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### **Return of Private Foundation**

#### or Section 4947(a)(1) Nonexempt Charitable Trust **Treated as a Private Foundation**

2009

OMB No 1545-0052

		t of the Treasury venue Service Note. The		e able to use a copy of this		ortina requirements	2009
		idar year 2009, or tax year beginni		1, 2009	, and ending	SEP 30, 2010	· <del>_</del>
G	heck	all that apply Initial ref			rmer public charity	Final return	
Oth		se, THE WM. BRYCE	THOMPSO		, INC.	A Employer identification 22-2941409	
0	print r type	. 195 NASSAU STR		ivered to street address)	Room/suite	B Telephone number 609–921–76	55
Inst	_	PRINCETON, NJ	0 8 5 4 2 tion 501(c)(3) ex	empt private foundation Other taxable private founda	ition	D 1. Foreign organizations p. 2. Foreign organizations check here and attach co-  E If private foundation sta	s, check here eting the 85% test, imputation
(fi	om F	arket value of all assets at end of year Part II, col. (c), line 16)	Oti	ner (specify)	Accrual	under section 507(b)(1)  F If the foundation is in a	i(A), check here    60-month termination
_	·\$ irt l		es and (d) may not	nn (d) must be on cash be (a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., re	ceived	0.		N/A	(cash basis only)
	3	Check X if the foundation is not required interest on savings and temporary cash investments		2,287.	2,287	,	STATEMENT 1
	4   5a	Dividends and interest from securit Gross rents	ties	12,638.	12,638.	,	STATEMENT 2
		Net rental income or (loss)	-357.				STATEMENT 3
une	6a b	Net gain or (loss) from sale of assets not Gross sales price for all assets on line 6a	on line 10	260,200.	······		
Revenue	7	Capital gain net income (from Part IV, line	<del></del>	L14.1	260,200	•	
_	8	Net short-term capital gain	7				
	9 10a	Income modifications VED gross sales less returns	10	.,			
•	b	Less Cost of goods sold A 2011	0			,	
į	11	Gross profit or (loss)	RS				
	12	Tiotal. Add lines 1) through 10		275,125.	275,125		
<b>:</b> :	13 14	Ompensation of officers, directors, trust Other employee salaries and wages	ı	0.	0.		0.
	15	Pension plans, employee benefits	ĺ				
Expenses	16a	Legal fees	TMT 4	2,487.	0.		1,243.
Exper	C	Accounting fees Other professional fees	DIMI 4	2,40/•		•	1,243.
ive	17	Interest	_	104.	0.		0.
strat	18		STMT 5	20,381.	7,395. 809.		0.
aj:	19 20	Depreciation and depletion Occupancy		990.	609	•	
Adi	21	Travel, conferences, and meetings					
Operating and Administrative	22	Printing and publications	STMT 6	11,382.	4,602.		0.
ating	23	Other expenses S Total operating and administrative		11,302.	4,002		<b>.</b>
per		expenses Add lines 13 through 2	i	35,352.	12,806.	•	1,243. 98,950.
J	25	Contributions, gifts, grants paid  Total expenses and disbursemen	 le	98,950.			98,950.
	20	Add lines 24 and 25		134,302.	12,806.	,	100,193.
	27			140,823.			
	1	Excess of revenue over expenses and dis Net investment income (if negative,		140,023.	262,319.		
	C	Adjusted net income (if negative, en	ter -0-)			N/A	

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	1,091,429.
2	Enter amount from Part I, line 27a	2	140,823.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	1,232,252.
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	1,232,252.

	WM. BRICE THOMP			, IN	<u>.                                    </u>		-294	1409	Page 3
· · · · · · · · · · · · · · · · · · ·	nd Losses for Tax on In		t income	(h) How	acquired I	(a) Data as		(4) 0-4	
(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) Dat (mo , d	
	33 WHITEHORSE-M		TLLE	0.00	mation				
b ROAD					P	01/01	/07	03/3	1/10
C									
d									
e									
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10.	st or other basis expense of sale				n or (loss (f) minus (		
a	2 000		40 50					- 0.60	
b 300,000.	3,998.		43,79	8.				260	,200.
<u>c</u>									
<u>d</u>							<del></del>	-	
Complete only for assets showing	gain in column (h) and owned by t	L	n on 12/31/69		/I'	Gains (Co	l /h) gain	minue	
Osimpisto emy ter accepta energing	(j) Adjusted basis		cess of col (I)			(k), but no	it less thai	n -0-) <b>or</b>	
(i) F M V as of 12/31/69	as of 12/31/69		col (j), if any	_		Losses (f	rom col (	h))	
<u>a</u>		<u>.</u> .			<del></del>			260	,200.
<u>b</u>								200	, 200.
d				_		<del></del>	<del></del>		
e									
	(If name also enter	ın Part I lına	7	7					
2 Capital gain net income or (net cap	oital loss) {   If gain, also enter   If (loss), enter -0-	- in Part I, line	, 17	} 2				260	,200.
3 Net short-term capital gain or (loss	•								
If gain, also enter in Part I, line 8, c		· · · (0)		<i>]</i>					
If (loss), enter -0- in Part I, line 8				<u> </u>			N/A	<u>.</u>	
Part V   Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net	Invest	iment inc	ome			
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax or	n net investment in	icome )					
If section 4940(d)(2) applies, leave the	is part blank								
									(Ter
Was the foundation liable for the secti			•	riod?				L Yes	X No
If "Yes," the foundation does not qualit  1 Enter the appropriate amount in each	ry under section 4940(e). Do not co ach column for each year, see instri			96	· -				
	(b)		making any chine					(d)	
(a) Base period years Calendar year (or tax year beginnin	المراس كالأمراء الممام معمدات المام	tributions	Net value of no	(c) ncharitab	le-use assets	1 (0	Distrib ol (h) div	oùtion ratio rided by col	(c))
2008	9 111/	9,698.		1.8	46,389		101 (15) 0.11		53996
2007		0,569.			42,381				74918
2006		3,842.			45,671				25149
2005		7,031.			42,569				54702
2004	3	8,856.			11,025			.0	38432
	<del></del>							<u></u>	<u></u>
2 Total of line 1, column (d)						2		.2	<u>47197</u>
3 Average distribution ratio for the 5	-year base period - divide the total o	on line 2 by 5,	or by the number	of years					
the foundation has been in existen	ce if less than 5 years					3		.0	<u>49439</u>
4 Enter the net value of noncharitable	e-use assets for 2009 from Part X, I	line 5				4		1,073	<u>,078.</u>
						i i		<b>-</b> 0	0.50
5 Multiply line 4 by line 3		•				5		53	<u>,052.</u>
								2	(2)
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)	•	•			6			<u>,623.</u>
=								5.5	675
7 Add lines 5 and 6						7		55	<u>,675.</u>
9 Enter qualifying distributions from	Dart VII. line 4					8		100	,193.
8 Enter qualifying distributions from		46.4-4	-1-4- 46-4			[ 0 ]		100	, 1) 3 .
If line 8 is equal to or greater than See the Part VI instructions	line 7, check the box in Part VI, line	ID, and comp	piete that part usin	g a 1% ta	x rate				
923521 02-02-10							F	orm <b>990-F</b>	<b>PF</b> (2009)
								•	/

