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Form 990-PF	ı
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 2009

G Che		hat apply.	Initial retu			01 <b>, 2009,</b> of a former p				11/30, <b>20</b> 10 Final return
		era,	Amended			ss change	Γ	Name chang		·-·· · • • • • • • • • • • • • • • • • •
		Name of foun						A Employer i		ion number
Use t	Use the IRS THE THOMAS C. QUICK CH.				ARITABLE TRUST			' '		
	bel.		MBER 29,					Į.	59-2	819786
	rwise.				f mail is not delivered to street	addross)	Room/su	to B Talabase		
	rint	Number and s	street (or F O box	i iluliibei i	i maii is not delivered to sueer	address)	KUUII/SU	B relephone nur	nber (see pa	ge 10 of the instructions)
or t	type.	291 EL V	EDVDO						,	<b>、</b>
See S	pecific			-1-						, - -
Instru	ıctions.	City or town,	state, and ZIP co	ae				C If exemption pending, chi	ck here	· · · · · · · •
		DAIM DES	au	400				D 1 Foreign o	rganizations	s, check here . 🕨 💹
			CH, FL 334		<u> </u>					s meeting the and attach
H_Che	eck type	of organizati	ion X Sect	ion 501	(c)(3) exempt private f					and alterdi
	Section 4	947(a)(1) non	exempt charitable					F if private for	undation sta	atus was terminated
l Faii	r marke	t value of all a	assets at end		ounting method XC		rual			(A), check here .
		m Part II, col		0	ther (specify)	<b></b>		F If the found	ation is in a	60-month termination
16)	▶ \$	5,10	7,521.	(Part I,	column (d) must be on	cash basis.)		'		(B), check here . <b>&gt;</b>
Part	Analy	sis of Reven	ue and Expens	ses (The	(a) Revenue and					(d) Disbursements
	total or	f amounts in col	lumns (b), (c), an equal the amount	id (d)	expenses per	(b) Net inves		(c) Adjusted n income	et	for charitable
	colum	n (a) (see page	equal the amount e 11 of the instruc	tions))	books	iiicomi	-	illonie		purposes (cash basis only)
1			tc , received (attach sc		226,875.	ATCH 1				
2	Check	If the fo	undation is not req	uired to		<del></del>				· · · · · · · · · · · · · · · · · · ·
3	-	anaci o	Sch B		9.		9.			ATCH 2
4		_	it from securities		53,782.	5.3	3,782.			ATCH 3
1 '					· ·				<del></del>	<u> </u>
1 .						-		· · · · · · · · · · · · · · · · · · ·		<del></del>
1 -		-	s)		-54,050.		-			<del></del>
		i or (loss) from sa ales price for all	ale of assets not on 4 5 –	, 050.	3.7,000.				ETT	
5   _	assets o							JEC FH	1	<del>181 </del>
7	•	•	ne (from Part IV,	, -			-	Pro		<del>101</del>
8			gaın			<del></del>		<del>,</del>	· 50/1	<u> /ŵ/                                   </u>
9 10 a		modifications les less returns		• • • •		<u> </u>	<del>\/</del>	S APR 1 S	3	<u> </u>
	and allow	wances · · ·	l l				<del>\</del>	<del>``</del>		<del>II                                   </del>
1		st of goods sold	-					III ONE	111	<u> </u>
C			attach schedule)					OGO		
11	Other ii	ncome (attach	schedule)		206 616		201	1		<del></del>
12			ough 11		226,616.	5.	3,791.			
			, directors, trustees		0.					
14	Other e	mployee salan	es and wages .							
15	Pensio	n plans, employ	yee benefits			<u></u>				
16a	Legal for	ees (attach scho	edule)							
S b			ch schedule)		13,500.		5,750.		0.	6,750
C	Other p	rofessional fee	es (attach schedu		1,500.		1,500.			
17		ATTACH			24,428.	24	1,428.			
18	Taxes (a	ttach schedule) (s	see page 14 of the ins	tructions)	353.		353.			
19	Deprec	iation (attach s	schedule) and de	pletion _						
20		· ·		-					1	
21			ind meetings		5,219.					5,219
22			ons							
23			h schedule) $^{ m AT}$		41,066.	4 1	,066.			
