required - see instructions) d Applied to 2009 distributible amount D C	-	į į				
E From 2006 d From 2007 d From 2007 d From 2007 e From 2008 1 Total of lines Sa through e 0 - 1 Coularlying distributions for 2009 from Part XI, line 4 ► S N/A a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) C Fradet as distributions out of corpus (Election required - see instructions) C Applied to 2008 distributable amount e Remaining amount distributed out of corpus C Excess authouse-everyower registed is 2009 C - C - C - C - C - C - C - C						
d From 2007 e From 2008 e From 2008 1 Total of fines 3a through e 4 Qualifying distributions for 2009 from Part XII, lims 4 h						
e From 2008		· · · · · · · · · · · · · · · · · · ·				
I Tatal of lines 3a through e 4. Qualifying distributions for 2009 from Part XII, line 4 № \$ N/A A popiled to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied to 2009, but not more than line 2a Applied to 2009, but not more than line 2a Applied to 2009 distributions out of corpus (Election required - see instructions) 4. Applied to 2009 distributable amount 8. Remaining a mount distributed out of corpus 5. Excess distributions carryover applied to 2009 7. Enter the net total of each column as indicated below: 8. Corpus Add lines 3t. 4c. end 4e. Subtrect line 5 8. Prior years' undistributed morem Subtract line 4 from line 2b 8. Enter the net situation on which the section 494(2a) tax has been previously assessed 9. Subtract line 6c from line 6b Taxable amount or 2008. Subtract line 4 a from line 6b Taxable amount rise ensist? 1. Undistributed income for 2008 Subtract line 4 a from line 6b Taxable amount rise ensist? 1. Undistributed income for 2008 Subtract line 4 a from line 6b Taxable amount rise ensist? 1. Undistributed income for 2009 Subtract lines 4 and 5 from line 1. This amount must be distributed in 2010 7. Amounts treated as distributions out of corpus to astisty requirements imposed by section 1700(1)(1)(1) or 4942(1)(3) 8. Excess form 2005 8. Excess from 2006 9. Excess from 2006 10. Excess from 2007 10. Analysis of line 9 12. Excess from 2006 13. Excess from 2007 14. Excess from 2007 15. Excess from 2007 16. Excess from 2007 16. Excess from 2007 16. Excess from 2007 17. Amounts treated as distributions carryover from 2004 18. Excess from 2006 19. Excess from 2006 10. Excess from 2007 10. Excess from 2007 10. Excess from 2009		· · · · · · · · · · · · · · · · · · ·				
4 Qualifying distributions for 2009 from Part XII, line 4 ► S N/A Applied to undistributed income of prior years (Election required - see instructions) 1 Treated as distributions out of corpus (Election required - see instructions) 4 Applied to 2009 distributable amount 8 Remaining amount distributed out of corpus 5 Excess distributions curryower applied to 2009 9 Compared an explaining amount of the same amount must be above in column (a) 6 Enter the net total of each column as indicated below: 3 Corpus Add intens 31, 4c, and 4e Submert inte 5 b Prior years' undistributed income Subtract line 4b from line 2b • Cate the amount of prior years' undistributed income for which a notice of definiency has been inseud, or on which the section 494(2) lax has been previously assessed 4 Subtract line 6c from line 6b Taxable amount - see instructions a Undistributed income for 72008 Subtract lines 4d from line 2 Taxable amount - see instructions a Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 7 Amounts treated as distributions out of corpus to safety requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess form line 5 or line 7 9 Excess form line 6 O . O . O . Analysis of line 9 a Excess from 2006 b Excess from 2007 C Excess from 2009	-		0.			
Part XI, Ine 4 ► S N/A a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) (Election required - see instructions) (Election required - see instructions) (Applied to 2009 distributable amount defination amount distributed out of corpus (Election required - see instructions) 0		-				
a Applied to 2008, but not more than line 2a b Applied to undistributed income of priory years (Election required -se einstructions) c Treated as distributions out of corpus (Election required -se instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus CE-beces distributions carryove applied to 2009 diff an amount appears in column (a). The same amount must be abrown column (a). 6 Enter the net total of each follumn as indicated below: 8 Corpus Add lines 34.6., and 4e. Subtract line 5 b Prior years' undistributed income Subtract line 4 brom line 2b 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 8 Ubdract line 6c from line 6b Taxable amount - see instructions e Undistributed income for 2009 Subtract line 4 a from line 21 Taxable amount - see instructions e Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 7 Amounts treated as distributions out of corpus to sabisty requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess form 1000 hine 5 or line 7 9 Excess distributions carryover from 2004 not applied on line 5 or line 7 9 Excess from 2006 e Excess from 2009 Excess from 2009 Excess from 2009 Excess from 2009 Excess from 2009 Excess from 2009	7					
b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount of the Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 distributions carryover to 2010. Subtract line 4 bit from line 2 bit of the seens 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 d Subtract line 6c from line 6b Taxable amount - see instructions during the complete of the	•				0.	
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b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which this section 4942(a) lax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see instr 1 Undistributed income for 2008 Subtract line 4a from line 2 This amount must be distributed in 2010 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2004 not applied on line 5 or line 7 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 0 Analysis of line 9 a Excess from 2005 b Excess from 2006 c Excess from 2006 c Excess from 2008 d Excess from 2008 d Excess from 2008 d Excess from 2008	а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
Inne 4b from line 2b		•				
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f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2004 not applied on line 5 or line 7 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 0 Analysis of line 9 a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2009	ε	Undistributed income for 2008 Subtract line			_	
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corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8				 	WW-11-4-1	U •
section 170(b)(1)(F) or 4942(g)(3) 8	7					
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 0 Analysis of line 9 a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2009			•			
not applied on line 5 or line 7		section 170(b)(1)(F) or 4942(g)(3)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 0 Analysis of line 9 a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2009	8	Excess distributions carryover from 2004				
Subtract lines 7 and 8 from line 6a		not applied on line 5 or line 7	0.			
Analysis of line 9 a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2009	9		-			
a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2009		Subtract lines 7 and 8 from line 6a	0.			
b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2009	10	Analysis of line 9				
c Excess from 2007 d Excess from 2008 e Excess from 2009						
d Excess from 2008 e Excess from 2009	t	Excess from 2006				
e Excess from 2009	(Excess from 2007				
	(Excess from 2008				
	_	Excess from 2009		<u> </u>		

