

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



990-PF

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

Treated as a Private Foundation

2009

OMB No 1545-0052

Department of the Treasury Internal Revenue Service (77

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

F	or	cale	endar	year 2009, o	r tax year be	ginning 1	.0/1 ,2	009, and e	ending	9/	30	, 20 l	0
-	- C	hec	k all th	nat apply	☐ Initial reti	urn 🗌 Initia	I return of a forme	r public ch	arity	[] Fin	al retu	ırn	
				''',	Amended		Address change	· —	me char	nge			
-	lle	- th	e IRS	Name of found	ation				A Empl	oyer identifica	tion nu	mber	
	label. The MENTOR Network Charitable						Foundation, Inc. 20-4935290						
	Otherwise, Number and street (or P O box number if mail is not delivered						 		B Telephone number (see page 10 of the instructions				ions,
	0	prii or ty		313 Con	gress St	treet			617-	-790-48	00		
In	See	Sp.	ecific		ate and ZIP code				C If exer	nption applicatio	n is pend	ting check here	• []
	nst	truc	tions.	Boston	MA 02210)			D 1 For	reign organizati	ions che	eck here	• 🗔
ŀ	H Check type of organization Section 501(c)(3) exempt						•				ons mee	ting the 85% test	. []
		Sect	ion 49	47(a)(1) none	exempt charita	able trust Othe						was terminated	
ı	_			value of all a		J Accounting met		Accrual	under	section 507(b)	(1)(A) (check here	> []
			r (fron 5) ⊳ \$	n Part II, col		Other (spec				foundation is in section 507(b)		nonth termination	
		rt I				(Part I, column (d) no penses (The total of		<u> </u>	under	307(0)	(1)(0), (
	C.		•	-		y not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted		(d) Disburseme for charitable	
						1 of the instructions))	books	incor	me	income	!	purposes (cash basis on	nly)
= -	T	1	Contri	hutions aifte ar	ants etc. receive	ed (attach schedule)	16.985	State	ment	1		<u> </u>	<u> </u>
7.01		2				quired to attach Sch B	\$-	1					
_		3				cash investments							
0	1	4		_	erest from sec		2,963	2	,963				
$\frac{1}{2}$		5a		s rents									
MAR		b	Net r	ental income	or (loss)				- No.				
Ω	e l	6a	Net g	ain or (loss) fr	om sale of ass	ets not on line 10	39,598						
끶		b	Gross	sales price for al	l assets on line 6a	a		r mater a language	Kara 🌤	·			
Z	6	7	Capit	al gain net in	come (from P	art IV, line 2)	A WARE CONTRACTOR		0	*		ļ	**********
SCANNED	r	8	Net s	hort-term cap	oital gain .		3 45 4 50 4 50 A	134-A : 3 ×					
Ö		9	Incon	ne modificatio	ons .		1000	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>				
		10a	Gross	sales less return	s and allowances			7e 16	<u>k</u> .,				
				Cost of good			0	. 6.6	<u> </u>				
					ss) (attach sch	nedule)	<u> </u>	1					
		11 12		r income (atta . Add lines 1	ich schedule)	•	59,546	2	,963		0		
-	\dashv	<u> 12</u> 13				s, trustees, etc	33,310		7,505			 	—
	ועם	14			alaries and wa				· · · · · ·				
	e				ployee benefi	_							
	×			fees (attach			565					ļ	
	-		_		ittach schedul	e)					RE	CEIVED)
;	Ě				fees (attach s	•							79
	La	17	Intere		·					3039	FFF	3 2 2 - 2011	
		18	Taxes	(attach schedu	ıle) (see page 1	4 of the instructions)	639			3		7011	
•		19	Depre	eciation (attac	ch schedule) a	and depletion .					$\overline{\cap}$	NE 01 - 17	~ ~
		20		pancy .							<u>U</u>	DEN, UT	
•	9	21			s, and meetin	igs .							
	ā	22		ng and public			5,711	7	,763			15 2	77
	<u> </u>	23				e)Statement		 	, 103			15,3	
;	Operating and Administrative	24				trative expenses.	6,915) 2	,763		0	15,3	74
	be	25		ines 13 throu		Statement 3			;;\v\.			13,3	
(2	25 <u>26</u>				Add lines 24 and 25	171,217		,763	<u> </u>	0	15,3	74
_	- 1			act line 26 fro		miles E i dilu EU	English Little		Wa.				
						and disbursements	(111,671	Den .	;, 1 * ,				
						ative, enter -0-)	100 A		200				
_					me (if negative			الراب ال	رًا المأ		0		