Form	990-PF (2009) THE WM. BRYCE THOMPSON FOUNDATION, INC. 22-2941	409		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ıctio	ns)
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)			
Ò	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1%		2,6	<u> 23.</u>
	of Part I, line 27b			
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-)			0.
3	Add lines 1 and 2		2,6	23.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		$2,\epsilon$	23.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 4,096.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		<u>4,0</u>	96.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,4	73.
	Enter the amount of line 10 to be Credited to 2010 estimated tax   1,473. Refunded  11			<u>0.</u>
	rt VII-A Statements Regarding Activities	· · · · · ·	_	T
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	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.			.,
	Did the foundation file Form 1120-POL for this year?	10		X
٥	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ 0 .	•		
•	•			x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
2	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		х
Aa	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b		<del></del>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
·	If "Yes," attach the statement required by General Instruction T		-	<del></del>
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?	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NJ			
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	8b	Х	<u></u>
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	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		X

``				
Form 990-PF (2009) THE WM. BRYCE THOMPSON FOUNDATION, INC.	22-2941	409		Page 5
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		<u> X</u>
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	<u> </u>
Website address ► N/A				
	one no ►609-92		<u>655</u>	
Located at ► 195 NASSAU STREET, PRINCETON, NJ	zip+4 ▶ <u>08</u>	540		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			<b>,</b> _▶	
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		· <sub>/</sub>		
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		ļ	Yes	No
1a During the year did the foundation (either directly or indirectly)				ŧ
(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)				ĺ
a disqualified person?	Yes X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			r
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			į
(5) Transfer any income or assets to a disqualified person (or make any of either available				İ
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	_ =			į
termination of government service, if terminating within 90 days )	Yes X No			ĺ
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)?	N/A	1b		L
Organizations relying on a current notice regarding disaster assistance check here	▶∟_			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not correct	oted			
before the first day of the tax year beginning in 2009?		10		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating four	idation			ı
defined in section 4942(j)(3) or 4942(j)(5))				ı
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) t				
before 2009?	Yes X No			ı
If "Yes," list the years ▶,,,,,	_			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to i				
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" an				
statement - see instructions )	N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here				
<b>&gt;</b>				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
during the year?	Yes X No			
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified per				
May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)				
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sche			1	
Form 4720, to determine if the foundation had excess business holdings in 2009)	N/A	3ь		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
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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Form 990-PF (2009) THE WM. BRYCE THOMPSON F. Part VII-B Statements Regarding Activities for Which I			22-2941	409	Page 6
<ul> <li>5a During the year did the foundation pay or incur any amount to</li> <li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section)</li> <li>(2) Influence the outcome of any specific public election (see section 4955), of any voter registration drive?</li> <li>(3) Provide a grant to an individual for travel, study, or other similar purposes</li> </ul>	n 4945(e))? or to carry on, directly or indir	ectly,	es X No es X No es X No		
<ul> <li>(4) Provide a grant to an organization other than a charitable, etc., organizatio 509(a)(1), (2), or (3), or section 4940(d)(2)?</li> <li>(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?</li> <li>b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53 4945 or in a current notice regarding disaster assistance (see instru</li> </ul>	or educational purposes, or der the exceptions described actions)?	for Y	es X No	5b	
Organizations relying on a current notice regarding disaster assistance check h  c if the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.494s  Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	rom the tax because it mainta N 5- <i>5(d</i> )	I/A Y	es No		-
<ul> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870.</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax s b If yes, did the foundation receive any proceeds or have any net income attribute.</li> <li>Part VIII</li> </ul>	helter transaction? able to the transaction?		es X No N/A	7b	X
Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their	<del></del>				
(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 deterred compensation		Expense unt, other owances
SEE STATEMENT 11		0.	0.		0.
	<u>.</u>				
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	luded on line 1). If none,  (b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	1 40000	Expense unt, other wances
N/A	0.00	0.	0.		0.
Total number of other employees paid over \$50,000					0

Form 990-PF (2009) THE WM. BRYCE THOMPSON FOUNDATION	N. TNC. 22-	2941409 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)		2341403 .uguv
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
N/A		
		0.
	4	
	-	ŀ
	<del>-</del>	-
	7	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti	and information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	Expenses
1 N/A		
		0.
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 li	ines 1 and 2	Amount
1 N/A		
		•
		0.
2	,	
All other program-related investments. See instructions	·	

0.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foundations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	569,419.
C	Fair market value of all other assets	10	520,000.
đ	Total (add lines 1a, b, and c)	1d	1,089,419.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,089,419.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	16,341.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,073,078.
6	Minimum investment return. Enter 5% of line 5	6	53,654.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations of foreign organizations check here  and do not complete this part )	ons and certain	
1	Minimum investment return from Part X, line 6	1	53,654.
2a	Tax on investment income for 2009 from Part VI, line 5	23.	
b	Income tax for 2009 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	2,623.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,623. 51,031.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	51,031.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	51,031.
_	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc total from Part I, column (d), line 26		100 102
		1a	100,193.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)  Cook distribution test (attach the required exhaults)	3a	
	Cash distribution test (attach the required schedule)	3b	100 102
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	100,193.
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		2 622
6	·	6	2,623. 97,570.
6	Adjusted qualifying distributions. Subtract line 5 from line 4  Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found		<del></del>
	4940(e) reduction of tax in those years	ation quaimes for	the section

