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Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

Fo	r cal	endar	year 2009, or t	tax year beg	inning	11/	01 , 2009,	, and endir	ng		10/3	1, 20 10
G	Chec	k all t	hat apply	Initial retu		Initial return o	•	ublic char	Ť	. L	Final retu	irn
_				Amended	return	Addres	s change			ne change		
			Name of founda	ation					^	Employer identif	ication numbe	r
U	se th				5011	NID T M T ON				12.	_ 2	
_	lab		CALVIN KL						_		-3472787	
(Othen prl:	,	Number and stre	eet (or P O box	number if	mail is not delivered to street	address)	Room/suit	ie B	Telephone number (se	e page 10 of the ins	tructions)
	or ty					0mu == 00B				131	05) 379-	7067
s	-	ecific	545 WEST 2			8TH FLOOR		l		If exemption applic		7007
in	struc	tions.	City or town, sta	ate, and ZIP co	de				İ	pending, check her	• • • • •	· . [H
			NEW YORK	NV 1000	1				P	1. Foreign organiza		
			NEW YORK,				1.4			2 Foreign organiz 85% test, check		` .┌┌
片	$\overline{}$	• •	_	_		c)(3) exempt private for		4		computation .		
\perp			1947(a)(1) nonex			Other taxable pri			— E	If private foundation		► 1
ı			et value of all as			unting method X Ca	asn [Acc	crual		under section 507(
			m Part II, col (d			her (specify) column (d) must be on	cach hace		F	If the foundation a		
		▶ \$		<u>,595.</u>		colullin (a) mast be on	Casii Dasis)	<u> </u>		under section 507(1	rsements
Li	art i	Analy	ysis of Revenu of amounts in colu	ie and Expen	ses (Ine) nd (d)	(a) Revenue and	(b) Net inve	estment	(c) /	Adjusted net		arıtable
		mavi	not necessarily eq	ual the amoun	ts in	expenses per books	incon	ne		income		oses
_		colum	n (a) (see page 1	11 of the instruc	tions))	122,500.					(Casii ba	asis only)
	1		tions, gifts, grants, etc	, received (attach sondation is not rec	chedule) .	122,300	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
ļ	2	Check	attach Sch	h B		7,854.	·	111.			ATCH	1.
_	3		t on savings and ten	•		.,001.					111,011	, - ,
7011	4		nds and interest t								 	
4 (rents			* * * * * * * * * * * * *		, - †	· ,			
	l		tal income or (loss)			<u> </u>	, , , , , , ,	75.77	. '	- 		77
Ę,			n or (loss) from sale sales pnce for all	e of assets not or	line 10		*	11 118 1	~~		- , , , , , ,	<u> </u>
evenue 4	_		on line 6a —	- (fram Dart N/			6.15	×			18/4/2015	J. J. 44.
Œ	7		Il gain net income			7 1 1 2 2	· (= ; , ,	1 49 1-7	-		· · · · · · · · · · · · · · · · · · ·	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
)	8		iort-term capital g e modifications •			**(** (*) (**)	\$ (5)	*:- *:			1.00	
•		Gross s	ales less returns				274 V , A	· , ; ; ; ; ; ;	74		1. S. S.	
3	١,		owances · · · · · · · · · · · · · · · · · · ·			10 mm		7# (£ ,			- '	ં. ત્દે
	1		profit or (loss) (at		1			٠,٠			, 7, .	, , ,
)	11		income (attach s									· · · · · · · · · · · · · · · · · · ·
	12		Add lines 1 throu			130,354		111.			,	
_	13		ensation of officers,			0						
	14		employee salarie									
ses	15		on plans, employe							·		
eii	16a		fees (attach sche				_					
Ä	b		inting fees (attac									
Ş.	С		professional fees									
ati	17	Intere	st								-	
ist	18	Taxes	(attach schedule) (se	ee page 14 of the ir	nstructions) * *	1,352					 	
듵	19	Depre	ciation (attach s	chedule) and d	lepletion.		<u> </u>			·	9 *	
þ	20	Occup	pancy								_	
ē	21	Trave	I, conferences, ar	nd meetings .			ļ					
ē	22		ng and publication			1 001						
ing	23	Other	expenses (attach	h schedule) $\overset{ ext{A}'}{\cdot}$	ICH 3.	1,021	<u> </u>				- 	
Operating and Administrative Expenses	24	Total	operating and a	dministrative o	expenses.	2 272						
Dpe	-		nes 13 through 2			2,373						153,890
J	25		ibutions, gifts, gr				<u> </u>	· · · ·		, ,		153,890
_	26		xpenses and disburse		24 and 25	156,263	 			 -		
	27		act line 26 from l			-25,909	1 .	انت				
	1		of revenue over expe			-25,909	 	111.			 	
	1		nvestment incom				\$ 4		-	-0-	-	· · ·
	1 6	· Adino	sted net income ((if negative, en	ter -0-)	1 . '	1 ' '		l	U	1	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. $^{9E1410\ 2\ 0000}$ LHK001 U575 1/28/2011 2:32:41 PM V 09-9

