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Eom. 99	0-PF
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Return of Private Foundation

OMB No 1545-0052

De	partme	ent of the Tr	aasury	1	Т	4947(a)(1) Nonex reated as a Priva	te Foundatio	n		୭ ⋒ n q
_		evenue Sa		Note. The foundation may	be able					2000
_				or tax year beginning			01 , 2009,			08/31,20 10
G	Che	eck all tr	hat apply	Initial return	ı	Initial return o	•	iblic charity		Final return
_			Name of fo	Amended return		Addres	ss change	J.,	Name change A Employer identifi	-4
	4	h. 100	Name of it	oundation					A Employer Identifi	cauon number
		he IRS bel.	MIITE E	AMILY FOUNDATION					13_	3801234
		rwise.	1	nd street (or P O box number if	mailie	not delivered to street	address)	Room/suit	 	
		rint	1	RS ASSOCIATES, LL		not delivered to street	address)	Roomisun	C D Lesebuone unumber (see b	age 10 of the instructions)
	or t	уре.		•					(21	2) 440-0800
		pecific		O WALL STREET- 11TH FLOOR or town, state, and ZIP code					C If exemption applicati	
1	nstru	ctions.	City Of tow	m, state, and zir code					pending, check here	
			NEW VO	RK, NY 10005					D 1 Foreign organizati	
_	Che	ook tuno			(-)(2)				2 Foreign organizati 85% test, check he	
7			of organiz						computation .	
Ţ				onexempt charitable trust		Other taxable pri			E If private foundation s	tatus was terminated
'						g method X C	ash Acc	ruai	under section 507(b)(1)(A), check here . P
	•	eai (iioi ▶ \$				specify) mn (d) must be or	cach hacie		F If the foundation is in	
F	/			venue and Expenses (The	<u> </u>	iii (a) iiiasi ba oi	Cash basis)	· · · · · · · · · · · · · · · · · · ·	under section 507(b)((d) Disbursements
	للن			renue and Expenses (The or columns (b), (c), and (d)	(8) Revenue and	(b) Net inve	stment	(c) Adjusted net	for charitable
				aly equal the amounts in age 11 of the instructions))		expenses per books	ıncom	e	income A / / A	purposes
_	4			······································	1-	0 -			IV/P	(cash basis only)
	1 2	Contribute Check	I If th	s, etc., received (attach schedule) . e foundation is not required to	\vdash					
	_	-	— alla	ch Sch B		132.		132.	0.:	AMCII 1
Revenue	3		•	nd temporary cash investments		152.		132.	0.	ATCH 1
	4			rest from securities						
				• • • • • • • • • • • • • • • • • • •	-					
				loss)		101C		-		
	ьa	Gross sa	or (loss) fron les pace for a	n sale of assets not on line 10 all	-	NONE				
	_	assets or	n line 6a					100/5-		
8	7	-	-	come (from Part IV, line 2)	$\overline{}$			NONE		
	8			ital gain						
	9 10 a	Gross sa	modificatio iles less retur vances				·· · · · · · · · · · · · · · · · · · ·			
	b		st of goods s	•						
	С	Gross p	profit or (loss	s) (attach schedule)						·
	11			ch schedule)						
	12			hrough 11	4	132.		132.	0.	
	13			ers, directors, trustees, etc		0.				
	14			lanes and wages						
es	15			ployee benefits						
Operating and Administrative Expenses	16 a		es (attach							
ğ	b	-		tach schedule) ATCH 2	10	4,100.		2,050.	0.	2,050
E C	С			fees (attach schedule)	SO					······································
آيَ	17	Interest								
Stra	18	Taxes (a	ttach schedul	(g),(see,page,14,of,the instructions)	1 oci	5,421.		0.	0.	0
Ĕ	19	Depreci	ation (atjac	h schedule and depletion .						
튀	20									
듷	21			s, and meetings						
ã	22		and publica							
5	23	•	•	tach schedule) ATCH 4		391.		16.	0.	375
핅	24			d administrative expenses.						
힖			s 13 throug	·		9,912.		2,066.	0.	2,425
이	25		•	grants paid		209,950.				209,950
	26			oursements Add lines 24 and 25		219,862.		2,066.	0.	212,375
	27		t line 26 fro							· · · · · · · · · · · · · · · · · · ·
-				expenses and disbursements	L	-219,730.				
				ome (if negative, enter -0-)				-0-		
- 1				ne (if negative enter -0-)					-0A	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