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7	Оограз	rears prior to 2000	2000	51,031.
2 Undistributed income, if any, as of the end of 2009			· · · · · · · · · · · · · · · · · · ·	31,031.
a Enter amount for 2008 only			14,144.	
b Total for prior years	rime' H miles seemile	,	, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
		0.		
3 Excess distributions carryover, if any, to 2009			7,7	· • • • • • • • • • • • • • • • • • • •
a From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ►\$ 100, 193.				
a Applied to 2008, but not more than line 2a			14,144.	
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		·····		51,031.
e Remaining amount distributed out of corpus	35,018.			
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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	35,018.			
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	35,018.			
10 Analysis of line 9				
a Excess from 2005		•		
b Excess from 2006				
c Excess from 2007		· ·		
d Excess from 2008	1	<b>{</b>	3	

e Excess from 2009

35,018.

a If the foundation has received a ruling or d		•			
* foundation, and the ruling is effective for 2	009, enter the date of	the ruling	▶		<del></del>
b Check box to indicate whether the foundat	ion is a private operatii	ng foundation described		4942(J)(3) or 4	942(j)(5)
a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of		ľ			
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities		-			
Subtract line 2d from line 2c					<u></u> .
Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying		-			
under section 4942(j)(3)(B)(i)		<u> </u>			-
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
····		<del> </del>			
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)					<del></del>
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)		1			
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		 	 	h = 1 &E 000 a	
art XV Supplementary Information at any time during the			it the foundation	nad \$5,000 or m	ore in assets
Information Regarding Foundation		instructions.,			V
a List any managers of the foundation who	•	than 2% of the total con	tributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed mo					
BRYCE THOMPSON, IV					
b List any managers of the foundation who			(or an equally large portion	n of the ownership of a p	artnership or
other entity) of which the foundation has a	10% or greater intere	st			
ONE					
Information Regarding Contribution					
Check here X if the foundation onl					
the foundation makes gifts, grants, etc. (se	ee instructions) to indi	viduals or organizations	under other conditions, co	mplete items 2a, b, c, and	d d
a The name, address, and telephone number	r of the person to who	m applications should be	addressed		
h The form in which and leading about he		A	h and described		<del></del>
b The form in which applications should be	submitted and informa	tion and materials they s	noula include		
c Any submission deadlines				-	
d Any restrictions or limitations on awards,	nuch no hu soczast	al arano, abambahla fistis-	lando of motivations are	ther facts	
III AUV RESTRICTIONS OF IMPRATIONS ON AWARDS	such as by geographic	ai areas, charitadie tields	, kinas ot institutions, or o	uner tactors	
a ring toother or initiations on average,					

Part XV Supplementary Informatio	n (continued)			
<b>Grants and Contributions Paid During the</b>	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	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a Paid during the year				
			:	
SEE STATEMENT 12				
Total Total	L	<u> </u>	<b>▶</b> 3a	98,95
b Approved for future payment				·
NONE				
<b>Total</b> 3611 02-02-10			<b>▶</b> 3b	orm <b>990-PF</b> (20

Part XVI-A	Analysis	of Income	-Producing	<b>Activities</b>
------------	----------	-----------	------------	-------------------

inter gross amounts unless otherwise indicated	Unrelated by	usiness income	Excluded by section 512, 513, or 514		(e)
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business   code	Amount	code	Amount	function income
a					
b					
C					
d					
e	_				
1					-
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	2,287.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate				<u> </u>	., , , , , , , , , , , , , , , , , , ,
a Debt-financed property					
b Not debt-financed property					-357
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	531120	260,200.			
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b					
C			<u> </u>		
d	_				
e	_				<del> </del>
2 Subtotal Add columns (b), (d), and (e)	<u> </u>	260,200.		2,287.	-357
3 Total. Add line 12, columns (b), (d), and (e)				13	262,130
See worksheet in line 13 instructions to verify calculations	)				

ne No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)				
		·			
i					
		······································			
1					
		<del></del>			
521 12-10		Form <b>990-PF</b> (20			

Preparer's identifying number

Here

Signature of officer or trustee

Preparer's

Firm's name (or yours

if self-employed). address, and ZIP code

signature

Only

Date

Date

Check If

employed 🕨 🗓

Phone no

EIN >

self-

and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all infogmation of which preparer has any

CHERRY HILL, NJ 08003

& ASSOCIATES,

1111 MARLKRESS RD., STE. 102

GILLESPIE

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

OMB No 1545-0047

2009

**Employer identification number** 

BRYCE THOMPSON FOUNDATION, INC. 22-2941409 THE WM. Organization type (check one): Section: Filers of: \_\_\_\_501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 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 Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

for Form 990, 990-EZ, or 990-PF.

Employer identification number

#### THE WM. BRYCE THOMPSON FOUNDATION, INC.

22-2941409

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	W. BRYCE THOMPSON, IV  195 NASSAU STREET  PRINCETON, NJ 08540	\$ \$0.	Person X Payroll  Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	Name, address, and 2n + 4	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)

Employer identification number

#### THE WM. BRYCE THOMPSON FOUNDATION, INC.

22-2941409

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a)			
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3453 02-01-			990, 990-EZ, or 990-PF) (

Name of organization Employer identification number BRYCE THOMPSON FOUNDATION, 22-2941409 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 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

Description   Content Very   Conte		
Description   Description   Acquired   Method   Life   Cott Of Sass   Each Season   Deprecation	Current Year Deduction	
Describon	Current Sec 179	o
Date   Date   Date   Method   Life   Life   Cast Of Bass   Exal   Bass For	Accumulated Depreciation	0
Description   Date	Basis For Depreciation	
LAND HELD FOR Acquired Method Life No. Cost Or Basis  LAND HELD FOR VARIESI  LAND DEVELOPMENT VARIESI  * TOTAL 990-PF PG 1  DEPR  DEPR  Description  Acquired Method Life No. Cost Or Basis  21,109.  613,156.	Reduction In Basis	Ċ
LAND HELD FOR CINVESTMENT COSTS  DEPR	Bus % Excl	
LAND HELD FOR GINVESTMENT COSTS  * TOTAL 990-PF PG 1 DEPR	Unadjusted Cost Or Basis	592,047. 21,109, 613,156.
LAND HELD FOR GINVESTMENT COSTS * TOTAL 990-PF PG 1 DEPR	No Se	
Description Acquired LAND HELD FOR GINVESTMENT COSTS * TOTAL 990-PF PG 1 DEPR	Life	
Description Acquired LAND HELD FOR GINVESTMENT COSTS * TOTAL 990-PF PG 1 DEPR	Method	
Description  LAND HELD FOR  GINVESTMENT  TCOSTS  * TOTAL 990-PF PG  DEPR	<b>———</b>	
Asset No of the control of the contr	) Description	(b)
	Asset	

