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# Return of Private Foundation

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

### Treated as a Private Foundation

2009

Department of the Treasury  
Internal Revenue Service

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

For calendar year 2009, or tax year beginning OCT 1, 2009, and ending SEP 30, 2010

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

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation <b>ALEXANDER EASTMAN FOUNDATION</b>		A Employer identification number <b>02-0222124</b>
	Number and street (or P.O. box number if mail is not delivered to street address) Room/suite <b>C/O WILLIAM STEELE AND ASSC., 40 STARK</b>		B Telephone number <b>(603) 622-8881</b>
	City or town, state, and ZIP code <b>MANCHESTER, NH 03101</b>		C If exemption application is pending, check here <input type="checkbox"/>
			D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>11,068,732.</b> (Part I, column (d) must be on cash basis)			F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	66,098.		N/A	
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments	58.	58.		STATEMENT 1
4	Dividends and interest from securities	238,575.	238,575.		STATEMENT 2
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	161,546.			
b	Gross sales price for all assets on line 6a	1,782,851.			
7	Capital gain net income (from Part IV, line 2)		161,546.		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss)				
11	Other income				
12	Total. Add lines 1 through 11	466,277.	400,179.		
13	Compensation of officers, directors, trustees, etc.	0.	0.		0.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees STMT 3	4,908.	0.		4,908.
b	Accounting fees STMT 4	23,851.	12,638.		11,213.
c	Other professional fees STMT 5	79,328.	35,000.		44,328.
17	Interest				
18	Taxes STMT 6	3,548.	0.		75.
19	Depreciation and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	3,877.	0.		3,877.
22	Printing and publications	3,753.	0.		3,753.
23	Other expenses STMT 7	2,725.	0.		2,725.
24	Total operating and administrative expenses. Add lines 13 through 23	121,990.	47,638.		70,879.
25	Contributions, gifts, grants paid	516,708.			516,708.
26	Total expenses and disbursements. Add lines 24 and 25	638,698.	47,638.		587,587.
27	Subtract line 26 from line 12.	<172,421.>			
a	Excess of revenue over expenses and disbursements				
b	Net investment income (if negative, enter -0-)		352,541.		
c	Adjusted net income (if negative, enter -0-)			N/A	

16p

**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only

	Beginning of year	End of year	
	(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>			
1 Cash - non-interest-bearing	66,106.	56,474.	56,474.
2 Savings and temporary cash investments			
3 Accounts receivable ▶			
Less allowance for doubtful accounts ▶	17,246.		
4 Pledges receivable ▶			
Less allowance for doubtful accounts ▶			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other disqualified persons			
7 Other notes and loans receivable ▶			
Less allowance for doubtful accounts ▶			
8 Inventories for sale or use			
9 Prepaid expenses and deferred charges			
10a Investments - U S and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis ▶			
Less accumulated depreciation ▶			
12 Investments - mortgage loans			
13 Investments - other STMT 8	10,487,699.	11,008,072.	11,008,072.
14 Land, buildings, and equipment basis ▶			
Less accumulated depreciation ▶			
15 Other assets (describe ▶ PREPAID TAXES )	7,659.	4,186.	4,186.
16 Total assets (to be completed by all filers)	10,578,710.	11,068,732.	11,068,732.
<b>Liabilities</b>			
17 Accounts payable and accrued expenses	7,183.	7,119.	
18 Grants payable	182,191.	184,287.	
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
22 Other liabilities (describe ▶ DUE TO AFFILIATE )	0.	140.	
23 Total liabilities (add lines 17 through 22)	189,374.	191,546.	
<b>Net Assets or Fund Balances</b>			
Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted	5,674,607.	5,862,171.	
25 Temporarily restricted			
26 Permanently restricted	4,714,729.	5,015,015.	
Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds			
28 Paid-in or capital surplus, or land, bldg, and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	10,389,336.	10,877,186.	
31 Total liabilities and net assets/fund balances	10,578,710.	11,068,732.	

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

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	10,389,336.
2 Enter amount from Part I, line 27a	2	<172,421.>
3 Other increases not included in line 2 (itemize) ▶ UNREALIZED GAIN ON INVESTMENTS	3	660,271.
4 Add lines 1, 2, and 3	4	10,877,186.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	10,877,186.