9E1410 2 000 32 4 30 E 526W 4/7/2011 11:34:21 AM V 09-9.3

JSA ** ATCH 3

	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
ų	art II	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	61,152.	26,530.	26 , 530.
	2	Savings and temporary cash investments	191,559.	6,452.	6,452.
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4				
		Pledges receivable Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
1SS		Investments - U S and state government obligations (attach schedule)			
•		Investments - corporate stock (attach schedule)			
		Investments - corporate bonds (attach schedule)			· · · · · · · · · · · · · · · · · · ·
	11	Investments - land, buildings,	·		
		Less accumulated depreciation			
	12	Less accumulated depreciation (attach schedule)			
	13	Investments - other (attach schedule)			·
	14	Land, buildings, and			
		equipment basis Less accumulated depreciation	İ		
	15	(attach schedule) Other assets (describe ATCH 5)	1,481,947.	1,481,947.	3,287,268.
	16	Total assets (to be completed by all filers - see the	1,101,51,1	2/102/51/1	3/20//2001
	10	instructions Also, see page 1, item I)	1,734,658.	1,514,929.	3,320,250.
\dashv	17	Accounts payable and accrued expenses	1773170301	1/311/323.	3,320,230.
	18	Grants payable			
S	19	Deferred revenue			
abilities		Loans from officers, directors, trustees, and other disqualified persons			
園	20 21	Mortgages and other notes payable (attach schedule)			
믿	22	Other liabilities (describe			
ı	22	Other liabilities (describe			
ŀ	23	Total liabilities (add lines 17 through 22)			
ᅱ	2.5				
İ		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
8		·			
alances	24	Unrestricted	-		
ā	25	Temporarily restricted			
	26	Permanently restricted		 	
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
딕		•	1 724 650	1 514 020	
ō	27	Capital stock, trust principal, or current funds	1,734,658.	1,514,929.	
성	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	<u>0.</u>	
Š	29	Retained earnings, accumulated income, endowment, or other funds	V.		
등	30	Total net assets or fund balances (see page 17 of the	1 724 (50	1 514 020	
- 1	•4	Instructions)	1,734,658.	1,514,929.	
1			1 724 650	1 514 020	
	A III	of the instructions)	1,734,658.	1,514,929.	
		Analysis of Changes in Net Assets or Fund		annath	
		net assets or fund balances at beginning of year - Part II, co			1 724 650
		of-year figure reported on prior year's return)			1,734,658.
2	Ente	r amount from Part I, line 27a r increases not included in line 2 (itemize) ▶ ATTACH		2	-219,730.
		4 0 4 0		1 . 1	1.534.000
		ines 1, 2, and 3			1,514,929.
		eases not included in line 2 (itemize)		5	0.
6_	Fotal	net assets or fund balances at end of year (line 4 minus line	e 5) - Part II, column (b), I	ine 30 6	1,514,929.
					Form 990-PF (2009)

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and 2-story b	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)				
1a NONE							
<u>b</u>	 						
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							
<u>b</u>			ļ	 			
<u>c</u>			-				
<u>d</u>							
Complete only for assets sho	wing gain in column (h) and own	ed by the foundation on 12/31/69		Gains (Col (h) g			
(i) F M V as of 12/31/69		(k), but not less t Losses (from co	han -0-) or				
а							
b							
<u>C</u>			-				
<u>d</u>			-				
е		If gain, also enter in Part I, line 7	 		•		
2 Capital gain net income or	(net capital loss)	If (loss), enter -0- in Part I, line 7	2		NIA		
3 Net short-term capital gain	or (loss) as defined in sections 1.	· · · · · · · · · · · · · · · · · · ·			1		
If gain, also enter in Part I,	line 8, column (c) (see pages 13	and 17 of the instructions)					
If (loss), enter -0- in Part I,	line 8	<u> </u>	3		<u> </u>		
		luced Tax on Net Investment Inc e section 4940(a) tax on net investmen					
If "Yes," the foundation does n	he section 4942 tax on the distrib ot qualify under section 4940(e)			🗆	Yes X No		
1 Enter the appropriate amo	unt in each column for each year	, see page 18 of the instructions before	e making a	any entries (d)			
Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	col (c))		
2008	365,449.		 		0.136612		
2007	413,032. 308,694.		-		0.099065		
2005	223,535.		+		0.057839		
2004	246,369	·	<u> </u>		0.074844		
	· · · · · · · · · · · · · · · · · · ·						
2 Total of line 1, column (d)			2		0.437369		
•	•	e the total on line 2 by 5, or by the					
number of years the found	lation has been in existence if les	s than 5 years	3		0 007474		
4 Enter the net value of non-	shortable use seests for 2000 fr		1 1		0.087474		
5 Multiply line 4 by line 3	chantable-use assets for 2009 in	om Part X, line 5	4	3,	0.087474		
		om Part X, line 5	5		· · · · · · · · · · · · · · · · · · ·		
6 Enter 1% of net investmen					120,043.		
	it income (1% of Part I, line 27b)		5		120,043.		
7 Add lines 5 and 6	it income (1% of Part I, line 27b) ns from Part XII, line 4 eater than line 7, check the bo		5 6 7		120,043. 272,923. 272,923.		
7 Add lines 5 and 68 Enter qualifying distribution If line 8 is equal to or gr	it income (1% of Part I, line 27b) ns from Part XII, line 4 eater than line 7, check the bo		5 6 7	using a 1% ta	120,043. 272,923. 272,923.		