ATCH 2

P	art II	Balance Sheets Attached schedules and amound description column should be formally as a second should be formally as a seco	nts in the for end-of-year	Beginning of year	End o	of year
		amounts only (See instructions	3)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		6,218.	5,954.	1.
	2	Savings and temporary cash investments		62,154.	38,765.	38,765
	3	Accounts receivable	-			
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable >		, the contract of the contract		
ļ		Less allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, an				
		disqualified persons (attach schedule) (see page 16 of th				
	7	Other notes and loans receivable (attach schedule)		Y	12 12 12 12 12 12 12 12 12 12 12 12 12 1	, 18 d
		Less allowance for doubtful accounts				*
	8	Inventories for sale or use				
Assets	9	Inventories for sale or use				
155		Prepaid expenses and deferred charges	**	233, 197,	238,876.	238,876
Q		investments - 0.3 and state government obligations (attach	scriedule) .			2307070
		Investments - corporate stock (attach schedule)				
	11	Investments - corporate bonds (attach schedule) Investments - land, buildings,				· · · · · · · · · · · · · · · · · · ·
		Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans				
	13	Investments - other (attach schedule)				
	14	Land, buildings, and equipment basis		Sept. 1/2-1/2 1 2 2 2	· (, , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
		equipment basis Less accumulated depreciation (attach schedule)			·	
	15	Other assets (describe				
	16	Total assets (to be completed by all filers - see the				
		instructions Also, see page 1, item l)		301,569.	283,595.	283,595
_	17					
	18	Accounts payable and accrued expenses				-
"		Grants payable	• • • • • •			
Liabilities	19	Deferred revenue				1
藚	20	Loans from officers, directors, trustees, and other disqualifie				,
Ei.	21	Mortgages and other notes payable (attach schedule		<u> </u>		· ·
_	22	Other liabilities (describe	-)			,
] , ,
_	23	Total liabilities (add lines 17 through 22)				
		Foundations that follow SFAS 117, check he and complete lines 24 through 26 and lines				
es	24	Unrestricted				*
ũ	25	Temporarily restricted				
ä	25 26	Permanently restricted				, , , ,
P	20	Foundations that do not follow SFAS 117.		-		
Fund		check here and complete lines 27 through 3	A X			, ,
or F	27					*
		Capital stock, trust principal, or current funds				· · · · · · · · · · · · · · · · · · ·
Net Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund		301,569.	283,595.	
As	29	Retained earnings, accumulated income, endowment, or other		301,309.	203,393.	, , , ,
e	30	Total net assets or fund balances (see page 17 of t		301,569.	202 505	
Z		instructions)		301,369.	283,595.	. *
	31	Total liabilities and net assets/fund balances (see		201 560	202 505	
-		of the instructions)	<u></u>	301,569.	283,595.	<u> </u>
_		Analysis of Changes in Net Assets				
1		Il net assets or fund balances at beginning of y				221 225
		of-year figure reported on prior year's return)				301,569
2	Ente	er amount from Part I, line 27a			2	-25,909
3	Othe	er amount from Part I, line 27a er increases not included in line 2 (itemize)	ATTACI	HMENT 5	3_	7,935
4	Add	lines 1, 2, and 3			4	283,595
5	Dec	reases not included in line 2 (itemize) ▶			5_	
		I net assets or fund balances at end of year (li	ne 4 minus	line 5) - Part II, column (b), line 30 6	283,595
			<u>лтси л</u>			Form 990-PE (2000)

	describe the kind(s) of property sold (ick warehouse, or common stock, 200		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sol (mo , day, yr
a					
<u> </u>					
1			 		<u> </u>
9			<u> </u>		L
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
,			<u> </u>		
omplete only for assets sh	lowing gain in column (h) and ow	ned by the foundation on 12/31/69	0	Gains (Col (h) g	ain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less t Losses (from co	than -0-) or
					