Part XIV Private Operating F	oundations (see ins		I-A, question 9)	N/A				
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating						
foundation, and the ruling is effective for			▶					
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
2 a Enter the lesser of the adjusted net	Tax year	•	Prior 3 years					
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total			
investment return from Part X for								
each year listed								
b 85% of line 2a								
c Qualifying distributions from Part XII,								
line 4 for each year listed								
d Amounts included in line 2c not								
used directly for active conduct of								
exempt activities								
e Qualifying distributions made directly								
for active conduct of exempt activities								
Subtract line 2d from line 2c								
3 Complete 3a, b, or c for the alternative test relied upon								
a "Assets" alternative test - enter								
(1) Value of all assets		<u> </u>	ļ					
(2) Value of assets qualifying								
under section 4942(j)(3)(B)(i)								
b "Endowment" alternative test - enter 2/3 of minimum investment return								
shown in Part X, line 6 for each year								
listed								
c "Support" alternative test - enter								
(1) Total support other than gross investment income (interest,								
dividends, rents, payments on								
securities loans (section								
512(a)(5)), or royalties)				 				
(2) Support from general public and 5 or more exempt								
organizations as provided in								
section 4942(j)(3)(B)(III) (3) Largest amount of support from			1					
an exempt organization								
(4) Gross investment income								
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5.000 or m	ore in assets			
at any time during t				•				
1 Information Regarding Foundation								
a List any managers of the foundation wh	_	than 2% of the total con	tributions received by the	foundation before the clo	se of any tax			
year (but only if they have contributed r								
John F Yee								
b List any managers of the foundation wh			(or an equally large porti	on of the ownership of a p	artnership or			
other entity) of which the foundation ha	s a 10% or greater interes	st						
None								
2 Information Regarding Contribut								
Check here ► X If the foundation of	only makes contributions t	o preselected charitable	organizations and does i	not accept unsolicited requ	uests for funds If			
the foundation makes gifts, grants, etc				omplete items 2a, b, c, an	0 0			
a The name, address, and telephone num	ber of the person to whor	n applications should b	e addressed					
								
b The form in which applications should l	oe submitted and informa	tion and materials they s	snoula include					
c Any submission deadlines								
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable field:	s, kinds of institutions, or	other factors				
,,	,		•					
								