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a VANGUARD 500	P	VARIOUS	12/21/09
b MERIDIAN	P	VARIOUS	01/13/10
c MERIDIAN	P	VARIOUS	01/20/10
d MANAGERS	P	VARIOUS	08/05/10
e CAPITAL GAINS DIVIDENDS			

(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 500,000.		340,363.	159,637.
b 800,000.		802,860.	<2,860.>
c 339,361.		343,555.	<4,194.>
d 125,000.		134,527.	<9,527.>
e 18,490.			18,490.
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			159,637.
b			<2,860.>
c			<4,194.>
d			<9,527.>
e			18,490.

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	161,546.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	<div> <div>If gain, also enter in Part I, line 8, column (c)</div> <div>If (loss), enter -0- in Part I, line 8</div> </div>	3	N/A

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

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

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

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

☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	544,353.	8,424,935.	.064612
2007	602,503.	10,904,920.	.055251
2006	502,781.	11,369,982.	.044220
2005	476,262.	10,298,068.	.046248
2004	450,968.	9,673,575.	.046619

2 Total of line 1, column (d)	2	.256950
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.051390
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	9,579,380.
5 Multiply line 4 by line 3	5	492,284.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	3,525.
7 Add lines 5 and 6	7	495,809.
8 Enter qualifying distributions from Part XII, line 4	8	587,587.
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.		

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	3,525.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	3,525.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	3,525.
6	<b>Credits/Payments</b>		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	7,659.
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	7,659.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	4,134.
11	Enter the amount of line 10 to be <b>Credited to 2010 estimated tax</b> <input checked="" type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	11	0.

**Part VII-A Statements Regarding Activities**

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

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

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ► WWW.ALEXANDEREASTMAN.ORG

14 The books are in care of ► WILLIAM STEELE & ASSOCIATES Telephone no ► 1-603-622-8881  
 Located at ► 40 STARK STREET MANCHESTER, NH ZIP+4 ► 03101

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here ☐  
 and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A

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

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

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

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

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

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

N/A

Organizations relying on a current notice regarding disaster assistance check here

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

N/A

☐ Yes ☐ No

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

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

If "Yes" to 6b, file Form 8870.

6b

X

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

N/A

7b

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE ATTACHED LIST				
	0.00	0.	0.	0.

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

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

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

0

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

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

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

0

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

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

	Expenses
1 N/A	
2	
3	
4	

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

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

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
<b>Total.</b> Add lines 1 through 3	0.

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	9,460,069.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	265,190.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	9,725,259.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	9,725,259.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	145,879.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	9,579,380.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	478,969.

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

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	478,969.
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5	<b>2a</b>	3,525.
<b>b</b>	Income tax for 2009 (This does not include the tax from Part VI)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	3,525.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	475,444.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0.
<b>5</b>	Add lines 3 and 4	<b>5</b>	475,444.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	475,444.

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	587,587.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	587,587.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	3,525.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	584,062.

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

Form **990-PF** (2009)

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

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				475,444.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007	66,735.			
e From 2008	130,470.			
f Total of lines 3a through e	197,205.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 587,587.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				475,444.
e Remaining amount distributed out of corpus	112,143.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	309,348.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	309,348.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007	66,735.			
d Excess from 2008	130,470.			
e Excess from 2009	112,143.			

N/A

**b** Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(1)(3) or ☐ 4942(1)(5)

**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

(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 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(i)(3)(B)(iii)**

**(3) Largest amount of support from an exempt organization**

(4) Gross investment income

**Part XV** **Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)

## 1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

SEE ATTACHED

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

SEE ATTACHED

**c Any submission deadlines**

SEE ATTACHED

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

SEE ATTACHED

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

Recipient Name and address (home or business)	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
<b>a Paid during the year</b>				
SEE STATEMENT 9				
<b>Total</b>			<b>3a</b>	<b>514,611.</b>
<b>b Approved for future payment</b>				
GREATER DERRY ORAL HEALTH COLLABORATIVE 28 SOUTH MAIN STREET DERRY, NH 03038		ORG	TO SUPPORT THE PARTNERS IN HEALTH PROGRAM	54,286.
GREATER DERRY COMMUNITY HEALTH SERVICES 28 SOUTH MAIN STREET DERRY, NH 03038		ORG	FOR CONTINUATION OF THE AEF SCHOOL DENTAL PROGRAM	105,000.
DERRY RAIL AND TRAIL ALLIANCE 5 WILSON AVE DERRY, NH 03038		ORG	TO EXCAVATE TRAILS IN DERRY	25,000.
<b>Total</b>			<b>3b</b>	<b>184,286.</b>



## Part XVII

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

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

[illegible]