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

FORM 990-PF INTEREST ON	SAVINGS AND T	EMPORARY CAS	H INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
FIRST CONSTITUTION BANK WILLIAM BRYCE THOMPSON IV				2,26	63. 24.
TOTAL TO FORM 990-PF, PAR	T I, LINE 3,	COLUMN A		2,28	87.
FORM 990-PF	RENTAL	INCOME		STATEMENT	2
KIND AND LOCATION OF PROP	ERTY		ACTIVITY NUMBER	GROSS RENTAL INCO	OME
LAND - E. WINDSOR TOWNSHI OFFICE CONDO - MERCERVILL			1 2	1,73 10,90	
TOTAL TO FORM 990-PF, PAR	T I, LINE 5A			12,63	38.
•					
FORM 990-PF	RENTAL E	XPENSES		STATEMENT	3
FORM 990-PF DESCRIPTION	RENTAL E	XPENSES  ACTIVITY  NUMBER	AMOUNT	STATEMENT	3
FORM 990-PF  DESCRIPTION  INSURANCE REAL ESTATE TAXES  DEPRECIATION CONDO FEE & MAINTENANCE MAINTENANCE & REPAIRS INSURANCE	RENTAL E	ACTIVITY NUMBER	127. 4,369. 998. 2,101. -229.		
DESCRIPTION  INSURANCE REAL ESTATE TAXES  DEPRECIATION CONDO FEE & MAINTENANCE MAINTENANCE & REPAIRS INSURANCE REAL ESTATE TAXES		ACTIVITY NUMBER -	127. 4,369. 998. 2,101.	TOTAL	96.
DESCRIPTION  INSURANCE REAL ESTATE TAXES  DEPRECIATION CONDO FEE & MAINTENANCE MAINTENANCE & REPAIRS INSURANCE REAL ESTATE TAXES WATER & SEWER	- SUBTOTAL -	ACTIVITY NUMBER -	127. 4,369. 998. 2,101. -229. 2,397. 3,026. 156.	TOTAL 4,49	96.

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	2,487.	0.		1,243.
TO FORM 990-PF, PG 1, LN 16B	2,487.	0.		1,243.
FORM 990-PF	TAX	ES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REAL ESTATE TAXES REAL ESTATE TAXES REAL ESTATE TAXES	12,986. 4,369. 3,026.	0. 4,369. 3,026.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	20,381.	7,395.		0.
FORM 990-PF	OTHER E	XPENSES	S	PATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LICENSES & FEES INSURANCE MANAGEMENT FEES MISCELLANEOUS INSURANCE CONDO FEE & MAINTENANCE MAINTENANCE & REPAIRS INSURANCE WATER & SEWER LICENSES & FEES	175. 252. 6,203. 150. 127. 2,101. -229. 2,397. 156. 50.	0. 0. 0. 127. 2,101. -229. 2,397. 156. 50.		0. 0. 0. 0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	11,382.	4,602.	· <del></del>	0.

FORM 990-PF RECEIVABLES DUE FR	OM OFFICERS, DI	RECTORS, ETC.	STATEMENT
BORROWER'S NAME AND TITLE			
W. BRYCE THOMPSON IV, PRESIDENT			
DATE OF MATURITY NOTE DATE TERMS OF REPAY	MENT	INTEREST RATE	ORIGINAL LOAN AMOUNT
02/04/10 05/31/11 DUE IN FULL		2.00%	0
SECURITY PROVIDED BY BORROWER	PURPOSE O	F LOAN	
NOTE	ADVANCE		
DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE	FMV OF LOAN
GUARANTEE	824.	800.	824
——————————————————————————————————————			<del></del>
		800.	824
TOTAL TO FORM 990-PF, PART II, LIN	IE 6		STATEMENT 8
TOTAL TO FORM 990-PF, PART II, LIN	IE 6		
TOTAL TO FORM 990-PF, PART II, LIN  FORM 990-PF DEPRECIATION OF ASSE  DESCRIPTION  LAND HELD FOR INVESTMENT	TE NOT HELD FOR	INVESTMENT	STATEMENT 8
TOTAL TO FORM 990-PF, PART II, LIN  FORM 990-PF DEPRECIATION OF ASSE  DESCRIPTION  LAND HELD FOR INVESTMENT  LAND DEVELOPMENT COSTS	COST OR OTHER BASIS  592,047. 21,109.	INVESTMENT  ACCUMULATED DEPRECIATION  0.	BOOK VALUE  592,047
TOTAL TO FORM 990-PF, PART II, LIN  FORM 990-PF DEPRECIATION OF ASSE  DESCRIPTION  LAND HELD FOR INVESTMENT	COST OR OTHER BASIS  592,047. 21,109.	INVESTMENT  ACCUMULATED DEPRECIATION  0. 0.	BOOK VALUE  592,047 21,109
TOTAL TO FORM 990-PF, PART II, LIN  FORM 990-PF DEPRECIATION OF ASSE  DESCRIPTION  LAND HELD FOR INVESTMENT  LAND DEVELOPMENT COSTS  TOTAL TO FM 990-PF, PART II, LN 14	CTS NOT HELD FOR  COST OR  OTHER BASIS  592,047.  21,109.  613,156.	INVESTMENT  ACCUMULATED DEPRECIATION  0. 0.	BOOK VALUE  592,047 21,109 613,156
TOTAL TO FORM 990-PF, PART II, LIN  FORM 990-PF DEPRECIATION OF ASSE  DESCRIPTION  LAND HELD FOR INVESTMENT LAND DEVELOPMENT COSTS  TOTAL TO FM 990-PF, PART II, LN 14	COST OR OTHER BASIS  592,047. 21,109.  613,156.  OTHER ASSETS  BEGINNING OF	INVESTMENT  ACCUMULATED DEPRECIATION  0. 0.	BOOK VALUE  592,047 21,109 613,156  STATEMENT  STATEMENT  FAIR MARKET