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

Do	rt ll°	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	f year
ĿС		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash—non-interest-bearing	78,354	7,544	7,544
		Savings and temporary cash investments	1,280,595	1,298,368	1,298,368
	3	Accounts receivable >	·		
		Less allowance for doubtful accounts ▶	3		
	4	Pledges receivable ▶	*	ļ	
		Less allowance for doubtful accounts ▶		· · · · · · · · · · · · · · · · · · ·	
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule)	Epolice 18 House 18	Sales R	
ţ		Less allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
As	9	Prepaid expenses and deferred charges			
	10a	investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
		Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
		Investments—mortgage loans			
		Investments—other (attach schedule)			
	14	zana, banango, and oquipment basis >	· · · · · · · · · · · · · · · · · · ·	\$\$	
		Less accumulated depreciation (attach schedule)			
		Other assets (describe ►)			
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1 358 9/19	1,305,912	1 305 912
	47		23,339	4,829	1,303,712
		Accounts payable and accrued expenses .	23,337	4,025	
ies	1	Grants payable Deferred revenue			
Liabilities	1	Loans from officers, directors, trustees, and other disqualified persons			
ap		Mortgages and other notes payable (attach schedule)			
_		Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	23,339	4,829	
es		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
Ĕ	24	Unrestricted	1,335,610	1,301,083	
a	!	Temporarily restricted			
<u> </u>		Permanently restricted			
Fund Balanc		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.			
~		Capital stock, trust principal, or current funds			
ets		Paid-in or capital surplus, or land, bldg, and equipment fund.			
SS		Retained earnings, accumulated income, endowment, or other funds. Total net assets or fund balances (see page 17 of the		- 	
Ä		instructions)	1,335,610	1,301,083	
Vet		Total liabilities and net assets/fund balances (see page 17	1,333,010		
-		of the instructions)	1,358,949	1,305,912	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balance			
		net assets or fund balances at beginning of year—Part II, colu		st agree with	
		f-year figure reported on prior year's return)		1	1,335,610
2	Enter	amount from Part L line 27a		2	(111,671)
3	Other	increases not included in line 2 (itemize) ▶ Unrealized	d investment	gains 3	77,144
4	Add I	nes 1, 2, and 3		. 4	1,301,083
		eases not included in line 2 (itemize) ▶		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5	5)—Part II, column (I	o), line 30 6	1,301,083

1a b c d e (e) Gross sales price a b c d e	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain	
c d e (e) Gross sales price a b c d					(h) Gain	
d e (e) Gross sales price a b c d					(h) Gain	
e (e) Gross sales price a b c d					(h) Gain	
(e) Gross sales price a b c d					(h) Gain i	
a b c d					(h) Gain i	
b c d				 	(e) plus (f)	or (loss) minus (g)
c d						
d				 	<u> </u>	
e :						
	g gain in column (h) and owned b	v the found	ation on 12/31/69	 		
Complete only for assets showing			· · · · · · · · · · · · · · · · · · ·			(h) gain minus ess than -0-) or
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col (i) r col (j), if any	,	Losses (fro	
		-				
b						
c				 		
d						
e			 			
2 Capital gain net income or (no	PLCADIALIOSSI 7		n Part I, line 7	2		
2 Not about to			,	2	· <u> · · · · · · · · · · · · · ·</u>	
-	e 8, column (c) (see pages 13					
If (loss), enter -0- in Part I, lin				3		
Part V Qualification Unde	er Section 4940(e) for Rec	<u>luced Ta</u>	<u>x on Net Investn</u>	<u>nent Inco</u>	me	
section 4940(d)(2) applies, leav Vas the foundation liable for the "Yes," the foundation does not	section 4942 tax on the distril			the base	period?	☐ Yes ☐ N
1 Enter the appropriate amount	in each column for each year	, see pag	e 18 of the instruction	ons before	making a	iny entries
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions		(c) ue of noncharitable-use a		Distrib	(d) oution ratio yided by col (c))
2008	197,33	11	1,399,	452		0.141
2007	146,96		1,495,	955		0.098
2006	38,23	30	1,397,	656		0.027
2005		0	713,	189		0.000
2004						
				Ì		
2 Total of line 1, column (d)				2		0.266
3 Average distribution ratio for t						
•	on has been in existence if les	s than 5 y	ears	the 3		0.066
3 Average distribution ratio for t	on has been in existence if les	s than 5 y	ears	the		0.066
Average distribution ratio for the number of years the foundation	on has been in existence if les	s than 5 y	ears	the 3		0.066
Average distribution ratio for the number of years the foundation Enter the net value of nonchards.	on has been in existence if les initable-use assets for 2009 fro	s than 5 y	ears	the 3		
 Average distribution ratio for the number of years the foundation Enter the net value of noncha Multiply line 4 by line 3 	on has been in existence if les initable-use assets for 2009 fro	s than 5 y	ears	the 3		0.066
Average distribution ratio for the number of years the foundation. Enter the net value of noncha. Multiply line 4 by line 3. Enter 1% of net investment in	on has been in existence if less initable-use assets for 2009 fro	s than 5 y	ears	the 3 4 5 6		0.066 1,317,13 87,85