orm 9	990-PF (2009)			13-3	801234						Page 4
Part	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940	(b), 49	40(e), or 4	948 - see	page	18 c	f the in	struct	ions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here	a	nd enter	r "N/A" on line	1 ,	$ \int \int$					
	Date of ruling or determination letter(attach copy of rulin	ng letter i	f neces	sary - see in	structions)		l				
	Domestic foundations that meet the section 4940(e) requirements				•	\setminus	1				0.
	here and enter 1% of Part I, line 27b										
	All other domestic foundations enter 2% of line 27b Exempt for					JI					
	of Part I, line 12, col (b)		30			1					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four	indations	only (Others enter	-0-1		2				
	Additional		_				3				0.
_	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fou					• • •	4				0.
			•			!	5				0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or le Credits/Payments	535, GINO	0-								
	•		6a		2,60	n. I					
			6b			0.					
						0.					
	Tax paid with application for extension of time to file (Form 8868)					-					
	Backup withholding erroneously withheld					-	_			2 4	500
	Total credits and payments Add lines 6a through 6d					1	7			۷, ۱	500.
	Enter any penalty for underpayment of estimated tax. Check here						8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ov						9				
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the	amount o					10				500.
	Enter the amount of line 10 to be Credited to 2010 estimated tax			<u> 2600.</u>	Refunded	1	11				
	t VII-A Statements Regarding Activities								1	T	Τ
1a	During the tax year, did the foundation attempt to influence any na	itional, s	state, c	or local leg	islation or	did if				Yes	No
	participate or intervene in any political campaign?								. <u>1a</u>		X
þ	Did it spend more than \$100 during the year (either directly or indire	ectly) fo	r politi	cal purpos	es (see pa	ge 19					l
	of the instructions for definition)?								. 1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of	the activ	rities a	and copies	of any ma	itenals	;				1
	published or distributed by the foundation in connection with the activities								1		
C	Did the foundation file Form 1120-POL for this year?								1c	<u> </u>	Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) im	posed di	unng th	пе уеаг					ŀ		
	(1) On the foundation >\$ (2) On foundation	manager	s 🕨 \$	·		0.			1		
е	Enter the reimbursement (if any) paid by the foundation during the	year fo	r polit	ical expen	diture tax	ımpos	ed		1		
	on foundation managers > \$ 0.								1		
	Has the foundation engaged in any activities that have not previously been	n reporte	d to the	e IRS?					2_		Х
	If "Yes," attach a detailed description of the activities			·							
3	Has the foundation made any changes, not previously reported to the	RS, in	ıts go	verning ins	trument, a	articles	of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a c		-	-					3	İ	Х
	Did the foundation have unrelated business gross income of \$1,000 or mo							, · · ·	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?		, , -						4b		N
5	Was there a liquidation, termination, dissolution, or substantial contraction	durina ti	 ne vear			• • •		• • •	5		X
-	If "Yes," attach the statement required by General Instruction T	g !!	, 5001	• • • •		• • •		• • • •	٠٦		
6	Are the requirements of section 508(e) (relating to sections 4941 throi	uah 494	5) sati	isfied either	•				1		
•	By language in the governing instrument, or	-g., -J-	J, 300	JUNEA CITIES							
	By state legislation that effectively amends the governing instrum	nent so	that	no mandat	on directi	one f	nat				
					•				6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the ye			complete P						X	
	• • •							^* .	·	 -	
	Enter the states to which the foundation reports or with which instructions) ► NEW YORK										
b	If the answer is "Yes" to line 7, has the foundation furnished a	сору с	f Form	n 990-PF	to the Att	omey	Ger	eral			
	(or designate) of each state as required by General Instruction G?If "No,"	attach e	xplana	tion					. 8b	Х	
9	Is the foundation claiming status as a private operating foundation	n withii	n the	meaning	of section	4942	2()(3)	or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning it	ın 2009	(see	instructions	for Part	XIV	on p	age			
	27)? If "Yes," complete Part XIV								9_		X
	Did any persons become substantial contributors during the tax							heir			
	names and addresses	,		-,					10	İ	x

Form 990-PF (2009)

3b

4a

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
 Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

orm	990-PF (200	9)		13-380	1234			Page 6
Par	t VII-B	Statements Regarding Activities for	Which Form 47	20 May Be Requir	ed (contin	ued)		
`5a	During the (1) Carry (2) Influe direct (3) Provide section (5) Provide purpose	e year did the foundation pay or incur any amount on propaganda, or otherwise attempt to influence ince the outcome of any specific public election (so ly or indirectly, any voter registration drive? de a grant to an individual for travel, study, or othe de a grant to an organization other than a chantable of 509(a)(1), (2), or (3), or section 4940(d)(2)? (see the for any purpose other than religious, chantable isses, or for the prevention of cruelty to children or sewer is "Yes" to 5a(1)-(5), did any of the transa	to legislation (section 4 ee section 4955), or to a similar purposes? le, etc., organization ee page 22 of the instruction, scientific, literary, or animals?	945(e))? o carry on, described in uctions) educational	Yes Yes Yes Yes Yes Yes	X No X No X No X No		
		ns section 53 4945 or in a current notice regard					5b	N/A
	If the anso because of If "Yes," a	tions relying on a current notice regarding disaster wer is "Yes" to question 5a(4), does the foundation to maintained expenditure responsibility for the grain trach the statement required by Regulations section.	n claim exemption from nt? on 53 4945-5(d)	m the tax	Yes	No		
6 a		undation, during the year, receive any funds, directional benefit contract?			Yes	X No		
ь		undation, during the year, pay premiums, directly					. 6b	Х
		6b, file Form 8870			()			
	•	ne during the tax year, was the foundation a party	•	•	Yes	X No	-	NIA
_		the foundation receive any proceeds or have any Information About Officers, Directors			Highly Pa	id Empl	7b	
		and Contractors						
1	LIST all O	ficers, directors, trustees, foundation man (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribut employee bend and deferred con	ons to ofit plans	(e) Expens other allo	
ĀŢ	TACHM	ENT 7		0.		0.		0
2	Compens	sation of five highest-paid employees (other "NONE."	r than those inclu	 ded on line 1 - see p	age 23 of th	e instruct	ions).	
		address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contribu employee t plans and d compens	enefit eferred	(e) Expens other allo	
NON	IE			0.		0.		0
Tota	I number	of other employees paid over \$50,000 .					Form 99	0-PF (2009)