FORM 990-PF	OTHER LIABILITIES		STAT	EMENT 10
DESCRIPTION		BOY AMOUNT	EOY A	AMOUNT
TENANT SECURITY DEPOSIT DUE TO RELATED COMPANY		3,45	3.	0. 22,261.
TOTAL TO FORM 990-PF, PART II	, LINE 22	3,45	3.	22,261.
	LIST OF OFFICERS, D AND FOUNDATION MANA		STAT	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
W. BRYCE THOMPSON, IV 195 NASSAU STREET PRINCETON, NJ 08540	PRESIDENT / TR	REASURER 0.	0.	0.
W. BRYCE THOMPSON, V 195 NASSAU STREET PRINCETON, NJ 08540	TRUSTEE 1.00	0.	0.	0.
LISE L. THOMPSON-BRANDER 195 NASSAU STREET PRINCETON, NJ 08540	TRUSTEE 1.00	0.	0.	0.
HANNAH CHAPMAN THOMPSON 195 NASSAU STREET PRINCETON, NJ 08540	TRUSTEE 1.00	0.	0.	0.
BARTON LIPPINCOTT THOMPSON 195 NASSAU STREET PRINCETON, NJ 08540	TRUSTEE 1.00	0.	0.	0.
ARCHIBALD S. REID 195 NASSAU STREET PRINCETON, NJ 08540	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	GE 6, PART VIII	0.	0.	0.

FORM 990-PF

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STATEMENT

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ACHIEVEMENT OF HUMAN POTENTIAL DONOR SERVICES 8801 STENTON AVENUE WYNDMOOR, PA 19038	N/A CHARITABLE DONATION	UNKNOWN	300.
AMERICAN CANCER SOCIETY 15 MT. VERNON STREET RIDGEFIELD PARK, NJ 07660	N/A CHARITABLE DONATION	UNKNOWN	225.
AMERICAN HEART ASSOCIATION 1 UNION ST., SUITE 301 ROBBINSVILLE, NJ 08691	N/A CHARITABLE DONATION	UNKNOWN	1,000.
AMERICAN RED CROSS OF CENTRAL NJ PO BOX 822474 PHILADELPHIA, PA 19182-2474		UNKNOWN	8,700.
AMNESTY INTERNATIONAL 5 PENN PLAZA NEW YORK, NY 10001	N/A CHARITABLE DONATION	UNKNOWN	200.
AMWELL VALLEY FIRE PO BOX 76 RINGOES, NJ 08551	N/A CHARITABLE DONATION	UNKNOWN	200.
AMWELL VALLEY RESCUE SQUAD PO BOX 147 RINGOES, NJ 08551		UNKNOWN	200.
ANCHOR HOUSE FOUNDATION 482 CENTER STREET TRENTON, NJ 08611	N/A CHARITABLE DONATION	UNKNOWN	500.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

THE WM. BRYCE THOMPSON FOUNDAT	ION, INC.		22-2941409
ARTS COUNCIL OF PRINCETON 102 WITHERSPOON ST. PRINCETON, NJ 08542	N/A CHARITABLE DONATION	UNKNOWN	2,275.
BISHOPS ANNUAL APPEAL PO BOX 4887 TRENTON, NJ 08650-4487	N/A CHARITABLE DONATION	UNKNOWN	1,000.
BOY SCOUTS OF AMERICA 245 US HIGHWAY 130, SUITE 106 DAYTON, NJ 08810	N/A CHARITABLE DONATION	UNKNOWN	400.
BRADY CENTER TO PREVENT GUN VIOLENCE PO BOX 96629 WASHINGTON, DC 20077	N/A CHARITABLE DONATION	UNKNOWN	350.
BRONX ACADEMY OF LETTERS 90 BROAD ST., 21ST FLOOR NEW YORK, NY 20004	N/A CHARITABLE DONATION	UNKNOWN	100.
CATHOLIC RELIEF SERVICES 228 W. LEXINGTON STREET BALTIMORE, MD 21201-3343	N/A CHARITABLE DONATION	UNKNOWN	200.
CHANNEL 13 WNET PO BOX 1313 NEW YORK, NY 10102-0053	N/A CHARITABLE DONATION	UNKNOWN	200.
CHILDREN'S WISH FOUNDATION 8615 ROSWELL ROAD ATLANTA, GA 30350	N/A CHARITABLE DONATION	UNKNOWN	300.
CHRISTOPHER REEVE FOUNDATION PO BOX 9004 WALDORF, MD 20697-0410	N/A CHARITABLE DONATION	UNKNOWN	300.
CONSERVE WILDLIFE FOUNDATION PO BOX 400 TRENTON, NJ 08625	N/A CHARITABLE DONATION	UNKNOWN	500.

THE WM. BRYCE THOMPSON FOUNDATI	ON, INC.		22-2941409
CRAWFORD HOUSE 362 SUNSET ROAD, PO BOX 255 SKILLMAN, NJ 08558	N/A CHARITABLE DONATION	UNKNOWN	500.
CROSSROADS OF THE AMERICAN REVOLUTION ASSN PO BOX 1364 PRINCETON, NJ 08542	N/A CHARITABLE DONATION	UNKNOWN	200.
D&R GREENWAY TRUST ONE PRESERVATION PLACE PRINCETON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	3,000.
DARLINGTON SCHOOL-OFFICE OF INSTITUTIONAL ADVANCEMENT 1014 CAVE SPRING ROAD ROME, GA 30161	N/A CHARITABLE DONATION	UNKNOWN	250.
DIOCESE OF METUCHEN 146 METLARS LANE PISCATAWAY, NJ 08854	N/A CHARITABLE DONATION	UNKNOWN	300.
DIOCESE OF TRENTON 701 LAWRENCEVILLE ROAD TRENTON, NJ 08648	N/A CHARITABLE DONATION	UNKNOWN	500.
	N/A CHARITABLE DONATION	UNKNOWN	12,000.
EVERY CHILD VALUED 175 JOHNSON AVENUE LAWRENCEVILLE, NJ 08648	N/A CHARITABLE DONATION	UNKNOWN	200.
FRIENDS OF ELI PARK 6 CORYELL STREET LAMBERTVILLE, NJ 08530	N/A CHARITABLE DONATION	UNKNOWN	100.
FRIENDS OF NJ STATE MUSEUM 205 WEST STATE STREET TRENTON, NJ 08608		UNKNOWN	500.