Form	990-PF (2009) The MENTOR Network Charitable Foundation, Inc. 20-493	3529	90 6	age 4		
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of t	he in				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		-			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ☑ and enter 1% of Part I, line 27b All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	_		2		
2	of Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2		_			
4 5	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments					
b	2009 estimated tax payments and 2008 overpayment credited to 2009 Exempt foreign organizations—tax withheld at source 6a					
c d 7	Backup withholding erroneously withheld 6d Total credits and payments Add lines 6a through 6d			0		
8 9 10 11	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax. ▶ Refunded Refunded 10			2 0 0		
	t VII-A Statements Regarding Activities	Γ		Ť		
	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?	1a	Yes	No X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b		Х		
	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		N/	7		
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$	1c	IN /			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$\Bigsim \]					
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	2		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.	3		X X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more trime the rear?	4a 4b	N/			
5 5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T FEB 2 2 2011	5	-11/	X		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied_either:					
-	• 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?	6	X			
7 8a	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 Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) Massachusetts	•				
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 <i>General Instruction G? If "No," attach explanation</i>	8b	Х			
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 on page 27)? If "Yes," complete Part XIV .	9		X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	40		V		

Form	The MENTOR Network Charitable Foundation, Inc. 20-493	529	() P	age 5
Par	t 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 page 20 of the 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 ► The books are in care of ► The Mentor Network Telephone no ► 617-79		0 2 6	
14	Located at ▶ 313 Congress Street, Boston, MA ZIP+4 ▶ 02210	0 – 4	820	-
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			▶ ∟
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No -
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies		163	140
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? — Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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)? Yes X No			1
	(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)			
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)?	1b	N/	A
	Organizations relying on a current notice regarding disaster assistance check here			
С	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		Χ
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$)			
а	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?			
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 page 20 of the instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here > 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? \square Yes \square No			
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			v
	foundation had excess business holdings in 2009)	3b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
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