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Part VIII Information and Contra	n About Officers, Directors, Trustees, Foundati actors (continued)	on Managers, Highly Paid Empl	oyees,
3 Five highest-paid indep	endent contractors for professional services (see p	age 23 of the instructions). If none,	enter "NONE."
	and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		NONE	(
Total number of others recr	eiving over \$50,000 for professional services		▶ NONE
Part IX-A Summary of	of Direct Charitable Activities		
List the foundation's four largest of organizations and other benefit	direct chantable activities during the tax year. Include relevant statistical ficialities served, conferences convened, research papers produced, etc.	al information such as the number	Expenses
1 PLEASE NOTE, TH	HE FOUNDATION IS NOT INVOLVED IN ANY	DIRECT	
CHARITABLE ACT	IVITIES. ITS PRIMARY PURPOSE IS TO	SUPPORT,	-
BY CONTRIBUTION	NS, OTHER ORGANIZATIONS EXEMPT UNDER	INTERNAL	(
2 REVENUE CODE SE	ECTION 501(C)(3).		,
3			
4			1
			ł
Part IX-B Summary of	of Program-Related Investments (see page 23 of	the instructions)	<u> </u>
	n-related investments made by the foundation during the tax year on lin		Amount
1 N/A			
`			
			1
2 N/A			
All other program-related investment	ments See page 24 of the instructions		

Pai	Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions.)	n foundatio	ns,
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 Fair market value of all other assets (see page 24 of the instructions)	1b	153,741.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	3,013,815.
d	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and	1d	3,167,556.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,167,556.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	47,513.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,120,043.
6	Minimum investment return. Enter 5% of line 5	6	156,002.
Pai	t XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here ▶ ☐ and do not complete this page.		
1	Minimum investment return from Part X, line 6	1	156,002.
2 a	Tax on investment income for 2009 from Part VI, line 5		
	Income tax for 2009 (This does not include the tax from Part VI) 2b		
	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	156,002.
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	156,002.
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)	6	· · · · · · · · · · · · · · · · · · ·
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	156,002.
Par	t XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	212,375.
b	Program-related investments - total from Part IX-B	1b	0.
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (pnor IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	212,375.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	212,375.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	ner the founds	
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see page	26 of the instruction	18)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years pnor to 2008	(c) 2008	(d) 2009
•	line 7				156,002.
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only			0.	
	Total for pnor years 20,20		0.		
3	Excess distributions carryover, if any, to 2009				
	From 2004				
b	From 2005 33, 871.				
	From 2006 89,324.				
ن	From 2006				
	041 075				
_		619,211.			
f	Total of lines 3a through e	015,211.			
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 212,375.				
а	Applied to 2008, but not more than line 2a	-		0.	
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				<u>.</u>
c	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				156,002.
	Remaining amount distributed out of corpus	56,373.			
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
U	indicated below:	ļ			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	675,584.			
b	Prior years' undistributed income Subtract	!			
	line 4b from line 2b		0.		
С	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				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions		0.		
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions			0.	
f	Undistributed income for 2009 Subtract lines				
•	4d and 5 from line 1 This amount must be				_
_	distributed in 2010				<u> </u>
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the	_		}	
	instructions)	0.			
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the				
	instructions)	40,991.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	634,593.			
10	Analysis of line 9			İ	
а	Excess from 2005 33, 871.				
b	Excess from 2006 89, 324.				
C	Excess from 2007 213, 050.				
d	Excess from 2008 241, 975.				
e	Excess from 2009 56, 373.				
			-		- 000 DE