24			administrative ex							<del></del>
15 16a b c 17 18 19 20 21 22 23 24			23	ï	86,066	74	1,097.		0.	11,969
25		_	rants paid		91,215		·			91,215
26				Ï	177,281.	7.	1,097.		0.	103,184
			ements Add lines 2	4 and 25	2,231	<del></del>	.,	<del> </del>	<del>-   -</del>	103,104
27		t line 26 from		i	49,335.		ļ		İ	
			enses and disburseme		49,333		-0-			
	Net inv	estment incom	ne (if negative, er	nter -0-)			-0-			
1			(if negative, enter	_ !	•				0-1	

P	art I	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	Eı	nd of year
_	-	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	4,343.	1,64	
	2	Savings and temporary cash investments	145,729.	4,48	4. 4,484
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less: allowance for doubtful accounts ▶	į		
Ì	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons (attach schedule) (see page 16 of the instructions)	İ		
	7	Other notes and loans receivable (attach schedule)			<del></del>
	′	Less allowance for doubtful accounts			:
	_			<del></del>	
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ř		Investments - U S and state government obligations (attach schedule)	11 170 042	11 460 47	1. 4,143,126
			11,170,943.	11,462,47	4,143,126
	11 C	Investments - corporate bonds (attach schedule)			
- 1	٠.				
		and equipment basis Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans Investments - other (attach schedule) ATCH 9			
	13	Investments - other (attach schedule) ATCH 9	834,499.	958,26	2. 958,262
	14	Land, buildings, and equipment basis			4
		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 I)	12,155,514.	12,426,86	6. 5,107,521
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>=</u>	21	Mortgages and other notes payable (attach schedule)			
Liabilities		Other liabilities (describe		<del></del>	
	22	Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)			
$\dashv$	23				
		Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31.			
S					
일	24	Unrestricted	<del></del>	<del></del> -	<b></b>
ā	25	Temporarily restricted			┥ .
ä	26	Permanently restricted			┥ '
핕		Foundations that do not follow SFAS 117,			
교		check here and complete lines 27 through 31. $\blacktriangleright X$			_
9	24 25 26	Capital stock, trust principal, or current funds	863,208.	863,20	
Net Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	11,292,306.	11,563,65	<u>8 .</u>
SS	29	Retained earnings, accumulated income, endowment, or other funds	0.	·	0.
7	30	Total net assets or fund balances (see page 17 of the			<u> </u>
휣		instructions)	12,155,514.	12,426,86	6.
ľ	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	12,155,514.	12,426,86	6.
P	art li	Analysis of Changes in Net Assets or Fund E	Balances		
		I net assets or fund balances at beginning of year - Part II,		agree with	
-		of-year figure reported on prior year's return)			12,155,514
2	Fnte	r amount from Part Line 27a		• • • • • • • • • • • • • • • • • • • •	40 225
2	Otho	r amount from Part I, line 27a r increases not included in line 2 (itemize) ► ATTACH	 МЕМТ 10		054 000
J	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	lines 1 2 and 3	11011 TO		10 450 007
4 E	700 700	lines 1, 2, and 3	 Mព្រាឃា 11		20 071
					10 106 066
<u>6</u>	rota	I net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II, column (b),	line 30 6	12,420,000

 1a	Part IV Capital Gains	s and Losses for <u>Tax on In</u> v	estment income			
1:	(a) List an	d describe the kind(s) of property sold (	e g., real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
1:	2-story b	P-Purchase D-Donation	(mo , day, yr )	(mo , day, yr )		
	SEE PART IV SCHE	DULE				
_1	<u> </u>					
_	;	····				
_(	<u></u>			<u> </u>		
_	)					
_	(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) minu	
_6	<u> </u>					<u> </u>
_ <u>t</u>	)			ļ. —	<del>-</del>	<u> </u>
_(	·					
_	<u> </u>					
_						
	Complete only for assets s	howing gain in column (h) and owi			Gains (Col (h) ga	
	(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	col	(k), but not less to Losses (from co	
_ a	<u> </u>					
Ł	)					
_						
_0	1					
_6	)					
2	Capital gain net income or	(net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-54,050.
3	Net short-term capital gair	n or (loss) as defined in sections 12				
	If gain, also enter in Part I,	line 8, column (c) (see pages 13	and 17 of the instructions).			