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

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

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

**Sign Here**

Signature of officer or trustee

Date \_\_\_\_\_

➤ Title

Preparer's  
signature

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

Carol A. Hales, CPA

Date \_\_\_\_\_

1/18/11

Check if self-employed	
------------------------	--

Preparer's identifying number
-------------------------------

P00049217

EIN ► 02-0383073

Phone no (603) 622-8881

Form **990-PF** (2009)

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

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

OMB No 1545-0047

**2009**

Name of the organization

Employer identification number

ALEXANDER EASTMAN FOUNDATION

02-0222124

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐

501(c)( ) (enter number) organization

☐4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐

527 political organization

Form 990-PF

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☒

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

**Special Rules**☐

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.☐For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ \_\_\_\_\_**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

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

Name of organization

Employer identification number

ALEXANDER EASTMAN FOUNDATION

02-0222124

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CHARLES BROOKS RES TR C/O BANK OF AMERICA NASHUA, NH 03064	\$ 4,552.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	LEON P. WIDGER TRUST C/O BANK OF AMERICA NASHUA, NH 03064	\$ 36,338.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

ALEXANDER EASTMAN FOUNDATION

02-0222124

**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
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

ALEXANDER EASTMAN FOUNDATION

02-0222124

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

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FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

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SOURCE	AMOUNT
SOVEREIGN BANK	58.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	58.

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FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
HARBOR	25,458.	0.	25,458.
LAUDUS	15,510.	0.	15,510.
MANAGERS	5,641.	0.	5,641.
MERIDIAN GROWTH FUND	4,520.	0.	4,520.
PIMCO	88,393.	18,490.	69,903.
PIMCO COMMODITY	51,610.	0.	51,610.
VANGUARD	41,159.	0.	41,159.
VANGUARD INFLATION	24,699.	0.	24,699.
VANGUARD MONEY MARKET	75.	0.	75.
TOTAL TO FM 990-PF, PART I, LN 4	257,065.	18,490.	238,575.

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FORM 990-PF LEGAL FEES STATEMENT 3

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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	4,908.	0.		4,908.
TO FM 990-PF, PG 1, LN 16A	4,908.	0.		4,908.

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FORM 990-PF	ACCOUNTING FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING SERVICES	16,851.	12,638.		4,213.	
AUDIT EXPENSE	7,000.	0.		7,000.	
TO FORM 990-PF, PG 1, LN 16B	23,851.	12,638.		11,213.	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADMINISTRATIVE SERVICES	44,328.	0.		44,328.	
INVESTMENT MANAGEMENT FEES	35,000.	35,000.		0.	
TO FORM 990-PF, PG 1, LN 16C	79,328.	35,000.		44,328.	

FORM 990-PF	TAXES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
STATE FILING FEE	75.	0.		75.	
FEDERAL EXCISE TAX	3,473.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	3,548.	0.		75.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INSURANCE	1,441.	0.		1,441.	
MISCELLANEOUS	676.	0.		676.	
MEMBERSHIP	495.	0.		495.	
BANK FEES	113.	0.		113.	
TO FORM 990-PF, PG 1, LN 23	2,725.	0.		2,725.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
MUTUAL FUNDS	FMV	9,943,412.	9,943,412.	
BENEFICIAL INTEREST IN TRUSTS	FMV	1,064,660.	1,064,660.	
TOTAL TO FORM 990-PF, PART II, LINE 13		11,008,072.	11,008,072.	

FORM 990-PF

GRANTS AND CONTRIBUTIONS  
PAID DURING THE YEAR

STATEMENT 9

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AARON COLTIN AND MANCHESTER COMMUNITY COLLEGE 11 JAY DRIVE LONDONDERRY, NH 03053	SCHOLARSHIP	IND	2,500.
AMANDA VANGUILDER AND NORTHERN ESSEX COMMUNITY COLLEGE 48 BROWN HILL EAST HAMPSTEAD, NH 03826	SCHOLARSHIP	IND	2,500.
ASHLEE WILLIS AND FRANKLIN PIERCE UNIVERSITY 24 MAXWELL DRIVE DERRY, NH 03036	SCHOLARSHIP	IND	2,500.
CHILD AND FAMILY SERVICES OF NH PO BOX 4488 MANCHESTER, NH 03105	TO SERVE 12 PREGNANT TEENS IN THE HEALTHY FAMILIES H	ORG	18,855.
COMMUNITY CAREGIVERS 58 EAST BROADWAY DERRY, NH 03038	FOR BLOOD PRESSURE, FOOTCARE, AND FLU CLINICS	ORG	15,000.
COPPER CANNON CAMP 124 GALE RIVER ROAD FRANCONIA, NH 03580	SCHOLARSHIPS FOR 6 DERRY AREA CAMPERS	ORG	4,500.
ERIN DUDLEY AND UNH 92 CHASE ROAD LONDONDERRY, NH 03053	SCHOLARSHIP	IND	2,500.
FOOD PANTRIES IN AEF CATCHMENT TOWNS 75 SOUTH MAIN STREET CONCORD, NH 03301	BENEFIT FOOD PANTRIES	ORG	10,000.