Form	1990-PF (2009)				01234	Page 10
Pa	rt XIV Private Oper	ating Foundations	see page 27 of the	instructions and Par	t VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has i	received a ruling or d	etermination letter tha	t it is a private opera	iting	
	foundation, and the ruling	is effective for 2009, enter	the date of the ruling		>	
b	Check box to indicate whe				4942(j)	(3) or 4942(j)(5)
_		Tax year		Prior 3 years	<u></u>	1
2 a	Enter the lesser of the ad-	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	justed net income from Part I or the minimum investment	(2) 2008	(5) 2000	(0) 2001	(0) 2000	
	return from Part X for each					
	year listed					
þ	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not					
	used directly for active conduct					
_	of exempt activities	- · · ·				
e	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c					
,	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					1
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-		,			
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter					1
	(1) Total support other than					
	gross investment income			•		
	(interest, dividends, rents, payments on secunities					
	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 sup-					
	port from an exempt organization					
	(4) Gross investment income .					<u> </u>
Pa					ation had \$5,000	or more in assets
	at any time o	luring the year - see	e page 28 of the in	structions.)		
1	Information Regarding	Foundation Manager	s:			
а	List any managers of t	the foundation who h	ave contributed more	than 2% of the total	contributions receive	ed by the foundation
	before the close of any	tax year (but only if the	ey have contributed r	nore than \$5,000) (Se	ee section 507(d)(2))	
	ATTACHME	'NT 8				
<u>_</u>	List any managers of		own 10% or more of	the stock of a corno	ration (or an equally	large portion of the
•	ownership of a partners					large portion of the
	ominorarily of a partition	or ourse ondry) or		9100101		
	NONE					
<u></u>	Information Regarding	Contribution Grant	Gift Loan Scholarshi	n etc Programs:		
-	<u> </u>			• • •		
	Check here ► X if the	ne foundation only r	nakes contributions	to preselected charit	able organizations a	nd does not accept
	unsolicited requests for organizations under other				26 of the instruction	ns) to individuals of
	 	<u>_</u>			···	
а	The name, address, and	d telephone number of	the person to whom a	pplications should be a	ddressed	
			· · · · · · · · · · · · · · · · · · ·			
b	The form in which applied	cations should be subr	nitted and information	and materials they sho	uld include	
С	Any submission deadlin	es				
	•					
Ч.	Any restrictions or fir	nitations on awards	such as by geogra	phical areas charitat	ole fields kinds of	institutions or other
u	factors	anono on amaido,	and the second	Sioso, olisiitat		

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)	or substantial contributor	recipient	Contribution					
a Paid during the year SEE LIST ATTACHED	oi suostamua commoutor			209,950.				
Total			▶ 3a	209,950				
b Approved for future payment NONE	-		•	0				
Total			▶ 3b	0				

Part XVI-A Analysis of Income-Prod	ucing Act	ivities			
Enter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
a					···· - · · · · · · · · · · · · · · · ·
b					
с					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments	-				
3 Interest on savings and temporary cash investments			14	132.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property .					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
с					
d			1		
e			1		
12 Subtotal Add columns (b), (d), and (e)			1	132.	
13 Total Add line 12, columns (b), (d), and (e)		•		13	132.
(See worksheet in line 13 instructions on page 28 to					
Part XVI-B Relationship of Activities	to the Ac	complishment of Ex	cempt Purp	ooses	
Line No. Explain below how each activ					
the accomplishment of the for page 29 of the instructions)	oundation's	exempt purposes (o	ther than I	by providing funds for	such purposes) (See
N/A					
N/A				 	· · · · · · · · · · · · · · · · · · ·
					· ·
					.
					
					
					· · · · · · · · · · · · · · · · · · ·
	 				
				 	
				·····	
		·			

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

•		Exempt Orga	nizations									,
1	ın se	he organization directly ction 501(c) of the Co									Yes	No
а	organı Transf	zations? ers from the reporting foul	ndation to a nonc	haritable exempt organiza	ation of							
		ash								1a(1)		Х
		ther assets								1a(2)		Х
b	Other	transactions										
	(1) Sa	ales of assets to a noncha	ritable exempt org	ganization	. .		 .			1b(1)		X
	(2) Pu	urchases of assets from a	noncharitable exe	empt organization				. 		1b(2)		X
	(3) Re	ental of facilities, equipme	nt, or other assets	s				. .		1b(3)		X
	(4) R	eimbursement arrangeme	nts				 .			1b(4)		X
	(5) Lo	oans or loan guarantees						. .		1b(5)		X
	(6) Pe	erformance of services or	membership or fu	indraising solicitations						1b(6)		X
C		ig of facilities, equipment,	•							1c		X
d		answer to any of t					olumn (b)		•			
		of the goods, other			-							
	value	in any transaction or	sharing arrang	gement, show in colur	nn (d) the	value of	f the goods	s, other a	assets, or	service	es rec	ceived
(a)	Line no	(b) Amount involved	(c) Name of n	onchantable exempt organiza		<u>·</u>	otion of transfer	s, transactio	ns, and shanr	ig arran	gemen	ıts
		N/A			1	1/A			•			
												
									-			
	·											
									•			
			-				-					
_						•						
						-						
							-			·		
2a	Is the	foundation directly or	indirectly affiliat	ed with, or related to,	one or more	e tax-exe	empt organiz	ations de	scribed in F	_	_	¬
	sectio	n 501(c) of the Code (oth	er than section 5	601(c)(3)) or in section 52	27?				L	Ye	es 🗀	∐ No
b	If "Yes	s," complete the following:	schedule									
		(a) Name of organization		(b) Type of orga	nization		(c) Description	on of relationsh	np		
N	/A											
									 			