					
		f gain, also enter in Part I, line 7			
Capital gain net income or		f (loss), enter -0- in Part I, line 7	2		
Net short-term capital gain	or (loss) as defined in sections 12	222(5) and (6)			
If gain, also enter in Part I,	line 8, column (c) (see pages 13	and 17 of the instructions)	ļ (
_	ne 8	ſ	3		
in the say, whiter for in a latt, if	'', O O				
art V Qualification Un or optional use by domestic	der Section 4940(e) for Red private foundations subject to the	uced Tax on Net Investment Inche section 4940(a) tax on net invest		me)	
or optional use by domestic section 4940(d)(2) applies, as the foundation liable for t	der Section 4940(e) for Red private foundations subject to the leave this part blank the section 4942 tax on the distril	ne section 4940(a) tax on net invest butable amount of any year in the b	ment inco		Yes X
art V Qualification Un or optional use by domestic section 4940(d)(2) applies, as the foundation liable for t 'Yes," the foundation does r	der Section 4940(e) for Red private foundations subject to the leave this part blank the section 4942 tax on the distribute qualify under section 4940(e)	butable amount of any year in the b	ment inco	d?	
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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e inst	ructio	ns)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			1 7 14 7 2 7 1
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)		- "	2
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u> </u>
	here and enter 1% of Part I, line 27b		-	, ',
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% J of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			2.
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			2.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		-	2.
6	Credits/Payments 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 450.			336
а	2009 estimated tax payments and 2008 over payment disched to 2009	- (k/2) - 1		1 50,1
þ	Exempt foreign organizations-tax witnied at source		· ** - }	, * <u>*</u>
	Tax paid with application for extension of time to the (Form 6606)	a) - 38%		
	Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d	•	4	5Ó.
7	Total credits and payments 7.66 intes out an eaging of 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			
8	Effect dry penalty for underpayment of estimated tax enest note			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		4	48.
10 11	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 4 48 · Refunded 11			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	, ,	Yes	No
	participate or intervene in any political campaign?	1a		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		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	î	* ,	. '
	published or distributed by the foundation in connection with the activities	,	, ,	1
С	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\Brigs \sum_{\text{constant}} = \text{C1} On foundation managers } \Brigs \sum_{\text{constant}} = \text{C2}	·, -		, ',
A	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			,
•	on foundation managers > \$		-	ļ
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities	,	· '	
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
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b	<u> </u>	- 77
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T		ĺ	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		,	
	By language in the governing instrument, or	٠,	, .	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		Х	1
_	conflict with the state law remain in the governing instrument?	7	X	\vdash
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	0- '	,	٠.
ва	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) DE, NY,			4
b	· · · · · · · · · · · · · · · · · · ·		X	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		1	
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			X
	27)? If "Yes," complete Part XIV	9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х

(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
 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?

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Χ

X

2 b

3 b

4 a

XNo

3a Did the foundation hold more than a 2% direct or indirect interest in any business

	or Which Form 4	720 May Be Requi	ired (contin	ued)			
5a During the year did the foundation pay or incur any amou	unt to				7.4.		
(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	1 4945(e))?	Yes Yes	X No	?	, • /	
(2) Influence-the outcome of any specific public election					i î	· , , .	٠.
directly or indirectly, any voter registration drive?			Yes	X No	***		33
(3) Provide a grant to an individual for travel, study, or of	her sımılar purposes?		Yes	X No	- 1		· .
(4) Provide a grant to an organization other than a char	itable, etc., organizatio	n described in				3,500 1/2	
section 509(a)(1), (2), or (3), or section 4940(d)(2)?	(see page 22 of the in:	structions)	. L Yes	X No	***	• •	
(5) Provide for any purpose other than religious, charita	ible, scientific, literary,	or educational		_	, **		٤-
purposes, or for the prevention of cruelty to children	or animals?		Yes	X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the trans	sactions fail to qualify	under the exceptions	described in		(Tank a	[2 27]	٠
Regulations section 53 4945 or in a current notice regard	ding disaster assistand	ce (see page 22 of the	nstructions)?	· <u>··</u> ···	. 5b		
Organizations relying on a current notice regarding disas	ter assistance check h	iere	🕨	-	* * *	િ્ત્≟ "	ı
c If the answer is "Yes" to question 5a(4), does the found	ation claim exemption	from the tax			1.35	1.	: .
because it maintained expenditure responsibility for the g	rant?		Yes	No		l' : :'	. " {
If "Yes," attach the statement required by Regulations sec					- 3	- 1"	٠
6a Did the foundation, during the year, receive any funds,	directly or indirectly, to	pay premiums].	
on a personal benefit contract?	-		Yes	X No	' '	- [-
b Did the foundation, during the year, pay premiums, dire			:t?		6 b	>	Κ_
If "Yes" to 6b, file Form 8870	•	•					
7a At any time during the tax year, was the foundation a pa	arty to a prohibited tax	shelter transaction?	Yes	XNo]]	
b If yes, did the foundation receive any proceeds or have	any net income attribu	table to the transaction			. 7b		
Part VIII Information About Officers, Directors	s, Trustees, Foun	dation Managers,	Highly Pai	d Employ	ees,		
and Contractors List all officers, directors, trustees, foundation m	anagers and their	compansation (see	nage 22 of	the inetruc	tione)		—
	(b) Title, and average	(c) Compensation (If not paid, enter	(d) Contribu	tions to		se account,	_
(a) Name and address	hours per week	(if not paid, enter	employee ben	afitniane i	المحمطهم		
	devoted to position	· ·-O-) `	and deferred cor		other all	owances	
	devoted to position	·			other an	Owances	
ATTACHMENT 6	devoted to position	0.			other all	owances	0
	devoted to position			npensation	other all	owances	0
ATTACHMENT 6	devoted to position			npensation	other all	owalices	0
ATTACHMENT 6	devoted to position			npensation	other all	owalices	0
ATTACHMENT 6	devoted to position			npensation	other all	owances	
ATTACHMENT 6	devoted to position			npensation	other all	owances	0
ATTACHMENT 6	devoted to position			npensation	other all	owalices	
ATTACHMENT 6		0.	e page 23 o	0 .		owalices	
2 Compensation of five highest-paid employees (or If none, enter "NONE."	ther than those inc	0.	e page 23 o	f the instru	ictions).	se account,	
2 Compensation of five highest-paid employees (or	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).		
2 Compensation of five highest-paid employees (or If none, enter "NONE."	ther than those inc	0.	e page 23 o	f the instru	ictions).	se account,	
2 Compensation of five highest-paid employees (of If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).	se account,	
2 Compensation of five highest-paid employees (of If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).	se account,	
2 Compensation of five highest-paid employees (of If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).	se account,	0
2 Compensation of five highest-paid employees (of If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).	se account,	
2 Compensation of five highest-paid employees (of If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).	se account,	
2 Compensation of five highest-paid employees (of If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).	se account,	
2 Compensation of five highest-paid employees (of If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).	se account,	
2 Compensation of five highest-paid employees (of If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).	se account,	
2 Compensation of five highest-paid employees (of If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	ther than those inc	0.	e page 23 o (d) Contribu employee ! plans and d	f the instru	ictions).	se account,	