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year 501(c)3 10,000. Sylvester Comprehensive None Cancer Research Cancer Center PO Box 016960 Miami, FL 33101 10,000. **▶** 3a Total **b** Approved for future payment None Total

Form **990-PF** (2009)

923611 02-02-10

Form 990-PF (2009)

Part XVI-A	Analysis	of Income-	Producing	Activities
	Allalysis	or medine-	rroducing	Acuville

Enter gross amounts unless otherwise indicated	Unrelate	ed business income		ided by section 512, 513, or 514	(8)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		2000		
a	J				
b					· -
C			L		
d					<u> </u>
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments]				
4 Dividends and interest from securities			14	3.	
5 Net rental income or (loss) from real estate:	· · · · · · · · · · · · · · · · · · ·				
a Debt-financed property	<u></u>		·	<u> </u>	
•					
b Not debt-financed property			-		
6 Net rental income or (loss) from personal					
property			 		
7 Other investment income			 		
8 Gain or (loss) from sales of assets other					
than inventory			ļ		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a			<u> </u>		
b					
· c	L		L		
d					
6					
12 Subtotal Add columns (b), (d), and (e)		0.		3.	<u>0.</u> 3.
13 Total. Add line 12, columns (b), (d), and (e)				13	3.
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to	the Ace	omplishment of Ex	/omn	at Durnosas	
reationship of Activities to	ine Acc		emp	t Furposes	
Line No. Explain below how each activity for which incon			contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than b	y providing fu	inds for such purposes)			
Not Applicable					
			_		·
					·
				 	
923621 02-02-10					Form 990-PF (2009)
					rom 990-PF (2009)

<u>Form 990-</u>		rch Foundat	ion		27-0950	706	Pa	ge 13
Part X	Information Re Exempt Organ		ers To and Transact	ions and	Relationships With Nonchar	ritable	•	
1 Did th	ne organization directly or indi		ne following with any other or	ganization de	escribed in section 501(c) of	<u> </u>	Yes	No
	ode (other than section 501(c							
a Trans	sfers from the reporting found	ation to a noncharitable	exempt organization of					
(1) (1a(1)		X
	Other assets					1a(2)		X
	r transactions	hla				45/4		v
• •	Sales of assets to a noncharita Purchases of assets from a no	• •	orzation			1b(1) 1b(2)		X
• •	Rental of facilities, equipment,	. •	nization			1b(3)		X
	Reimbursement arrangements					1b(4)		X
	oans or loan guarantees					1b(5)		X
(6) F	Performance of services or me	embership or fundraising	solicitations			1b(6)		X
c Shari	ng of facilities, equipment, ma	uling lists, other assets, o	or paid employees			10		X
	•	· ·	• • • • • • • • • • • • • • • • • • • •	-	show the fair market value of the goods, o		ets,	
				irket value in a	any transaction or sharing arrangement, si	how in		
	nn (d) the value of the goods, (b) Amount involved			00	(4) 5			
(a) Line no	(b) Amount mvoived	(c) Name of nor	ncharitable exempt organization	011	(0) Description of transfers, transactions, and s	snanng an	rangeme	nts
		<u></u>	N/A		- 			
 .								
								
_	-							
			····································					
·· <u>·</u>		-						
	<u> </u>							
	e foundation directly or indirec	~		pt organization		_		_
	ction 501(c) of the Code (othe		or in section 527?		L.	Yes	X	No
b If Ye	s," complete the following sch (a) Name of org		(b) Type of organ	uzation	(c) Description of relations	nin.		
	N/A	Janization	(b) Type of organ	112411011	(e) bescription of relations	p		
								
		······································					-	
	penalties of perjury, I declare that I I moved the perjury, I declare that I I				and to the best of my knowledge and belief, it is tany knowledge	true, corre	ect,	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	LI FU	1 57	2/11 .				
2 c	lanature of officer or trusted	pringer. Je	Peter 1	2/11	Trustee			
<u> </u>	Ignature of officer or trustee	104	Date	Date	Title Check if Prepare	r's identif	ying nun	nber
Sign Here	Preparer's signature	. a(1) 47/Un	liel	5	12/11 self- employed >			
Sig aid arer's	Firm's name (or yours Ryan	& Werlich	CPAs		EIN			
Sign Paid Preparer's Use Only		Main Street			- City			
	address, and ZIP code Med w				Phone no (508)	<u>5</u> 3	3-9	800
						rm 990		