												
	Linder	penalties of perjury, I decla	are that I have ex	amined this return including	a accompanying	n schedul	es and staten	nents and	o the best of	f my k	nowled	ge and
	belief,	it is true earrect, and comp	plete Declaration of	of preparer (other than taxp	ayer or fiducian	y) is base	ed on all inform	nation of w	hich preparer	has a	ıу кло	wledge
		4 Valinging	1 <i>bH []</i> 11Nx	de-	1	5/5	///	TRUSTE	EΕ			
a	▶ -	gnature of officer or trustee	10 00100		D	ate		Title				
Sign Here	<u></u>	3			Date		<u> </u>		Preparer's			
пŤ	.			,			Check if self-employe	_M ▶□	number (Se page 30 of th			
Sig	ald arer's Only	Preparer's signature	\bigcirc		5/3/	.}	Con Chiploye		P014501		/	•
υ,	Paid Preparer's Use Only	Firm's name (or yours if	BCRS	SSOCIATES, LLC	<u>, ,</u>	-		EIN ▶	13-40781	47		
	£ 3	self-employed), address		ALL STREET - 11	TH FL						_	
		and ZIP code	NEW YO			1000	05	Phone no	212-44	0-0	800	
		·							F	nrm 99	0-PF	(2009)

MULE FAMILY FOUNDATION

13-3801234

SUPPLEMENTARY STATEMENTS

PART: XV

LINE: 2

SUPPLEMENTAL INFORMATION

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

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

ADJUSTED NET INÇOME	.0	0
NET INVESTMENT INCOME	132.	132.
REVENUE AND EXPENSES PER BOOKS	132.	132.
		TOTAL
	ď	
DESCRIPTION	INTEREST ON BDA	

ATTACHMENT 2

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	2,050.	2,050.
ADJUSTED NET INCOME	0.	0
NET INVESTMENT INCOME	2,050.	2,050.
REVENUE AND EXPENSES PER BOOKS	4,100.	4,100.
		TOTALS
DESCRIPTION	BCRS ASSOCIATES, LLC	

- TAXES FORM 990PF, PART I

CHARITABLE PURPOSES	000	0
ADJUSTED NET INCOME		0
NET INVESTMENT <u>INCOME</u>		• 0
REVENUE AND EXPENSES PER BOOKS	2,600. 2,821.	5,421.
DESCRIPTION	FEDL TAX - 1ST QTR EST 8/31/10 FEDL TAX - BAL DUE FYE 8/31/09	TOTALS

ATTACHMENT 4

FORM 990PF, PART I - OTHER EXPENSES

CHARITABLE PURPOSES 250. 125.	375.
ADJUSTED NET INCOME	0.
NET INVESTMENT INCOME	16.
REVENUE AND EXPENSES PER BOOKS 250. 125.	391.
	TOTALS
DESCRIPTION NYS FILING FEE PUBLICATION FEE INTEREST CHARGED	

	ENDING <u>FMV</u>	582,458. 2,704,810.	3,287,268.
ATTACHMENT 5	ENDING BOOK VALUE	68,687. 1,413,260.	1,481,947.
1	BEGINNING BOOK VALUE	68,687.	1,481,947.
FORM 990PF, PART II - OTHER ASSETS	DESCRIPTION	SILVER POINT CAPITAL OFFSHORE RESTRICTED SILVER POINT CAPITAL OFFSHORE UNRESTRICTED	TOTALS

ATTACHMENT	6	

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

ROUNDING 1.

TOTAL 1.

MULE FAMILY FOUNDATION

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	ERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 7
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
EDWARD A. MULE C/O BCRS ASSOCIATES, LLC 100 WALL STREET - 11TH FLOOR NEW YORK, NY 10005	TRUSTEE/AS NEEDED	.0	· 0	·
	GRAND TOTALS	0.	0.	0

ATTACHMENT 8

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

EDWARD A. MULE; C/O BCRS ASSOCIATES, LLC 100 WALL STREET.-11TH FL., NEW YORK, NY 10005

MULE FAMILY FOUNDATION CHARITABLE CONTRIBUTIONS EIN: 13-3801234

FYE 8/31/10

DATE	PAYEE/CITY,STATE	AMOUNT
9/1/2009	THE PATRONS PROGRAM/ADNY NEW YORK, NY	\$2,000
9/21/2009	CYSTIC FIBROSIS FOUNDATION BETHESDA, MD	1,500
10/5/2009	AMERICAN JEWISH COMMITTEE NEW YORK, NY	7,500
10/21/2009	FIRST PRESBYTERIAN CHURCH GREENWICH, CT	2,500
10/23/2009	LEUKEMIA & LYMPHOMA SOCIETY WHITE PLAINS, NY	25
10/27/2009	GREENWICH POLICE SILVER SHIELD ASSOCIATION GREENWICH, CT	200
10/30/2009	SMILE TRAIN NEW YORK, NY	250
11/2/2009	MIGRAINE RESEARCH FOUNDATION NEW YORK, NY	500
11/2/2009	SUSAN G. KOMEN FOR THE CURE NEW YORK, NY	300
11/10/2009	DEVELOPMENTS IN LITERACY GARDEN GROVE, CA	1,000
11/13/2009	GREENWICH SOCCER CLUB COS COB, CT	45
12/4/2009	CHAI LIFELINE NEW YORK, NY	10,000
12/28/2009	CASA VERDE HOME OF HOPE, INC. MT. VERNON, NY	1,000
12/30/2009	THE POSSE FOUNDATION, INC. NEW YORK, NY	500