Forr	The MENTOR Network (Charı	table E	ound	lation,	Inc	•	20-49	3529		age 6
P	art VII-B Statements Regarding Activitie	s for V	Vhich Forn	1 4720	Mav Be R	Reauir	ed (cor	ntinued			<u> </u>
5a	During the year did the foundation pay or incur (1) Carry on propaganda, or otherwise attempt to	any an	nount to				Yes				
	(2) Influence the outcome of any specific public		=				162	IZJ NO			
	directly or indirectly, any voter registration d			11 4000,	, or to carry		Yes	X No			
	(3) Provide a grant to an individual for travel, s	tudy, or	other sımılaı	r purpos	es?		☐ Yes	⊠ No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) Yes No										
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No											
b	If any answer is "Yes" to 5a(1)–(5), did any of the		•					bed in			
	Regulations section 53 4945 or in a current notice	_	_			22 of th	e instruc	tions)?	5b	N/A	7
	Organizations relying on a current notice regard	_						▶ ∐			
С	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility			exempt	ion from the		☐ Yes	□ No			
	If "Yes," attach the statement required by Regu	ılatıons	section 53 4	945–5(a	')						
	Did the foundation, during the year, receive any on a personal benefit contract?						☐ Yes	⊠ No			
	Did the foundation, during the year, pay premium: If 'Yes" to 6b, file Form 8870		,	•			tract?		6b		
	At any time during the tax year, was the foundation a						Yes	X No	7,	N/A	
	If yes, did the foundation receive any proceeds or art VIII Information About Officers, Dir							dy Paic	7b	L	
	and Contractors	CCLOIS	, iiustees,	1 Ounc	Jation Iviai	lager	s, riigi	ily raic	Linp	Oyee:	э,
_	List all afficers discrete as Assert Assert Assert	•									
- 1	List all officers, directors, trustees, foundat	ion mai	nagers and	their co	mpensatio	n (see	page 2	22 of the	einstru	ictions	s)
	(a) Name and address	(b) Title hou	e and average rs per week ed to position	(c) Cor	npensation paid, enter	(d) (emplo	page 2 Contribution yee beneficerred comp	ns to it plans	(e) Expe	ense acc allowanc	count
Gr	(a) Name and address	(b) Title hou devote	e and average rs per week	(c) Cor	npensation paid, enter -0-)	(d) (emplo	Contribution yee benef	ins to it plans pensation	(e) Expe	nse acc	ces
Gr 31	(a) Name and address regory Torres 3 Congress St, Boston, MA	(b) Title hou devote Chai	e and average rs per week ed to position	(c) Cor	npensation paid, enter	(d) (emplo	Contribution yee benef	ns to it plans	(e) Expe	nse acc	count
Gr 31 Dw	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson	(b) Title hou devote Chai	e and average rs per week ed to position	(c) Cor	npensation paid, enter -0-)	(d) (emplo	Contribution yee benef	ins to fit plans pensation	(e) Expe	nse acc	count ces
Gr 31 Dw 31	(a) Name and address Tegory Torres 3 Congress St, Boston, MA Vight D Robson 3 Congress St, Boston, MA	(b) Title hou devote Chai	e and average rs per week ed to position rman	(c) Cor	npensation paid, enter -0-)	(d) (emplo	Contribution yee benef	ins to it plans pensation	(e) Expe	nse acc	ces
Gr 31 Dw 31 Ch	(a) Name and address Tegory Torres 3 Congress St, Boston, MA Vight D Robson 3 Congress St, Boston, MA Aris M. Kozakıs	(b) Title hou devote Chai	e and average rs per week ed to position	(c) Cor	npensation paid, enter -0-) 0	(d) (emplo	Contribution yee benef	ons to fit plans pensation 0	(e) Expe	nse acc	count ces 0
Gr 31 Dw 31 Ch	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA hris M. Kozakıs 3 Congress St, Boston, MA	(b) Title hou devote Chai	e and average rs per week ed to position rman sident asurer	(c) Cor	npensation paid, enter -0-)	(d) (emplo	Contribution yee benef	ins to fit plans pensation	(e) Expe	nse acc	count ces
Gr 31 Dw 31 Ch 31	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA hris M. Kozakıs 3 Congress St, Boston, MA hris M. Rozakıs	(b) Title hou devote Chai Pres	e and average rs per week ed to position rman sident asurer	(c) Cor	npensation paid, enter -0-) 0	(d) (emplo	Contribution yee benef	ons to fit plans pensation 0	(e) Expe	nse acc	count ces 0
Gr 31 Dw 31 Ch 31 Li	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA hris M. Kozakıs 3 Congress St, Boston, MA	(b) Titling hou devote Chair	e and average rs per week ed to position rman sident	(c) Cor (If not	npensation paid, enter -0-) 0 0 0	(d) (emplo and defe	Contribution yee benefitied comp	ons to it plans pensation O O O	(e) Experother	ense acc allowanc	0 0