Part VIII	and Contractors (continued)	yees,
Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE		
- 		ļ
otal numbe	er of others receiving over \$50,000 for professional services	▶ 0
	Summary of Direct Charitable Activities	
ait in-A	Summary of Direct Chamable Activities	
	lation's four largest direct charitable activities dunng the tax year Include relevant statistical information such as the number ins and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 N/A		
2		
3		Ì
		
"]
art 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 NONE		
2]
-		
All other pro	gram-related investments. See page 24 of the instructions	
3 NONE		
otal Add	ines 1 through 3	7

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	eign foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	Land C	
	purposes		
а	Average monthly fair market value of securities	1a	237,224.
b	Average of monthly cash balances	. 1b	63,626.
C	Fair market value of all other assets (see page 24 of the instructions)	. 1c	0.
d	Total (add lines 1a, b, and c)	. 1d	300,850.
е	Reduction claimed for blockage or other factors reported on lines 1a and	***	
	1c (attach detailed explanation)1e		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	300,850.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	. 4	4,513.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	296,337.
6	Minimum investment return. Enter 5% of line 5	. 6	14,817.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) pr foundations and certain foreign organizations check here ▶ and do not complete this	rvate operating s part)	
1	Minimum investment return from Part X, line 6	. 1	14,817.
2 a		2.	
b	Income tax for 2009 (This does not include the tax from Part VI)	7	
С		2c	2.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	14,815.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	_	14,815.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	. 7	14,815.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	^^ · .	
а		_ 1a	153,890.
b			0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	•	
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the	•	
а	Suitability test (prior IRS approval required)	3a	0.
b		l 'kh l	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	• —	153,890.
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)		N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4		153,890.
	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		foundation