THE FRIENDS RSVP PROGRAM 249 PLEASANT STREET CONCORD, NH 03301	TO EXPAND THE SUCCESSFUL RSVP BONE BUILDER PROGRAM IN OTHER AEF TOWNS	ORG	5,000.
GATEWAYS COMMUNITY SERVICE 144 CANAL STREET NASHUA, NH 03064	TO SUPPORT THE PARTNERS IN HEALTH PROGRAM	ORG	10,000.
GIRLS INCORPORATED OF NEW HAMPSHIRE 815 ELM STREET MANCHESTER, NH 03101	DEVELOP COMPREHENSIVE HEALTH CURRICULUM IN ELEMENTARY AND MIDDLE SCHOOLS	ORG	10,000.
GREATER DERRY ORAL HEALTH COLLABORATIVE 28 SOUTH MAIN STREET DERRY, NH 03038	TO SUPPORT THE PARTNERS IN HEALTH PROGRAM	ORG	52,190.
GREATER DERRY ORAL HEALTH COLLABORATIVE 28 SOUTH MAIN STREET DERRY, NH 03038	TO SUPPORT THE PARTNERS IN HEALTH PROGRAM	ORG	54,286.
JACQUELINE AGUILAR AND RIVIER COLLEGE 6 CAROUSEL COURT LONDONDERRY, NH 03053	SCHOLARSHIP	IND	2,500.
JENNIFER BECOTTE AND MANCHESTER COMM. COLLEGE 40 NASHUA ROAD PELHAM, NH 03076	SCHOLARSHIP	IND	2,500.
KRISTINA CRECCO AND WALDEN UNIVERSITY 27A REED STREET LONDONDERRY, NH 03053	SCHOLARSHIP	IND	2,500.
MARCUS NAPPO AND UNH-MANCHESTER 8 LINLEW DRIVE #20 DERRY, NH 03038	SCHOLARSHIP	IND	2,500.
MEAGHAN MANNING AND MASSACHUSETTS COLLEGE OF PHARMACY - 1 PRESSEY ROAD SANDOWN, NH 03873	SCHOLARSHIP	IND	2,500.

MELISSA CULVERWELL AND RIVIER COLLEGE 57 WILSON ROAD LONDONDERRY, NH 03503	SCHOLARSHIP	IND	2,500.
NASHUA MASONIC LEARNING CENTER 200 MAIN STREET NASHUA, NH 03060	TO SUPPORT COST OF TRAINING AND CERTIFICATION IN THE ORTHO-GILLINGHAM	ORG	12,780.
PLANNED PARENTHOOD OF NEW ENGLAND 14 MANNING STREET DERRY, NH 03038	TO SUPPORT AFFORDABLE REPRODUCTIVE AND SEXUAL HEALTH	ORG	25,000.
RECHAB TOWNE AND MASSACHUSETTS COLLEGE OF PHARMACY 2 WARNER HILL ROAD DERRY, NH 03038	SCHOLARSHIP	IND	2,500.
SARA WHITE AND RIVIER COLLEGE 75R DERRYFIELD ROAD DERRY, NH 03826	SCHOLARSHIP	IND	2,500.
THE UPPER ROOM EDUCATION FOR PARENTING PO BOX 1017 DERRY, NH 03038	TO SUPPORT PREVENTION AND INTERVENTION FOR FAMILIES	ORG	41,000.
YMCA OF GREATER LONDONDERRY 206 ROCKINGHAM ROAD LONDONDERRY, NH 03503	FOR AFTERSCHOOL PROGRAM	ORG	16,000.
GREATER DERRY COMMUNITY HEALTH SERVICES 28 SOUTH MAIN STREET DERRY, NH 03038	FOR CONTINUATION OF THE AEF SCHOOL DENTAL PROGRAM	ORG	105,000.
GREATER DERRY COMMUNITY HEALTH SERVICES 28 SOUTH MAIN STREET DERRY, NH 03038	FOR CONTINUATION OF THE AEF SCHOOL DENTAL PROGRAM	ORG	105,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3A			514,611.