Gr 31 Dw 31 Ch 31 Li	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA ris M. Kozakıs 3 Congress St, Boston, MA nda DeRenzo 3 Congress St, Boston, MA Compensation of five highest-paid employe	(b) Titling hou devote Chair	e and average rs per week ed to position rman sident asurer	(c) Cor (If not	npensation paid, enter -0-) 0 0 0	(d) (emplo and defe	Contribution yee benefitied compared co	ons to it plans pensation O O O	(e) Experother	ense acc allowanc	0 0
Gr 31 Dw 31 Ch 31 Li	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA ris M. Kozakıs 3 Congress St, Boston, MA nda DeRenzo 3 Congress St, Boston, MA Compensation of five highest-paid employe	(b) Title hou devote Chair Pres	e and average rs per week ed to position rman sident	(c) Cor (If not	npensation paid, enter -0-) 0 0 0	(d) (emplo and defe	ee page (d) Contri	ons to it plans pensation O O O 23 of t	(e) Experience (e) Ex	ense acc allowanc	0 0 0
Gr 31 Dw 31 Ch 31 Li 31 2	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA hris M. Kozakıs 3 Congress St, Boston, MA hda DeRenzo 3 Congress St, Boston, MA Compensation of five highest-paid employe If none, enter "NONE."	(b) Title hou devote Chair Pres	e and average rs per week ed to position rman sident asurer	(c) Cor (If not	o ded on line	(d) (emplo and defe	ee page (d) Contri	ons to it plans beensation O O O D 23 of t buttons to be benefit d deferred	(e) Experience (e) Ex	ructio	0 0 0 0
Gr 31 Dw 31 Ch 31 Li 31 2	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA ris M. Kozakıs 3 Congress St, Boston, MA nda DeRenzo 3 Congress St, Boston, MA Compensation of five highest-paid employe If none, enter "NONE."	(b) Title hou devote Chair Pres	e and average rs per week ed to position rman sident asurer	(c) Cor (If not	o ded on line	(d) (emplo and defe	ee page (d) Contri	ons to it plans beensation O O O D 23 of t buttons to be benefit d deferred	(e) Experience (e) Ex	ructio	0 0 0 0
Gr 31 Dw 31 Ch 31 Li 31 2	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA ris M. Kozakıs 3 Congress St, Boston, MA nda DeRenzo 3 Congress St, Boston, MA Compensation of five highest-paid employe If none, enter "NONE."	(b) Title hou devote Chair Pres	e and average rs per week ed to position rman sident asurer	(c) Cor (If not	o ded on line	(d) (emplo and defe	ee page (d) Contri	ons to it plans beensation O O O D 23 of t buttons to be benefit d deferred	(e) Experience (e) Ex	ructio	0 0 0
Gr 31 Dw 31 Ch 31 Li 31 2	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA ris M. Kozakıs 3 Congress St, Boston, MA nda DeRenzo 3 Congress St, Boston, MA Compensation of five highest-paid employe If none, enter "NONE."	(b) Title hou devote Chair Pres	e and average rs per week ed to position rman sident asurer	(c) Cor (If not	o ded on line	(d) (emplo and defe	ee page (d) Contri	ons to it plans beensation O O O D 23 of t buttons to be benefit d deferred	(e) Experience (e) Ex	ructio	0 0 0
Gr 31 Dw 31 Ch 31 Li 31 2	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA ris M. Kozakıs 3 Congress St, Boston, MA nda DeRenzo 3 Congress St, Boston, MA Compensation of five highest-paid employe If none, enter "NONE."	(b) Title hou devote Chair Pres	e and average rs per week ed to position rman sident asurer	(c) Cor (If not	o ded on line	(d) (emplo and defe	ee page (d) Contri	ons to it plans beensation O O O D 23 of t buttons to be benefit d deferred	(e) Experience (e) Ex	ructio	0 0 0
Gr 31 Dw 31 Ch 31 Li 31 2	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA ris M. Kozakıs 3 Congress St, Boston, MA nda DeRenzo 3 Congress St, Boston, MA Compensation of five highest-paid employe If none, enter "NONE."	(b) Title hou devote Chair Pres	e and average rs per week ed to position rman sident asurer	(c) Cor (If not	o ded on line	(d) (emplo and defe	ee page (d) Contri	ons to it plans beensation O O O D 23 of t buttons to be benefit d deferred	(e) Experience (e) Ex	ructio	0 0 0 0
Gr 31 Dw 31 Ch 31 Li 31 2	(a) Name and address regory Torres 3 Congress St, Boston, MA vight D Robson 3 Congress St, Boston, MA ris M. Kozakıs 3 Congress St, Boston, MA nda DeRenzo 3 Congress St, Boston, MA Compensation of five highest-paid employe If none, enter "NONE."	(b) Title hou devote Chair Pres	e and average rs per week ed to position rman sident asurer	(c) Cor (If not	o ded on line	(d) (emplo and defe	ee page (d) Contri	ons to it plans beensation O O O D 23 of t buttons to be benefit d deferred	(e) Experience (e) Ex	ructio	0 0 0