Pa	Part XIII Undistributed Income (see page 26 of the instructions)										
		(a)	(b)	(c)	(d)						
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009						
	line 7				14,815.						
2	Undistributed income, if any, as of the end of 2009	機學工具 经销售的									
а	Enter amount for 2008 only				로 함께 도기하다 #1.15						
b	Total for prior years 20 07 20 06 20 05	1 +,1			* * * * * * * * * * * * * * * * * * *						
3	Excess distributions carryover, if any, to 2009	•	1 1 1	``````````````````````````````````````	```						
а	From 2004 80,460.			ı	· · · · · · · · · · · · · · · · · · ·						
b	From 2005 246,100.	·	,								
С	From 2006 224, 410.	•									
đ	From 2007 88,942.	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	₹ i	, .	•						
е	From 2008 181,700.		, a.	× ,	, , ,						
f	Total of lines 3a through e	821,612.	16 1								
4	Qualifying distributions for 2009 from Part XII,										
	line 4 ▶ \$153,890.		15 y 5 y 5 y 6 y 6 y 6 y 6 y 6 y 6 y 6 y	G. St.	1 4 4 4 4 1 1 2 4 1						
а	Applied to 2008, but not more than line 2a	7 - 7 - 7 - 7 - 7 - 7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		72.50						
b	Applied to undistributed income of prior years (Election				R 7 12 1 1						
	required - see page 26 of the instructions)	- (, , , , , , ,	<u> </u>							
C	Treated as distributions out of corpus (Election	153,890.	ATCH 7								
	required - see page 26 of the instructions)	133,890.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·						
	Applied to 2009 distributable amount	0.	(% (%) () () () () () () () (\\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
e	Remaining amount distributed out of corpus	14,815.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	***************************************	14,815.						
5	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same	14,015.			, ,						
	amount must be shown in column (a))	- '		4							
6	Enter the net total of each column as indicated below:	* '									
_	Corpus Add lines 3f, 4c, and 4e Subtract line 5	960,687.	ĺ								
а	•			,	•						
b	Prior years' undistributed income Subtract line 4b from line 2b										
С	Enter the amount of prior years' undistributed		T								
	income for which a notice of deficiency has been	,		'	, ,						
	issued, or on which the section 4942(a) tax has been previously assessed										
А	Subtract line 6c from line 6b Taxable	4 17 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		-							
•	amount - see page 27 of the instructions	(1 2 3 1 1 2 C							
е	Undistributed income for 2008 Subtract line		The state of the s		District Charles						
	4a from line 2a Taxable amount - see page 27 of the instructions			, , , , , , , , , , , , , , , , , , ,	Salaki, Salaki						
f	Undistributed income for 2009. Subtract lines	- 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
•	4d and 5 from line 1 This amount must be	1. 12.5									
_	distributed in 2010	· · · · · · ·	<u> </u>	, <u>(</u>							
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section										
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the										
8	instructions)										
J	applied on line 5 or line 7 (see page 27 of the										
_	instructions)	00,040									
9	Excess distributions carryover to 2010.	895,042		- 1							
4.0	Subtract lines 7 and 8 from line 6a Analysis of line 9.	7 , ,,,	1								
10 a	Excess from 2005 246, 100		, , ,	, , ,	- , , , , , , , , , , , , , , , , , , ,						
a h	Excess from 2006		` ^~;	, ,, ,							
c	Excess from 2007		-, -		1 75 35						
d	191 700	_	4	, , ,							
	Excess from 2009 153,890	_		_							
		<u></u>			Form 990-PF (2009)						

Pa	rt XIV Private Oper	ating Foundations (see page 27 of the	instructions and Pa	art VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	it it is a private ope	erating	
	foundation, and the ruling	g is effective for 2009, e	nter the date of the ruling	' 		
b	Check box to indicate wh)(3) or 4942(J)(5)
٠.	F-4 Also former of 41 and	Tax year		Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	I or the minimum investment					
	return from Part X for each year listed	}				
					 	
þ	85% of line 2a					
С	Qualifying distributions from Part		1	1		
d	XII, line 4 for each year listed . Amounts included in line 2c not			 	 	
_	used directly for active conduct					
_	of exempt activities				 	
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line	ł				
3	2d from line 2c Complete 3a, b, or c for the	ļ	 	 		
• .	alternative test relied upon	j				
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)			ļ		
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
C	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities				<u> </u>	
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general]]	
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j)(3)(B)(iii)					
	port from an exempt					
	organization (4) Gross investment income					
Pa		ary Information (C	omplete this part	only if the found	dation had \$5,000	or more in assets
	at any time	during the year - se	e page 28 of the ir	structions.)		
1	Information Regardin					
а	List any managers of			e than 2% of the tot	tal contributions receiv	ed by the foundation
	before the close of any	y tax year (but only if th	ney have contributed	more than \$5,000) (See section 507(d)(2))	•
	CALVIN KLE	IN				
	List any managers of	the foundation who	own 10% or more o	of the stock of a cor	poration (or an equally	large portion of the
U	ownership of a partner					riarge portion or the
	ownership or a partner	iship of builting charge	William the roundation	miles a rozo or groun	51 III.6166t.	
	N/A					
2	Information Regardin	g Contribution, Grant	. Gift. Loan. Scholars	hip. etc Programs:		
_	<u>~</u>	•	•		ritable arganizations o	and door not propert
	unsolicited requests if	ine loundation only i for funds, if the foun	makes contributions	orants etc (see nac	ritable organizations a ge 28 of the instruction	nne) to individuals or
	organizations under of				30 20 01 the manded	one) to marriadate of
_		·			bo oddrogood	
а	The name, address, a	ina telephone number	of the person to who	m applications should	be addressed	
	The feature of the least	1				
D	The form in which app	olications should be su	omitted and informat	ion and materials the	y snoula include	
			·····			
С	Any submission deadl	mes				
	A			ranhual areas at 1	table fields to-d-	100 to 100
đ	Any restrictions or fi	imitations on awards	, sucn as by geogr	apnicai areas, charif	table fields, KINGS of	mstitutions, or other
	Jacono					