THE WM. BRYCE THOMPSON FOUNDATI	•		22-2941409
	N/A CHARITABLE DONATION	UNKNOWN	500.
GROUNDS FOR SCULPTURE 18 FAIRGROUNDS ROAD HAMILTON, NJ 08619	N/A CHARITABLE DONATION	UNKNOWN	250.
HANDS TOGETHER FOR HAITI PO BOX 80985 SPRINGFIELD, MA 01138	N/A CHARITABLE DONATION	UNKNOWN	200.
HIDEAWAY HILL FARM 9072 AIRFIELD COURT KEMPTON, PA 19529		UNKNOWN	400.
HOPEWELL FIRE CO STATION 52 4 COLUMBIA AVENUE HOPEWELL, NJ 08525	N/A CHARITABLE DONATION	UNKNOWN	100.
HUNTERDON HEALTHCARE SYSTEM 2100 WESTCOTT DRIVE FLEMINGTON, NJ 08822	N/A CHARITABLE DONATION	UNKNOWN	1,500.
HUNTERDON HOSPICE 2100 WESTCOTT DRIVE FLEMINGTON, NJ 08822	N/A CHARITABLE DONATION	UNKNOWN	500.
HUNTERDON LAND TRUST ALLIANCE 56 MAIN ST., SUITE 2E FLEMINGTON, NJ 08822	N/A CHARITABLE DONATION	UNKNOWN	2,000.
HYDE HALL 267 GLIMMERGLASS STATE PARK COOPERSTOWN, NY 13326	N/A CHARITABLE DONATION	UNKNOWN	300.
INSTITUTE FOR ADVANCED STUDY EINSTEIN DRIVE, PRINCETON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	1,500.

THE WM. BRYCE THOMPSON FOUNDATI	ON, INC.		22-2941409
MCCARTER THEATRE 91 UNIVERSITY PLACE PRINCETON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	5,000.
MORVAN MUSEUM AND GARDEN 55 STOCKTON STREET PRINCETON, NJ 08542	N/A CHARITABLE DONATION	UNKNOWN	500.
NATIONAL ROWING FOUNDATION 67 MYSTIC ROAD N. STOVINGTON, CT 06359	N/A CHARITABLE DONATION	UNKNOWN	100.
NATIONAL TRUST FOR HISTORIC PRESERVATION 1785 MASSACHUSETTS AVE, NW WASHINGTON, DC 20036	N/A CHARITABLE DONATION	UNKNOWN	500.
NJ CONSERVATION FOUNDATION 170 LONGVIEW ROAD FAR HILLS, NJ 07931		UNKNOWN	5,000.
OFF-BROADSTREET THEATRE 5 S. GREENWOOD AVE.; PO BOX 359 HOPEWELL, NJ 08525		UNKNOWN	300.
OPERA NEW JERSEY PO BOX 3151 PRINCETON, NJ 08542		UNKNOWN	2,000.
PENNINGTON SCHOOL 112 WEST DELAWARE AVENUE PENNINGTON, NJ 08534	N/A CHARITABLE DONATION	UNKNOWN	2,500.
PRINCETON ART MUSEUM MCCORMICK HALL PRINCETON, NJ 08544	N/A CHARITABLE DONATION	UNKNOWN	500.
PRINCETON CENTER FOR LEADERSHIP TRAINING 911-913 COMMONS WAY PRINCETON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	1,000.

THE WM. BRYCE THOMPSON FOUNDATI	ON, INC.		22-2941409
PRINCETON COMMUNITY TENNIS PROGRAM 92 WASHINGTON ROAD PATERSON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	300.
PRINCETON FIRST AID AND RESCUE SQUAD 937 N. HARRISON STREET PRINCETON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	300.
PRINCETON HEALTHCARE FOUNDATION 253 WITHERSPOON STREET PRINCETON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	2,500.
PRINCETON HISTORICAL SOCIETY 158 NASSAU STREET PRINCETON, NJ 08542	N/A CHARITABLE DONATION	UNKNOWN	5,000.
PRINCETON PUBLIC LIBRARY FOUNDATION 65 WITHERSPOON STREET PRINCETON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	300.
PRINCETON SENIOR RESOURCE CENTER 45 STOCKTON STREET PRINCETON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	1,000.
PRINCETON SYMPHONY P.O. BOX 250 PRINCETON, NJ 08542	N/A CHARITABLE DONATION	UNKNOWN	900.
RESCUE MISSION OF TRENTON PO BOX 790 TRENTON, NJ 08605	N/A CHARITABLE DONATION	UNKNOWN	1,000.
SAVE 900 HERRONTOWN ROAD PRINCETON, NJ 08540	N/A CHARITABLE DONATION	UNKNOWN	500.
SMITHSONIAN INSTITUTE PO BOX 37012, MRC 712 WASHINGTON, DC 20013	N/A CHARITABLE DONATION	UNKNOWN	150.

THE WM. BRYCE THOMPSON FOUNDATI	•			22-2941409
SOURLAND PLANNING COUNCIL PO BOX 72 HOPEWELL, NJ 08525	N/A CHARITABLE	DONATION	UNKNOWN	500.
SPECIAL OLYMPICS NJ PO BOX 6036 LAWRENCEVILLE, NJ 08648	N/A CHARITABLE	DONATION	UNKNOWN	500.
ST. ALPHONSUS CHURCH 54 E. PROSPECT STREET HOPEWELL, NJ 08525	N/A CHARITABLE	DONATION	UNKNOWN	6,000.
ST. PAUL'S CHURCH 218 NASSAU STREET PRINCETON, NJ 08542	N/A CHARITABLE		UNKNOWN	300.
ST. VINCENT DEPAUL SOCIETY 214 NASSAU STREET PRINCETON, NJ 08542	N/A CHARITABLE	DONATION	UNKNOWN	200.
ST. WILLIAMS ON LONG POINT PO BOX 71 RAQUETTE LAKE, NY 13435	N/A CHARITABLE	DONATION	UNKNOWN	1,500.
STONE POINTE CAPITAL FUND 20 HORSENECK LANE GREENWICH, CT 06830	N/A CHARITABLE	DONATION	UNKNOWN	1,500.
STONEY BROOK MILLSTONE WATERSHED ASSOCIATION 31 TITUS MILL ROAD PENNINGTON, NJ 08534	N/A CHARITABLE	DONATION	UNKNOWN	1,000.
STUART COUNTRY DAY SCHOOL 1200 STUART ROAD PRINCETON, NJ 08540	N/A CHARITABLE	DONATION	UNKNOWN	200.
SUFFIELD ACADEMY 185 N. MAIN STREET SUFFIELD, CT 06078	N/A CHARITABLE	DONATION	UNKNOWN	1,500.