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 Not Applicable	
•••••••••••••••••••••••••••••••••••••••	
2	
All other program-related investments. See page 24 of the instructions	
3	
•	
otal. Add lines 1 through 3	—

Par	Minimum Investment Return (All domestic foundations must complete this part F see page 24 of the instructions)	oreigi	n foundations,
1'	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		1 120 070
а	Average monthly fair market value of securities	1a	1,138,078
þ	Average of monthly cash balances	1b	179,057
С	Fair market value of all other assets (see page 24 of the instructions)	1c	1 217 125
d	Total (add lines 1a, b, and c)	1d	1,317,135
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	1,317,135
3	Subtract line 2 from line 1d	3	1,317,133
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see page 25		
_	of the instructions)	4	1,317,135
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4 Minimum investment return. Enter 5% of line 5	5	65,857
0			
Га	To XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) properties of the instructions (Section 4942(j)(3) and (j)(5) properties of the instruction (Section 4942(j)(3) and (Se		operating
		1	65,857
1	Minimum investment return from Part X, line 6		03,031
2a	Tax of investment income to 2009 from fait vi, line 5		
þ	Theorie tax for 2003 (This does not include the tax from Fait VI)	2c	2
C	Add lines 2a and 2b	3	65,855
3	Distributable amount before adjustments Subtract line 2c from line 1	4	03,033
4	Recoveries of amounts treated as qualifying distributions	5	65,855
5	Add lines 3 and 4	6	
6	Deduction from distributable amount (see page 25 of the instructions)	-	
7 —	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	65,855
Pai	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	171,217
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc	2	
2	purposes Amounts set aside for specific charitable projects that satisfy the	-	
3	Suitability test (prior IRS approval required)	3a	
a			
b	Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	3b	171,217
4		-	<u> </u>
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	2
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	171,215
0	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years	, wnetr	iei trie loundation

Pa	t XIII Undistributed Inco	ome (see page 2	26 of the instruction	ons)		
			(a)	(b)	(c)	(d)
1.	Distributable amount for 2009	9 from Part XI.	Corpus	Years prior to 2008	2008	2009
	line 7		\$ **	144 1		65,855
2	Undistributed income, if any, as o	of the end of 2009		*		
а	Enter amount for 2008 only					
b	Total for prior years 20,2	20 ,20				
3	Excess distributions carryover	r, if any, to 2009	,			
а	From 2004 .					
b	From 2005 .					
С	From 2006 .					
d	From 2007		•	*		
е	From 2008	135,484	w % ∠	*		
f	Total of lines 3a through e		135,484	- 40 ×15 × 60		
4	Qualifying distributions for 20	09 from Part XII	, <u>, , , , , , , , , , , , , , , , , , </u>			
	line 4 ▶ \$ 171,2	17				
а	Applied to 2008, but not more	e than line 2a				
b	Applied to undistributed income of p					
-	required—see page 26 of the instri	' '				
С	Treated as distributions out of					
•	required—see page 26 of the i					
d	Applied to 2009 distributable					
e	Remaining amount distributed		171,217			
5	Excess distributions carryover	·	65,855	,		65,855
-	(If an amount appears in colu	• •	٠, ١	*		· · · · · · · · · · · · · · · · · · ·
	amount must be shown in c	' '	4 · · · · · ·	,		
6	Enter the net total of ea	` ′ ′	,	,		
	indicated below:		, ,	,		
а	Corpus Add lines 3f, 4c, and 4	e Subtract line 5	240,846			
b	Prior years' undistributed in					
~	line 4b from line 2b	leonie oubliael		0		
_						
С	Enter the amount of prior yearncome for which a notice of de					
	issued, or on which the section	, i	,			
	been previously assessed	11 4542(0) tax 1105	•			
Ы	Subtract line 6c from lin	e 6b Taxable	, ,			
•	amount—see page 27 of the			0		
е	Undistributed income for 200					
-	4a from line 2a Taxable am					
	27 of the instructions	lount occ page			0	
f	Undistributed income for 2009	9 Subtract lines				
'	4d and 5 from line 1. This a					
	distributed in 2010					0
7		one aut of caraus				
′	Amounts treated as distributio to satisfy requirements impo					
	170(b)(1)(F) or 4942(g)(3) (se			:		
	instructions)	o page 27 or the				
8	Excess distributions carryove	or from 2004 not				
•	applied on line 5 or line 7 (se					
	instructions)	- pago zi oi ilie				
9	Excess distributions carry	vover to 2010				
-	Subtract lines 7 and 8 from li	·	240,846			
10	Analysis of line 9		ı			
. а	Excess from 2005		İ			
b	Excess from 2006					
c	Excess from 2007		n 3 3/	_		
d	Excess from 2008	69,629	2 / 2 / 2 / 2 / 3 / 3 / 3 / 3 / 3 / 3 /			
	Excess from 2009 .	171,217	g to the complete section of t	A service of the serv	, , , , , , , , , , , , , , , , , , ,	