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Recipient Name and address (home or business)									
3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment						
, Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient	contribution	<u></u>					
a Paid during the year									
The content of									
ATTACHMENT 8									
	•								
	İ								
		İ							
		1							
	ļ								
	L	1		153,890.					
Total b Approved for future payment	· · · · · · · · · · · · · · · · · · ·		▶ 3a	133,050.					
b Approved for fature payment			i						
		1							
		}							
				ļ					
			}						
			}						
		<u></u>							
Total	<u></u>		▶ 3b						

er gross amounts unless otherwis	se indicated Un	related business in	come Excluded b	y section 512, 513, or 514	(e) Related or exempt function income
Program service revenue	(a) Business c	(b) ode Amou		(d) Amount	function income (See page 28 of the instructions)
a	 				the mandenona)
а b			·		
	1	1			
a					
f				·	
g Fees and contracts from government	nent agencies			· · · · · · · · · · · · · · · · · · ·	
Membership dues and assessmen	-				
Interest on savings and temporary cas		 	14	7,854.	
Dividends and interest from secu					
Net rental income or (loss) from r		, ,	* 5 7	1 1 1	7 7 7 7 7
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from person					
Other investment income					
Gain or (loss) from sales of assets oth	-				<u> </u>
Net income or (loss) from special					
Gross profit or (loss) from sales of					
Other revenue a				 	
b		_			
c				<u></u>	
d					
	l l			li .	
e				 	
eSubtotal Add columns (b), (d), ar	nd (e)			7,854.	
Subtotal Add columns (b), (d), ar Total. Add line 12, columns (b), ((d), and (e)				'
Subtotal Add columns (b), (d), ar Total. Add line 12, columns (b), (e worksheet in line 13 instructionart XVI-B Relationship	(d), and (e)	alculations) Accomplishme	ent of Exempt Purp		7,854
Subtotal Add columns (b), (d), ar Total. Add line 12, columns (b), (e worksheet in line 13 instruction art XVI-B Relationship one No. Explain below how	(d), and (e)	alculations) Accomplishme	ent of Exempt Purp	13	7,854
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Subtotal Add columns (b), (d), ar Total. Add line 12, columns (b), (e worksheet in line 13 instruction art XVI-B Relationship on No. Explain below how the accomplishme	(d), and (e)	alculations) Accomplishme	ent of Exempt Purp	poses (e) of Part XVI-A cor	7,854
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Par	t XVII		empt Orga		ransfers to al	nd Iransad	ctions	and Ke	elationsni	ps with	Nonc	narit	abie
1	Did · th				engage in any of	the following	with a	ny other	organizatio	n described		Yes	No
	in sec	tion 501(c) of the Co	ode (other than	section 501(c)(3)	organizations)	or in s	ection 52	27, relating	to politica		,	
а	organiz Transfe	ers from t	he reporting fo	oundation to a ne	oncharitable exempt o	rganization of					* - ` .		
	-										. 1a(1)		X
	_												X
b	Other t	transaction	าร			-						*, JL	1
	(1) Sa	les of ass	ets to a nonch	arıtable exempt o	organization						. 1b(1)		X
	(2) Pu	rchases o	f assets from	a noncharitable e	exempt organization .						. 1b(2)		X
	(3) Re	ntal of fac	cilities, equipm	ent, or other asse	ets						. 1b(3)		X
											. 1b(4)		X
	(5) Lo	ans or loa	n guarantees								. 1b(5)		X
	(6) Pe	rformance	e of services o	r membership or	fundraising solicitation	ns					. 1b(6)		X
C	Sharing	g of facilit	ies, equipmen	t, mailing lists, o	ther assets, or paid en	nployees					. 1c		X
d	If the	answer	to any of t	he above is "	Yes," complete the	following s	chedule	Column	(b) should	always sho	w the	fair r	narket
	value	of the g	joods, other	assets, or serv	rices given by the	reporting for	undation	If the f	oundation i	received les	s than	fair r	narket
	value	ın any t	ransaction or	sharing arran	gement, show in o	column (d) th	e value	of the	goods, othe	r assets, o	r service	es rec	eived
													
(a) L	ine no		unt involved	(c) Name of	noncharitable exempt or	ganization		cription of t	ransfers, trans	actions, and sl	nanng arra	ngeme	nts
		N/A					N/A		<u>-</u>				
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2 a	is the	foundation	on directly or	indirectly affilia	ited with, or related	I to, one or m	nore tax-e	exempt or	ganizations	described in	1		
	section	n 501(c) o	f the Code (oth	ner than section :	501(c)(3)) or in section	on 527?					Y	es 🗀	< No ≥
b			te the following										
		(a) Nam	ne of organization	n	(b) Type of	organization			(c) Descr	ption of relation	onship		
											<u>_</u>		
										 			