MULE FAMILY FOUNDATION CHARITABLE CONTRIBUTIONS

EIN: 13-3801234 FYE 8/31/10

DATE	PAYEE/CITY,STATE	AMOUNT
1/4/2010	GREENWICH ACADEMY, INC. GREENWICH, CT	20,000
1/7/2010	GREENWICH COUNTRY DAY SCHOOL GREENWICH, CT	10,000
2/4/2010	GREENWICH COUNTRY DAY SCHOOL GREENWICH, CT	1,430
3/22/2010	VOLUNTEER HEALTH PROGRAM, LTD. PORT CHESTER, NY	5,000
3/26/2010	ROBIN HOOD FOUNDATION NEW YORK, NY	24,000
4/8/2010	U.S. HOLOCAUST MEMORIAL MUSEUM WASHINGTON, DC	2,500
4/19/2010	GREENWICH ACADEMY, INC. GREENWICH, CT	1,500
4/20/2010	BOYS & GIRLS CLUB OF GREENWICH GREENWICH, CT	500
4/20/2010	WATERSIDE SCHOOL, INC. STAMFORD, CT	2,000
5/3/2010	SAVE THE CHILDREN WESTPORT, CT	35,000
5/5/2010	AUDUBON CONNECTICUT GREENWICH, CT	1,300
5/7/2010	GREATER NEW YORK COUNCILS BOY SCOUTS OF AMERICA NEW YORK, NY	1,000
5/10/2010	GREENWICH ACADEMY, INC. GREENWICH, CT	950
5/10/2010	SMILE TRAIN NEW YORK, NY	250

MULE FAMILY FOUNDATION CHARITABLE CONTRIBUTIONS

EIN: 13-3801234 FYE 8/31/10

DATE	PAYEE/CITY,STATE	AMOUNT
5/13/2010	MIGRAINE RESEARCH FOUNDATION NEW YORK, NY	1,000
5/14/2010	UJA FEDERATION OF NY NEW YORK, NY	750
5/20/2010	BREAST CANCER ALLIANCE GREENWICH, CT	500
5/24/2010	WATERSIDE SCHOOL, INC. STAMFORD, CT	9,000
5/24/2010	THE GREENWICH LIBRARY GREENWICH, CT	500
5/26/2010	NATIONAL BREAST CANCER RESEARCH CENTER NEW YORK, NY	100
5/28/2010	BOYS & GIRLS HARBOR, INC NEW YORK, NY	5,000
5/28/2010	AMERICAN JEWISH COMMITTEE NEW YORK, NY	3,000
6/1/2010	INMOTION NEW YORK, NY	50,000
6/3/2010	LEUKEMIA & LYMPHOMA SOCIETY WHITE PLAINS, NY	50
6/3/2010	SUSAN G. KOMEN FOR THE CURE NEW YORK, NY	200
7/1/2010	CYSTIC FIBROSIS FOUNDATION BETHESDA, MD	2,500
7/2/2010	FRIENDS OF HIGH LINE NEW YORK, NY	1,000
7/20/2010	BOYS & GIRLS CLUB OF GREENWICH GREENWICH, CT	1,500

MULE FAMILY FOUNDATION CHARITABLE CONTRIBUTIONS

EIN: 13-3801234 FYE 8/31/10

DATE	PAYEE/CITY, STATE		AMOUNT
7/28/2010	SOUTHAMPTON VILLAGE PBA SOUTHAMPTON, NY		100
7/28/2010	RIGHT TO PLAY NEW YORK, NY		1,000
8/13/2010	MIGRAINE RESEARCH FOUNDATION NEW YORK, NY		1,000
	TOTAL	CONTRIBUTIONS*	\$209,950

*ALL CONTRIBUTIONS WERE MADE TO THE GENERAL PURPOSE FUND OF PUBLIC CHARITABLE ORGANIZATIONS EXEMPT UNDER SECTION 501 (c) (3) OF THE INTERNAL REVENUE CODE.