Form	The MENTOR Net	work Chari	table Foun	dation, In	c. 20-49	35290 Page 10
_	t XIV Private Operating Foun	dations (see pa	ge 27 of the inst	ructions and Pa	rt VII-A, question	_
•	If the foundation has received a rulir foundation, and the ruling is effective Check box to indicate whether the four	for 2009, enter the	date of the ruling	•	Not Applic on 4942()(3	able 3) or □ 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	each year listed					0
b	85% of line 2a	0	0	0	0	0
С	Qualifying distributions from Part XII, line 4 for each year listed					0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter (1) Value of all assets					0
h	(2) Value of assets qualifying under section 4942(j)(3)(B)(i) Endowment" alternative test—enter % of					0
	minimum investment return shown in Part X, line 6 for each year listed					0
С	"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 					0
	organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					<u>0</u>
Pai	t XV Supplementary Informat at any time during the y				had \$5,000 or (
1 a	Information Regarding Foundation List any managers of the foundation before the close of any tax year (but	who have contribu	ted more than 2% contributed more	of the total contrib than \$5,000) (Se	utions received by e section 507(d)(2	the foundation))
b	List any managers of the foundation ownership of a partnership or other	who own 10% or entity) of which th	more of the stock e foundation has a	of a corporation (a 10% or greater i	or an equally large nterest	portion of the
2	Information Regarding Contribution	on, Grant, Gift, L	oan, Scholarship,	etc., Programs.		
	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the organizations under other conditions	foundation make	s qifts, grants, etc	cted charitable or (see page 28 of	ganizations and do the instructions) to	oes not accept o individuals or
а	The name, address, and telephone	number of the per	son to whom appl	ications should be	addressed	
	ah E. Magazıne-Yount The form in which applications shou					-790-4801
App	licants must submit compl	eted applica	ntion forms.		iouid include Is are availa	ble through
	foundation and via the i			twork.com/fc	oundation).	<u>, </u>

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors Restricted to organizations serving people with disabilities, and youth and families facing emotional, behavioral, and other issues.

c Any submission deadlines Applications are accepted on a rolling basis.

Pa	rt XV Supplementary Information (con Grants and Contributions Paid During	tinued)	ved for E	uture Payment	
<u>.</u>	Recipient	If recipient is an individual,	Causadata a		
	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
a	Paid during the year				
	atement 3				
-					
					164,302
					1
	Total .		<u> </u>	> 3	3a 164,302
b	Approved for future payment		<u> </u>		74 201/002
	, , , , , , , , , , , , , , , , , , , ,				
				<u> </u>	
	Total			<u></u> 3	Rh C
	COLAL				11. (·

Enter gros	s amounts unless otherwise indicated	Unrelated busi	ness income	Excluded by section	on 512, 513, or 514	(e)
•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
	m service revenue	 			·	16,985
						20/303
						
f						
g Fee	es and contracts from government agencies					
_	ership dues and assessments .					
	t on savings and temporary cash investments					
	nds and interest from securities .					2,963
	ntal income or (loss) from real estate	A CONTRACT OF THE PARTY OF THE				
	bt-financed property .					
	t debt-financed property					
	ntal income or (loss) from personal property					
	investment income					
	(loss) from sales of assets other than inventory					
	come or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue a <u>Gain on Sale</u>					39,598
b						
е						
12 Subtot	al Add columns (b), (d), and (e)	1. 41 4 4 1 1 1	0		0	1 ,
	Add line 12, columns (b), (d), and (e)				13	59,546
	sheet in line 13 instructions on page 28 to					
_	-B Relationship of Activities to the					
Line No ▼	Explain below how each activity for whethe accomplishment of the foundation page 28 of the instructions)	s exempt purpos	es (other than	nn (e) of Part X i by providing fu	unds for such pi	urposes) (See
3 4 8						
4						
						
<u>and ll</u>	Funds are used to make			to one c		
	corporations, trust, co	mmunity ch	nests, f	unds and	foundation	ons
	created or organized un					
	America, any state, the					
	of the United States of					
	501(c)(3) of the Intern					
	public purposes, to sta					s; and
	(111) for religious, ch					
	educational purposes wi					
	in section 501(c)(3) of					
	also constitute public			es under	the laws	ot
 -	the Commonwealth of Mas	sachusetts	·			
		<u>. </u>				
		<u> </u>				
		·				