	Under belief, i	penalties of it is true, c	f perjury, I decli prrect, and com	are that I have ex plete Declaration	camined this retum, inc of preparer (other than	luding accompa taxpayer or fidu	nying scheo iciary) is ba	dules and s ased on all	statements, ar information o	nd to the besi f which prepa	tofmyk Irerhasa	nowled ny knov	ge and wledge
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ere	F Sig	gnature of c	officer or trustee				Dafe		Title	Dropers		5 da a	
Sign Here				,	2	Date		Check		Preparei number	(See Sign	ature o	
<u>.</u>	aid arer's Only	Preparer'		101 - 21	1111 80	JAN S	3 1 20	self-en	nployed P[page 30 (P0035		ructions)
တ	Paid Preparer's Use Only	signature		HOLTH	OUSE CARLIN	& VAN TRI				95-434			
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		and ZIP			AKE VILLAGE,	CA CA		362	Dhar-	no 805-	374-8	1555	
				MESIT.	UVE ATTENDE!	CA		J U Z	Phone	110 000	J / 42 - C	,,,,,	

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number Name of the organization CALVIN KLEIN FAMILY FOUNDATION 13-3472787 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 331/3 % 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 П 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 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) Schedule B (Form 990, 990-EZ, or 990-PF) (2009) For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

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

Name of organization CALVIN KLEIN FAMILY FOUNDATION

Employer identification number 13-3472787

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CALVIN KLEIN 545 WEST 25TH STREET, 18TH FLOOR	\$122,500.	Person Payroll Noncash (Complete Part II if there is
(a)	NEW YORK, NY 10001	— (c)	a noncash contribution) (d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Person Payroll Noncash (Complete Part linf 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)

PAGE 16

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

NET INVESTMENT INCOME	111.	111.
REVENUE AND EXPENSES PER BOOKS	111. 10,000. -2,257.	7,854.
DESCRIPTION	MORGAN STANLEY - TAXABLE INTEREST MORGAN STANLEY - TAX-EXEMPT INTEREST MORGAN STANLEY - AMORTIZATION EXPENSE	TOTAL

1/28/2011

LHK001 U575

FORM 990PF, PART I - TAXES

REVENUE AND

EXPENSES

PER BOOKS

FEDERAL TAXES
TAXES & LICENSES

DESCRIPTION

896. 456.

4

TOTALS

1,352.

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND

EXPENSES

PER BOOKS 25.

996.

TOTALS

1,021.

DESCRIPTION FRANCHISE TAX REPORT FEES PROFESSIONAL FEES

13-3472787

NT 4	ENDING <u>EMV</u>		238,876.	238,876.
ATTACHMENT 4	ENDING BOOK VALUE		238,876.	238,876.
STATE OBLIGATIONS	BEGINNING BOOK VALUE		233,197.	233,197.
FORM 990PF, PART II - U.S. AND STAT	DESCRIPTION	US OBLIGATIONS TOTAL	MORGAN STANLEY BONDS	STATE OBLIGATIONS TOTAL
FOR	DES		MOR	

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

DESCRIPTION

AMOUNT

UNREALIZED GAIN

7,935.

TOTAL

7,935.

EXPENSE ACCT AND OTHER ALLOWANCES	.0	.0	.0	0.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	. 0	.0	0
COMPENSATION	.0	Ö	.0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	DIRECTOR 0.00	CFO 1.00	GRAND TOTALS
NAME AND ADDRESS	CALVIN KLEIN 545 WEST 25TH STREET, 18TH FLOOR NEW YORK, NY 10001	KELLY KLEIN 2 W. 67TH STREET #2A NEW YORK, NY 10023	RICHARD NORTON 1620 26TH STREET, SUITE 1040N SANTA MONICA, CA 90404	

FORM 990PF, PART XIII - DISTRIBUTION FROM CORPUS ELECTION

PURSUANT TO IRC SECTION 4942(H)(2) AND REG. 53.4942(A)-3(D)(2), THE CALVIN KLEIN FAMILY FOUNDATION HEREBY ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE OUT OF CORPUS.

SIGNED: X Lines 2

DATE: X 2/4/11

NAME AND TITLE: X Richard North, GO

13-3472787

ATTACHMENT 8

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GUILD HALL OF EAST HAMPTON 158 MAIN STREET EAST HAMPTON, NY 11937	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR CONTINUED EXTENSIVE VISUAL AND PERFORMING ARTS PROGRAMS AS WELL AS THE COMPREHENSIVE EDUCATIONAL PROGRAMMING	2,000
GAY MEN'S HEALTH CRISIS 119 WEST 24 STREET NEW YORK, NY 10011	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR HIV/AIDS SERVICES	50,000
ANIMAL RESCUE FUND OF THE HAMPTONS P O BOX 901 WAINSCOTT, NY 11975	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR PROVIDING FOOD, SHELTER AND VETERINARY CARE FOR CATS AND DOGS ON LONG ISLAND.	1,000.
GOD'S LOVE WE DELIVER 166 AVENUE OF THE AMERICAS NEW YORK, NY 10013	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR PREPARING AND DELIVERING MEALS TO PEOPLE WITH HIV/AIDS, CANCER, ALZHEIMER'S AND PARKINSON'S DISEASE	10,000
THE NEW YORK STEM CELL FOUNDATION 1995 BROADWAY, SUITE 1201 NEW YORK, NY 10023	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR UNSPECIFIED USE	1,000.
BYRD HOFFMAN WATER MILL FOUNDATION 55 WASHINGTON STREET GALLERY 216 BROOKLYN, NY 11201	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR UNSPECIFIED USE	10,000