## ALEXANDER EASTMAN FOUNDATION

### **FIELD OF INTEREST**

The Foundation's interests in the field of health care are comprehensive and extend to health care, mental health, dental care, developmental and rehabilitative services, health promotion, health education, disease, accident prevention, nutrition, continuing education of health professionals and applied or practical research.

### **AREA SERVED**

The Foundation supports activity which benefits the greater Derry area, the region from which patients of the Alexander Eastman Hospital were drawn. The area includes primarily the towns of Derry, Londonderry, Windham, Chester, Hampstead and Sandown

### **GRANT PROGRAM**

The purposes of the Alexander Eastman Foundation are served through grant support to organizations awarded in response to proposals and special initiative commitments planned collaboratively by the Foundation with local service providers. Grants are awarded to support the capital, special projects and operations needs of qualifying organizations.

### **PROGRAM PRIORITIES**

In considering proposals, priority is given to funding activity which serves the Foundation's priority interests. The Alexander Eastman Foundation supports programs which:

#### *Education*

- Provide information and community education to improve the health and well-being of residents of the greater Derry area;
- Address goals for healthy individuals and families through a long-term commitment to prevention, health promotion and education of consumers and providers;
- Foster individual responsibility, independence, self-care and healthy life-style choices;

#### *Family Systems*

- Strengthen families as the critical unit for community health and well-being
- Recognize the changing nature of families and provide resources and assistance to reduce stress on families and improve family function;

#### *Access*

- Expand access to quality health care and prevention services for people with financial need.

### **ELIGIBILITY**

Nonprofit 501(c) 3 organizations with public charity status and public agencies serving the greater Derry area are eligible to apply. Although renewable commitments to important programs are made over several years, the Foundation does not provide ongoing general operating support or underwrite programs indefinitely. The Foundation will not replace public or other funding available to support basic services. Grants are made neither to individuals nor to qualifying organizations to support the cost of services to particular individuals, except through the Alexander Eastman Scholarship Program.

## **CRITERIA**

Clear, thorough and concise answers to the questions in the application will aid the Foundation in evaluating the quality of all proposals. Proposals will also be evaluated in terms of fiscal soundness of the project and applicant organization.

## **WHEN TO APPLY**

Applications *received* by April 1 and October 1 will be considered at the May and November meetings of the AEF Board of Trustees.

## **HOW TO APPLY**

Applicants may submit applications in one of two ways. In the interest of reducing the use of natural resources the Alexander Eastman Foundation encourages electronic submissions.

1. **Electronic Application:** Download and complete the application from the web site. E-mail a completed application along with electronic attachments (scanned where necessary) to [alockwood@alexandereastman.org](mailto:alockwood@alexandereastman.org). Or, mail electronic files on a CD or thumb drive to the mailing address (see Contact Us).
2. **Printed Application:** Download, print and complete the application from the web site. Print the application and mail with paper copies of attachments to the following address:

Alexander Eastman Foundation  
26 South Main Street, PMB 250  
Concord, NH 03301

To request an e-mailed or paper copy of the application for completion, please call Amy Lockwood at 1-888-228-1821 x80 (toll free), or e-mail [alockwood@alexandereastman.org](mailto:alockwood@alexandereastman.org).

*Applications must be received by April 1 and October 1 by mail or electronically. Applicants must submit applications and attachments either all in electronic form or all in paper form – the format may not be mixed. All applicants will receive a written or e-mailed confirmation of receipt.*

For questions regarding the application process or your proposal content and strategy, please contact Amy Lockwood at [alockwood@alexandereastman.org](mailto:alockwood@alexandereastman.org) or 1-888-228-1821 x80. We encourage you to call before completing your application.

## **Attachments**

With all proposals, please include:

1. Most recent audit or internal financial statement available for the agency
2. List of board of directors, with affiliations
3. 0 to 3 letters of support
4. Update on open grants, if any
5. Current agency operating budget
6. Last year agency operating budget
7. Most recent 990 forms

**The application process – what you can expect**

1. Applicants are encouraged to call in advance if they have questions or would like to discuss a proposal.
2. Applications must be *received by* April 1 and October 1
3. Each applicant will be contacted to participate in a 15-30 minute telephone conversation about the proposal prior to recommendation to the board.
4. The AEF board will consider all proposals at its mid-May and mid-November meetings.
5. Decisions will be communicated in writing to applicants by the end of May and end of November, respectively.
6. All applicants are required to submit a written final grant report 60 days after the end of the grant period.

**AEF Trustees**  
**March 2010- March 2011**

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