UIIII	330-F	1 (200	<i>9)</i>									ray	,
Pa	rt X\			n Regarding 1 rganizations	ransfers T	o and	Transa	actions	and Relationship	s With	Non	char	itabl
1`	ın s	ection	501(c) of the						other organization des ection 527, relating to			Yes	No
_	_		ions?						f	ı			
а		Cash		porting foundation	to a nonchai	ritable ex	empt or	ganization	OT		1a(1)	!	Χ
			assets	•		•		•			1a(2)		X
h			nsactions	•		•					```	i	
				a noncharitable e	exempt organ	uzation					1b(1)	1	Х
				ets from a noncha			ation	•			1b(2)		X
	٠,			, equipment, or ot				•			1b(3)		X
	. ,			rrangements				<u>-</u>			1b(4)		Χ
			s or loan gua	_							1b(5)		Χ
			_	ervices or membe	rship or fundr	aising so	licitation	ıs			1b(6)		X
С	Sha	aring (of facilities, e	equipment, mailing	lists, other a	ssets, or	paid en	nployees			1c		X
d 	valu	ue of t	he goods, ot	ther assets, or sen	rices given by	y the repo	rting for	indation I	olumn (b) should alwa f the foundation receif f the goods, other ass	ved less t	han fa	air ma	irket
a) Li	ne no	(b) A	mount involved	(c) Name of non	charitable exemp	t organizati	nc	(d) Descrip	tion of transfers, transaction	ns and shar	ing arra	angeme	ents
												•	
		-	_										
		ļ											
							-						
					-								
													
		}											
													
									······································				

		-											
		 											
									·	·			
								•					
	des	cribe	d in section 5	ectly or indirectly a 501(c) of the Code following schedul	(other than				re tax-exempt organization 527?		☐ Ye	s [X	No
(a) Name of organization (b) Type of organization (c) Description					n of relation	lationship							
												-	
								iciary) is bas	ules and statements, and to ed on all information of whi				
_	_	<u>ر ا</u>	701					2/15/		.dent_	_		
er	₹ Si	gnature	of officer or tru	stee				Date	Title				
Sign Here	ard parer's	y[u]					Date		Check if self-employed ▶ □	Preparer's number (s page 30 o	ee Sıg	natur	
n	ar Sar	D Pi	eparer's						į į				

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

EIN ▶ Phone no The MENTOR Network Charitable Foundation, Inc EIN 20-4935290 2009 Form 990-PF Part I, Line 1, Contributions, gifts, grants, etc. received

Contributor	<u>Amount</u>
Denis Holler	2,000
Dwight Robson	100
John Economides	75
John Green	2,000
Juliana Knox	100
Linda DeRenzo	105
Stephanie Reck	10
Thomas Minehan	15
Vestar Capital Partners	10,000
William Duffy	60
Other	2,520
	16,985

The MENTOR Network Charitable Foundation, Inc EIN 20-4935290 2009 Form 990-PF Part I Line 23 Other Expenses

	(a) Revenue and expense per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Bank Fees	2,763	2,763		basis offiy)
Fundraising Fees	288			288
Professional Fees - Communications	1,750			1,750
Insurance - non-employee	910			910
Total Other Expenses	5,711	2,763	-	2,948

The MENTOR Network Charitable Foundation, Inc EIN 20-4935290 2009 Form 990-PF Part XV Line 3a Grants and Contributions Paid During the Year

Name	Balance		
ROCA	12,500		
University of Minnesota	12,426		
Lionheart Foundation	7,500		
Adoption & Foster Care Mentoring, Inc	5,000		
Big Brothers/ Big Sisters of California	5,000		
Boston Children's Chorus	5,000		
Boston Healthcare for the Homeless	5,000		
Brain Injury Services of SW VA	5,000		
Center for Social Development & Education	5,000		
Codman Academy Charter School Foundation	5,000		
Cradles to Crayons, Inc	5,000		
FAMILY DIVERSITY PROJECTS	5,000		
Friendship Ventures	5,000		
Lied Discovery Children's Museum	5,000		
Lovelane Special Needs Horseback Riding	5,000		
St Mary's Women & Children's Center	5,000		
Villa Esperanza Services	5,000		
YMCA of Orange County	5,000		
MA/NH Chapter of Alzheimers Association	4,829		
Cambridge School of Weston	3,036		
Sibling Connections	3,000		
Best Buddies of Culver City	2,500		
Best Buddies of Massachusetts	2,500		
BEST BUDDIES OF PHILADELPHIA	2,500		
BEST BUDDIES OF PHOENIX	2,500		
Big Sister Assoc of Greater Boston	2,500		
Boston Debate League	2,500		
Bottom Line	2,500		
Community Boating Center	2,500		
Evergreen Presbyterian Ministries	2,500		
Foundation for the Challenged	2,500		
HAVEN HORSE RANCH	2,500		
KINDGOM LIVING OUTREACH SERVICES	2,500		
People to People Student Ambassadors	2,500		
Show Me Aquatics & Fitness	2,500		
Special Olympics Minnesota	2,500		
The Minnesota Stroke Association	2,500		
YMCA of Akron	2,500		
Hearts Therapeutic Equestrian Center	2,310		
National Young Leaders Program	1,000		
Other	201		
	164,302		