(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 ar	e filing for an Automatic 3-Month Extension, complete only Part I and check this box e filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (c	on page 2 of	this form).				
Part I	nplete Part II unless you have already been granted an automatic 3-month extension on a part Automatic 3-Month Extension of Time. Only submit original (no copies nee) FUIII 60					
	on required to file Form 990-T and requesting an automatic 6-month extension—check	this box and	i complet	te . ▶ []				
	prporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form income tax returns.	7004 to reque	est an ext	tension of				
one of the electronica returns, or	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au returns noted below (6 months for a corporation required to file Form 990-T). Howerly if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms a composite or consolidated Form 990-T. Instead, you must submit the fully completed and nore details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file f	ver, you can s 990-BL, 60 d signed pag	not file Fo 69, or 88 e 2 (Part I	orm 8868 70, group II) of Form				
Type or	Name of Exempt Organization	Employer identification number						
print	the state of the s	13-3801234						
File by the due date for	Number, street, and room or suite no. If a P.O. box, see instructions							
filing your return See	C/O BCRS ASSOCIATES, LLC 100 WALL STREET - 11TH FLOOR							
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10005							
Check typ	e of return to be filed (file a separate application for each return):							
☐ Form 9		□ F	orm 4720	כ				
Form 9	90-BL	☐ F	☐ Form 5227					
Form 9	□ F	☐ Form 6069						
☑ Form 9	90-PF	□ F	orm 8870	כ				
The books are in the care of ▶ BCRS ASSOCIATES, LLC Telephone No. ▶ 212-440-0811 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.								
until _ for the ► □	dest an automatic 3-month (6 months for a corporation required to file For APRIL 15 , 20 11 , to file the exempt organization return for the organization organization's return for: calendar year 20	named abov		tension is				
2 If this	tax year is for less than 12 months, check reason: Initial return Final return	Change in	account	ing period				
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tanny nonrefundable credits. See instructions.		\$	0.00				
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated ta			A 465 ==				
	ents made. Include any prior year overpayment allowed as a credit.		<u>\$</u>	2,600.00				
c Balan depos Syste	d, nt 3c	\$	0.00					
Caution. If	you are going to make an electronic fund withdrawal with this Form 8868, see Form 84							
	t instructions.							

•						i age =		
	e filing for an Additional (Not Automatic) 3-					▶ 🛭		
	y complete Part II if you have already been g			ously filed	Form 8	3868		
	e filing for an Automatic 3-Month Extension							
Part II	Additional (Not Automatic) 3-Month	Extension						
Type or	Name of exempt organization			Employer identification number				
print	MULE FAMILY FOUNDATION			13-3801234				
File by the extended	Number, street, and room or suite no. If a P.O.							
due date for								
filing your return See	City, town or post office, state, and ZIP code F	or a foreign ac	dress, see instructions					
instructions	NEW YORK, NY 10005							
Enter the F	Return code for the return that this application	n is for (file a	separate application for each return)			04		
Application		Return	Application			Return		
Is For		Code	Is For			Code		
Form 990		01	The second second	17. 7				
Form 990-BL		02	Form 1041-A	··		08		
Form 990-EZ		03	Form 4720	**************************************				
Form 990-PF		04	Form 5227	· · · · · · · · · · · · · · · · · · ·				
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069			10		
Form 990-T (trust other than above)		06	Form 8870			12		
STOP! Do r	not complete Part II if you were not already g	ranted an au	tomatic 3-month extension on a pre	viously fil	ed Forr			
	s are in the care of BCRS ASSOCIATE							
	e No ▶ 212-440-0811	·	No ► N/A					
• If the orga	inization does not have an office or place of l	business in th	ne United States, check this box			►□		
• If this is fo	r a Group Return, enter the organization's fo	ur digit Grou	p Exemption Number (GEN)		lf	this is		
	_	_	of the group, check this box	>	and	attach a		
list with the	names and EINs of all members the extensi	on is for						
	uest an additional 3-month extension of time		JULY 15 , 2	0 11				
5 For	r calendar year, or other tax year beginning _SEPTEMBER 1 , 20 09 , and ending _AUGUST 31 , 20 10							
6 If the	the tax year entered in line 5 is for less than 12 months, check reason I Initial return I Final return							
	hange in accounting period							
	te in detail why you need the extension ALL INFORMATION NECESSARY TO FILE A COMPLETE AND CURATE TAX RETURN IS NOT YET AVAILABLE.							
			<u> </u>					
					·			
8a If this	s application is for Form 990-BL, 990-PF, 99	0-T, 4720, o	r 6069, enter the tentative tax, less	any	T			
nonre	efundable credits. See instructions.		•	8a	\$	0.00		
b If the	s application is for Form 990-PF, 990-T,	4720. or 60	69, enter any refundable credits a		T			
	ited tax payments made Include any prior year overpayment allowed as a credit and any]			
	nt paid previously with Form 8868.				\$	2,600.00		
c Balar	nce due. Subtract line 8b from line 8a Include y	our payment	with this form, if required, by using EF1	PS Bb	<u> </u>			
	ronic Federal Tax Payment System) See instru			8c	\$	0.00		
	Sig	nature and	Verification					
Inder penalties ue, correct, and	of perjury, I declare that I have examined this form, in discomplete, and that I am authorized to prepare this form	cluding accompa		best of my k	nowledge	e and belief, it is		
ignature ► Willi Add Title ► CPA Date ► O4					4/15/	2011		
				F	orm 88	68 (Rev 1-2011)		