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization
Arthur R. Cores Esophageal Cancer
Research Foundation

Organization type (check one):

Employer identification number 27-0950706

Filers of:		Section	n:							
Form 990	or 990-EZ	<u> </u>	01(c)() (enter number) organ	ızatıon					
		4 <u>9</u>	947(a)(1) r	onexempt charitable tr	ust not treated as	a private fo	undation			
		<u> </u>	27 politica	l organization						
Form 990-	PF	X 5	01(c)(3) ex	empt private foundation	n					
		4	947(a)(1) r	nonexempt charitable tr	ust treated as a p	rivate found	ation			
		5	01(c)(3) ta	xable private foundation	n					
Note. Onl	y a section 501(c)(7	7), (8), or	r (10) orga	eneral Rule or a Specia nization can check box on the control of the control 90-EZ, or 990-PF that re	es for both the Ge					m any one
	or an organization complete complete contributor.			90-EZ, or 990-PF that re	eceivea, auning the	- -		- —	property) from	
Special R	ules									
5	609(a)(1) and 170(b)(1)(A)(vi	ı), and rece	ing Form 990 or 990-EZ eived from any one con II, line 1h or (ii) Form 99	tributor, during the	e year, a con	tribution of t			
á	aggregate contribut	tions of i	more than	anization filing Form 99 \$1,000 for use exclusiv r animals. Complete Pa	vely for religious, c					
1 1	contributions for us f this box is checked ourpose. Do not co	se <i>exclus</i> ed, enter mplete a	sively for re r here the t any of the	anization filing Form 99 eligious, charitable, etc., total contributions that parts unless the Gener is of \$5,000 or more du	, purposes, but th were received dui ral Rule applies to	ese contribu 1ng the year	itions did not for an <i>exclus</i>	t aggregate sively religio	to more than ous, charitable	\$1,000. e, etc.,
Caution.	An organization th	at is not	covered b	by the General Rule and	l/or the Special Ri	ıles does no	t file Schedu	lle B (Form 9	990, 990-EZ,	or 990-PF),

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

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

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

Name of organization Arthur R. Cores Esophageal Cancer Research Foundation Employer identification number

27-0950706

Lat.	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Arthur R Cores 1455 Ocean Drive #1205 Miami Beach, FL 33139	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	John F Yee 83 Cambridege Pkwy #W802 Cambridge , MA 02142	\$\$ 18,412.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	Steve and Lynn Heslinga 1649 Hyannis Road Barnstable, MA 02630	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page of

of Part II

Name of organization

Employer Identification number

Arthur R. Cores Esophageal Cancer Research Foundation

27-0950706

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			990, 990-EZ, or 990-PF) (

of Part III

Employer identification number Name of organization Arthur R. Cores Esophageal Cancer Research Foundation 27-0950706 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating Part III more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, chantable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form 990-PF Divider	nds and	Inter	est from	Secur	ities	Statement	1
Source		Gross	Amount		tal Gains vidends	Column (A Amount	7)
Wells Fargo	,	· · 	3.		0.		3.
Total to Fm 990-PF, Part I,	ln 4		3.		0.		3.
Form 990-PF		Legal	Fees			Statement	2
Description	Expe	a) nses Books	(b) Net Invenent Inc		(c) Adjusted Net Incom		
Legal Fees		8,678.		0.		8,6	78.
To Fm 990-PF, Pg 1, ln 16a	=======================================	8,678.		0.		8,6	78.
Form 990-PF	0	ther E	xpenses			Statement	3
Description	Expe	a) nses Books	(b) Net Invenent Inc		(c) Adjusted Net Incom		
Postage Office Supplies Foundation Launch/Awareness Website	1	56. 152. 0,481. 93.		0. 0. 0.		10,4	56. 52. 81. 93.
To Form 990-PF, Pg 1, ln 23	1	0,782.		0.		10,7	82

Explanation

The taxpayer's main office is in Florida. Florida does not require the filing of the Form 990-PF with the Attorney General. The taxpayer did not solicit funds and therefore the filing of a 990-PF with the state is not required.

The taxpayer has filed the 990-PF witht the Massachusetts Attorney General.