THE WM. BRYCE THOMPSON FOUNDATI	ON, INC.		22-2941409
SUNSHINE FOUNDATION PO BOX 55130 TRENTON, NJ 08638	N/A CHARITABLE DONATION	UNKNOWN	500.
THE ARC OF SOMERSET COUNTY 141 S. MAIN STREET MANVILLE, NJ 08825	N/A CHARITABLE DONATION	UNKNOWN	500.
THE DRUMTHWACKET FOUNDATION 354 STOCKTON STREET PRINCETON, NJ 08542	N/A CHARITABLE DONATION	UNKNOWN	300.
THE NATURE CONSERVANCY PO BOX 6014 ALBERT LEA, MN 56007	N/A CHARITABLE DONATION	UNKNOWN	2,250.
THE SALVATION ARMY PO BOX 956 SOMERVILLE, NJ 08876	N/A CHARITABLE DONATION	UNKNOWN	6,000.
TRENTON AREA SOUP KITCHEN 72 1/2 ESCHER ST. PO BOX 872 TRENTON, NJ 08605	N/A CHARITABLE DONATION	UNKNOWN	1,000.
UNICEF PO BOX 27708 NEWARK, NJ 07101	N/A CHARITABLE DONATION	UNKNOWN	2,000.
UNITED FIRST PRESBYTERIAN CHURCH OF AMWELL 1000 OLD YORK ROAD RINGOES, NJ 08551	N/A CHARITABLE DONATION	UNKNOWN	150.
UNITED WAY OF GREATER MERCER COUNTY 3131 PRINCETON PIKE, BLDG 4 LAWRENCEVILLE, NJ 08648	N/A CHARITABLE DONATION	UNKNOWN	500.
UNIVERSITY OF COLORADO FOUNDATION PO BOX 17126 DENVER, CO 00217	N/A CHARITABLE DONATION	UNKNOWN	100.

THE WM. BRYCE THOMPSON FOUNDATI	ON, INC.		22-2941409
WHYY . 150 N. 6TH STREET PHILADELPHIA, PA 19106	N/A CHARITABLE DONATION	UNKNOWN	150.
WOMANSPACE 1212 STUYVESANT AVENUE TRENTON, NJ 08618	N/A CHARITABLE DONATION	UNKNOWN	200.
WXPN 3025 WALNUT STREET PHILADELPHIA, PA 19104	N/A CHARITABLE DONATION	UNKNOWN	500.
YMCA-PRINCETON 59 PAUL ROBESON PLACE PRINCETON NJ 40	N/A CHARITABLE DONATION	UNKNOWN	500.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A	<u> </u>	98,950.

# Form **8868**

(Rev January 2011) Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No. 1545-1709

IIIIGHA nevelue		arate appin		<u></u> .		
	filing for an Automatic 3-Month Extension, c filing for an Additional (Not Automatic) 3-Mo					🕨 🗸
	nning for an Additional (Not Automatic) 3-Mo nplete Part II unless you have already been g					n 8868.
	filing (e-file). You can electronically file Form					
	on required to file Form 990-T), or an additiona					
	uest an extension of time to file any of the f					
	Transfers Associated With Certain Personal ). For more details on the electronic filing of the					
				e ioi Criari	iles & r	ionpronts.
Part I	Automatic 3-Month Extension of Time on required to file Form 990-T and reques			k this how	and (	complete
Part I only						▶ 🗆
	rporations (including 1120-C filers), partnershi ne tax returns.	ips, REMIC	s, and trusts must use Form 7004 to	o request a	ın exter	nsion of time
Type or	Name of exempt organization	···		mployer id	entificat	tion number
print	The WM. Bryce Thompson Foundation, Inc.				2-294140	
File by the	Number, street, and room or suite no. If a P O. bo	x. see instru	uctions			
due date for	195 Nassau Street					
filing your return See	City, town or post office, state, and ZIP code For	a foreign ac	ddress, see instructions			
instructions	Princeton, NJ 08542					
		- for /file o	agnerate application for each return			0 4
Enter the Re	eturn code for the return that this application is	s for (file a	separate application for each return)		•	0 4
Applicatio	n	Return	Application			Return
Is For		Code	Is For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990-	BL	02 Form 1041-A				08
Form 990-	EZ	03	Form 4720			09
Form 990-	PF	04	Form 5227			10
Form 990-	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-	T (trust other than above)	06	Form 8870			12
The books	s are in the care of  The Foundation		•	••••		
<b>T</b>	- N- N COO 001 7055	_	AV N= 600 021 0462			
Telephone			AX No. ► 609-921-9463			- □
	anization does not have an office or place of b					▶ ⊔ :hıs is
	or a Group Return, enter the organization's fou			<b>N</b> [	and a	
	le group, check this box $\dots$ $\blacktriangleright$ $\square$ . If in the names and EINs of all members the extension		tor the group, check this box	. • [	ے مال ہ	illacii
	uest an automatic 3-month (6 months for a co		required to file Form 990-T) extension	n of time		<del></del>
until					The ex	rtension is
	he organization's return for:	npt organia	eation rotal for the organization man	100 00010		
	] calendar year 20 or					
		20	09 , and ending Septem	ber 30	. 20	) 10 .
<b>-</b> 11.	tax year beginning	, 20	, and onding		,	
2 If the	e tax year entered in line 1 is for less than 12 r	nonths, ch	eck reason: Initial return I Fir	al return		
	change in accounting period	,				
L <sub>0</sub>	mange in accounting period					
	is application is for Form 990-BL, 990-PF, 990	D-T, 4720,	or 6069, enter the tentative tax, less			
	refundable credits. See instructions.			3a	\$	2,500
	nis application is for Form 990-PF, 990-T,					
	nated tax payments made. Include any prior y			3b	\$	4,096
	ince due. Subtract line 3b from line 3a. Include yo		t with this form, if required, by using EF			
	ctronic Federal Tax Payment System). See instruc		with this Form 8969 and Form 94	3c		0 8879-F○ for
caution. If	you are going to make an electronic fund v	wittiarawai	with this rollin oods, see rollin 84	JU-EU AIIC	a comi	OOI 3*EU IOF

# . 8868

(Rev. January 2011)
Department of the Treasury
Internal Revenue Service

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

► File a separate application for each return.