6-60 A

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PUBLIC CHARITY

NO RELATION

NEW YORK CITY HABITAT FOR HUMANITY

RECIPIENT NAME AND ADDRESS

111 JOHN STREET, 23RD FLOOR

NEW YORK, NY 10038

CHABAD TORAH CENTER

NEWARK, NJ 07102 50 PARK PLACE

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

THE NATURE CONSERVANCY

142 ROUTE 114

PO BOX 5125

THE PARRISH ART MUSEUM 25 JOBS LANE

SOUTHAMPTON, NY 11968

EAST HAMPTON, NY 11937

260 WEST BROADWAY, SUITE 5 ARMITAGE FOUNDATION

NEW YORK, NY 10013

230 WEST 38TH STREET, 17TH FLOOR NEW YORK, NY 10018

ACRIA

PUBLIC CHARITY PUBLIC CHARITY NO RELATION NO RELATION

PUBLIC CHARITY NO RELATION

PUBLIC CHARITY NO RELATION

PUBLIC CHARITY NO RELATION

10,000. FOR THE CONSTRUCTION OF THE MULTI-FAMILY PROJECT ON ATLANTIC AVENUE IN BROOKLYN, NEW YORK PURPOSE OF GRANT OR CONTRIBUTION

AMOUŃT

ATTACHMENT 8 (CONT'D)

PROTECTING NATURE AND PRESERVING NATURAL

LANDSCAPES AND SEASCAPES

1,200

1,000

FOR CHILDREN TO GO TO A JEWISH SUMMER CAMP

5,000 GENERAL DONATION FOR UNSPECIFIED USE 1,000 GENERAL DONATION FOR UNSPECIFIED USE

DONATION DESIGNATED FOR DEVELOPING NEW AIDS DRUGS, RESEARCH, AND HIV HEALTH EDUCATION

1,840

ATTACHMENT 8

ATTACHMENT 8 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
AID FOR AIDS INTERNATIONAL 120 WALL STREET NEW YORK, NY 10005	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR PROVIDING PROGRAMS AND SERVICES FOR PEOPLE LIVING WITH OR AFFECTED BY HIV AND AIDS.	1,000
URBAN ZEN FOUNDATION 705 GREENWICH STREET NEW YORK, NY 10014	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR HAITI RELIEF EFFORTS	14,200
ROCK AND ROLL HALL OF FAME 2 WEST 56TH STREET NEW YORK, NY 10019	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR FUNDING THE PROGRAMS AND PROJECTS OF THE ROCK AND ROLL HALL OF FAME AND MUSEUM AND LIBRARY	6, 500
AMERICAN PATRONS OF TATE 520 WEST 27TH STREET #404 NEW YORK, NY 10001	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR UNSPECIFIED USE	5,000.
THE FRIENDS OF GREEN CHIMNEYS 400 DOANSBURG ROAD BREWSTER, NY 10509	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR THE INNOVATIVE PROGRAMS FOR CHILDREN	10,000.
AVIVA FAMILY AND CHILDREN'S SERVICES 7120 FRANKLIN AVENUE LOS ANGELES, CA 90046	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR THE TREATMENT TO CHILDREN AND ADOLESCENTS WHO SUFFERED SERIOUS EMOTIONAL DISTRESS FROM PHYSICAL AND SEXUAL ABUSE	10,000.

ATTACHMENT 8 (CONT'D)

YEAR
THE
DURING
PAID
GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR
AND
GRANTS
PART XV -
FORM 990PF, PAI
FORM

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE CONTINUUM CENTER FOR HEALTH AND HEALING 555 WEST 57TH STREET NEW YORK, NY 10019	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR THE HEALING ENVIRONMENT FOR BETH ISRAEL'S ONCOLOGY PATIENTS	1,650.
	NO RELATION PUBLIC CHARITY	GENERAL DONATION WHICH SUSTAINS PROGRAMS AND EXHIBITIONS IN NYC	5,000
	NO RELATION PUBLIC CHARITY	GENERAL DONATION TO PROVIDE EXCELLENCE IN HEALTHCARE	1,500
	NO RELATION PUBLIC CHARITY	GENERAL DONATION FOR SUSTAINABLE LAND MANAGEMENT	5,000.

TOTAL CONTRIBUTIONS PAID

153,890

ATTACHMENT 8 PAGE 26