Form 990-PF List	of Substantial Contributors Part VII-A, Line 10	Statement	5
Name of Contributor	Address		
Arthur R. Cores	1455 Ocean Drive #1205 Miami Beach, FL 33139		
John F Yee	83 Cambridge Pkwy #W802 Cambridge, MA 02142		
Steve and Lynn Heslinga	1649 Hyannis Road Barnstable, MA 02630		

Form **8868**(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	ightharpoons X
 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of 	
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	ly 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 o	complete
Part I only	▶ □
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to reques	at an extension of time
to file income tax returns	t arr externor or time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extended below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 elect (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electroning www.irs.gov/efile and click on e-file for Chanties & Nonprofits.	ronically if (1) you want the additional roonsolidated Form 990-T. Instead,
Type or Name of Exempt Organization	Employer identification number
print Arthur R. Cores Esophageal Cancer	
Research Foundation	27-0950706
File by the due date for filing your P.O. Box 190903	
return See City, town or post office, state, and ZIP code. For a foreign address, see instructions.	· · · · · · · · · · · · · · · · · · ·
Miami, FL 33119	
Check type of return to be filed (file a separate application for each return):	
	n 4720
	n 5227
The state of the s	n 6069
X Form 990-PF	n 8870
box ▶ . If it is for part of the group, check this box ▶ . and attach a list with the names and EINs of	f this is for the whole group, check this 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 February 15, 2011, to file the exempt organization return for the organization name	
is for the organization's return for:	
calendar year or	
► X tax year beginning JUL 23, 2009 , and ending JUN 30, 2010	· ·
2 If this tax year is for less than 12 months, check reason: X 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 \$ 0.
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 \$ 0.
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Fo	orm 8879-EO for payment instructions.
LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.	Form 8868 (Rev. 4-2009)

r Form 8868 (Re	v 1-2011)					Page 2
 If you are file 	ng for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this be	ох	>	X
	nplete Part II if you have already been granted an a			Form	8868	
	ng for an Automatic 3-Month Extension, comple					
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the onginal (no o	opies i	needed)	
Type or I	me of exempt organization			Emp	loyer identification	number
nrint KIL (thur R. Cores Esophageal (Cance:	r			
File by the	search Foundation	2	7-0950706			
extended Nu due date for P. (imber, street, and room or suite no. If a P.O. box, so 0.80×190903					
	y, town or post office, state, and ZIP code. For a formula, FL	oreign add	lress, see instructions			
Enter the Retu	rn code for the return that this application is for (file	e a separa	te application for each return)			0 4
Application		Return	Application			Return
ls For		Code	Is For			Code
Form 990		01				
Form 990-BL		02	Form 1041-A		·	08
Form 990-EZ		03	Form 4720			09
Form 990-PF		04	Form 5227			10
Form 990-T (se	c 401(a) or 408(a) trust)	05	Form 6069			11
	ust other than above)	06	Form 8870			12
	complete Part II if you were not already granted	_	<u>natic 3-month extension on a previou</u>	sly file	ed Form 8868.	
	are in the care of David A. Werlic	ch				
	No. ► <u>508-533-9800</u>		FAX No. $\triangleright 508 - 533 - 9810$)		
-	zation does not have an office or place of business				>	
	a Group Return, enter the organization's four digit (
	If it is for part of the group, check this box		ch a list with the names and EINs of all	memb	ers the extension is	for
	an additional 3-month extension of time until			77737	20 2010	
	ndar year, or other tax year beginning					
	year entered in line 5 is for less than 12 months, cl	neck reas	on. X Initial return	Final r	eturn	
	ange in accounting period					
	detail why you need the extension	ratha	r information negoci		to file a	
	lete and accurate return.	ja ciie.	Información necess	агу	to rire a	·
COMp.	rete and accurate return.					
8a If this ap	plication is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
nonrefun	dable credits. See instructions			8a	\$	0.
b If this ap	plication is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
tax paym	nents made. Include any prior year overpayment alle	owed as a	credit and any amount paid	L		
previous	sly with Form 8868			8b	\$	0.
c Balance	due. Subtract line 8b from line 8a Include your pa	yment wit	h this form, if required, by using			
EFTPS (E	Electronic Federal Tax Payment System) See instru			8c	\$	0.
	Signa	ture an	d Verification			
Under penalties on t is true, correct,	of perjury, I declare that I have examined this form, includi , and complete, and that I am authorized to prepare this fo	ing accomp irm.	anying schedules and statements, and to the	e best o	f my knowledge and be	elief,
Signature >	Title_			Date	>	
					Form 8868 (Re	ev. 1 <i>-</i> 2011)