OMB No 1545-1709

		- пошто - р р по				
<ul> <li>If you are f</li> </ul>	iling for an Automatic 3-Month Extension,	complete d	only Part I and check this box			_, ▶ 🔲
	iling for an Additional (Not Automatic) 3-Me					
Do not com	plete Part II unless you have already been o	granted an	automatic 3-month extension on a p	reviously f	iled Form	8868
	il <b>ing (e-file).</b> You can electronically file Form					
	n required to file Form 990-T), or an addition					
-	uest an extension of time to file any of the		•			
	Fransfers Associated With Certain Persona					
	. For more details on the electronic filing of the			le for Char	ities & No	nprofits.
	Automatic 3-Month Extension of Time					
	on required to file Form 990-T and reque	-				mplete
Part I only						
	porations (including 1120-C filers), partnersh	ips, REMIC	Ss, and trusts must use Form 7004 t	o request	an extens	ion of tıme
	e tax returns.					
Type or	Name of exempt organization		1	Employer id	entificatio	n number
print						
File by the due date for	Number, street, and room or suite no. If a P.O. b	ox, see instr	ections.			
filing your return. See	Crty, town or post office, state, and ZIP code. Fo	r a foreign a	ddress, see instructions.		-	
instructions						
Enter the Re	turn code for the return that this application i	is for (file a	separate application for each return	)		
Application	1	Return	Application			Return
Is For		Code	Is For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990-E		02	Form 1041-A			08
Form 990-E	Z	03	Form 4720			09
Form 990-F	PF	04	Form 5227			10
Form 990-1	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-	(trust other than above)	06	Form 8870			12
				•		
<ul> <li>The books</li> </ul>	are in the care of ▶					
Telephone						
	nization does not have an office or place of b					. ▶ 🗌
	r a Group Return, enter the organization's foເ	ır dıgit Groi	up Exemption Number (GEN)		If this	S IS
for the whole	e group, check this box $ ightharpoonup$	it is for part	t of the group, check this box	▶ [	and atta	ach
	e names and EINs of all members the extens					
	uest an automatic 3-month (6 months for a co					
until	, 20, to file the exer	mpt organiz	cation return for the organization nan	ned above	The exte	nsion is
	e organization's return for:					
	calendar year 20or					
▶ □	tax year beginning	, 20	, and ending		, 20	
	tax year entered in line 1 is for less than 12 r	months, che	eck reason: Linitial return LiFir	nal return		
☐ Cr	nange in accounting period					
0- 16 45-1-		O.T. 4700	0000			
	s application is for Form 990-BL, 990-PF, 990 application is for Form 990-BL, 990-PF, 990 applications.	0-1, 4/20,	or 6069, enter the tentative tax, less	-		
		4700 or 6	OCO enter any refundable eredite		\$	
	s application is for Form 990-PF, 990-T,			1		
	ated tax payments made. Include any prior y				\$	
	nce due. Subtract line 3b from line 3a. Include yo ronic Federal Tax Payment System). See instruc		t with this form, it required, by using EF	P		
	you are going to make an electronic fund v		with this Form 8868, see Form 94	3c		70-EO 4
payment ins		with run a wal	With this 1 only 0000, See 1 only 04:	oo-Lo and		ma-co lor

• if you	are filing for an Additional (Not Automatic) 3-Mo	onih Exter	sion, complete only Part II and che	eck this ho	Y	Page 2 ▶ 📝
	Only complete Part II if you have already been gran					
	are filing for an Automatic 3-Month Extension,					•••
Part				copies n	eeded).	
Туре						
print	The Wm. Bryce Thompson Foundation, Inc.			2	2-2941409	<b>)</b>
File by th		ox, see Instr	uctions.			
extended due date						
filing your return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
instruction						
Enter t	he Return code for the return that this application i	is for (file a	separate application for each return	)		0 4
	- · · · · · · · · · · · · · · · · · · ·	·				
	cation	Return	Application			Return
Is For		Code	Is For			Code
Form		01				
	990-BL	02	Form 1041-A		·	08
	990-EZ	03	Form 4720			09
	990-PF	04	Form 5227			10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	990-T (trust other than above)	06	Form 8870		15 5	12
	Do not complete Part II if you were not already gra	anted an a	ntomatic 3-month extension on a pre	eviously tile	ea Form 8	868.
	books are in the care of ► The foundation		NI- N 000 004 0400			
	ohone No. ► 609-921-7655	-	No. ► 609-921-9463			
	organization does not have an office or place of b		*			. ▶ 🛄
	s is for a Group Return, enter the organization's four whole group, check this box ▶ □ . If	•	· · · · · · · · · · · · · · · · · · ·			
	n the names and EINs of all members the extension	-	t of the group, check this box	[	_ and all	acri a
	I request an additional 3-month extension of time		August 15 2	0 11		<del></del>
5	For calendar year , or other tax year beginning	na Oc	tober 1 20 09 and ending	Sentem	ber 30	20 10
6	If the tax year entered in line 5 is for less than 12 r			Final retu		, 20
-	Change in accounting period	110110110, 011	CONTRACTORISM	, i mai rota		
7	State in detail why you need the extension More	time is ne	eded to file a complete and accurate re	port		
•	State in Colair may you need the extension					
						•••••
8a	If this application is for Form 990-BL, 990-PF, 990	0-T, 4720,	or 6069, enter the tentative tax, less	any		
	nonrefundable credits. See instructions.			8a	\$	2,500
b	If this application is for Form 990-PF, 990-T,	4720, or 6	069, enter any refundable credits	and		<del></del>
	estimated tax payments made. Include any price	r year ove	erpayment allowed as a credit and	any		
	amount paid previously with Form 8868.			8b	\$	4,096
C	Balance due. Subtract line 8b from line 8a. Include yo	our paymen	t with this form, if required, by using EF	TPS		· · · · · · · · · · · · · · · · · · ·
	(Electronic Federal Tax Payment System). See instruc	tions.		8c	\$	0
			d Verification			
	enalties of perjury, I declare that I have examined this form, incl		panying schedules and statements, and to the	best of my l	inowledge a	nd belief, it is
uue, con	rect, and complete, and that I am authorized to prepare this form					

Title > COA

Date►