	If (loss), enter -0- in Part I,	fine 8	<u> </u>	3		
P	art V Qualification U	nder Section 4940(e) for Redu	iced Tax on Net Investment Inc	come		
	section 4940(d)(2) applies,					
		the section 4942 tax on the distrib		ase perioc	1?	Yes X No
lf '	"Yes," the foundation does	the section 4942 tax on the distrib not qualify under section 4940(e)	Do not complete this part			Yes X No
lf '	"Yes," the foundation does  Enter the appropriate am	the section 4942 tax on the distrib not qualify under section 4940(e) ount in each column for each year	Do not complete this part see page 18 of the instructions be		ng any entnes	Yes X No
f '	"Yes," the foundation does  Enter the appropriate am  (a)  Base period years Calendar year (or tax year beginning in)	the section 4942 tax on the distrib not qualify under section 4940(e) ount in each column for each year (b) Adjusted qualifying distributions	Do not complete this part see page 18 of the instructions be (c) Net value of nonchantable-use assets	efore mak	ng any entnes (d) Distribution ra (col (b) divided by	tio col (c))
f '	"Yes," the foundation does Enter the appropriate ame (a) Base period years calendar year (or tax year beginning in) 2008	the section 4942 tax on the distrib not qualify under section 4940(e) ount in each column for each year (b) Adjusted qualifying distributions	Do not complete this part see page 18 of the instructions be (c) Net value of nonchantable-use assets 5,020,665.	efore mak	ng any entnes (d) Distribution ra (col (b) divided by	tuo col (c)) 0.020260
f '	"Yes," the foundation does Enter the appropriate ame (a) Base period years calendar year (or tax year beginning in) 2008 2007	the section 4942 tax on the distrib not qualify under section 4940(e) ount in each column for each year (b) Adjusted qualifying distributions 101,717. 263,231.	Do not complete this part  see page 18 of the instructions be (c)  Net value of nonchantable-use assets  5,020,665.  11,226,228.	efore mak	ing any entries (d) Distribution ra (col (b) divided by	tio col (c)) 0.020260 0.023448
f '	"Yes," the foundation does Enter the appropriate ame (a) Base period years calendar year (or tax year beginning in) 2008 2007 2006	the section 4942 tax on the distrib not qualify under section 4940(e) ount in each column for each year (b) Adjusted qualifying distributions 101,717. 263,231. 477,641.	Do not complete this part see page 18 of the instructions be (c) Net value of nonchantable-use assets 5,020,665. 11,226,228. 15,921,246.	efore mak	ng any entries (d) Distribution ra (col (b) divided by	tio col (c)) 0.020260 0.023448 0.030000
f '	"Yes," the foundation does  Enter the appropriate ame (a) Base period years Calendar year (or tax year beginning in)  2008 2007 2006 2005	the section 4942 tax on the distribution of qualify under section 4940(e) ount in each column for each year  (b) Adjusted qualifying distributions  101,717.  263,231.  477,641.  1,578,136.	Do not complete this part see page 18 of the instructions be (c) Net value of nonchantable-use assets 5,020,665. 11,226,228. 15,921,246. 15,788,384.	efore mak	ing any entries (d) Distribution ra (col (b) divided by	otto (c)) 0.020260 0.023448 0.030000 0.099956
f '	"Yes," the foundation does Enter the appropriate ame (a) Base period years calendar year (or tax year beginning in) 2008 2007 2006	the section 4942 tax on the distrib not qualify under section 4940(e) ount in each column for each year (b) Adjusted qualifying distributions 101,717. 263,231. 477,641.	Do not complete this part see page 18 of the instructions be (c) Net value of nonchantable-use assets 5,020,665. 11,226,228. 15,921,246.	efore mak	ing any entries (d) Distribution ra (col (b) divided by	tio col (c)) 0.020260 0.023448 0.030000
f'   1   C   C   C   C   C   C   C   C   C	"Yes," the foundation does  Enter the appropriate am  (a)  Base period years calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  Total of line 1, column (d)	the section 4942 tax on the distribution of qualify under section 4940(e) count in each column for each year  (b) Adjusted qualifying distributions  101,717. 263,231. 477,641. 1,578,136. 858,190.	Do not complete this part  see page 18 of the instructions be (c)  Net value of nonchantable-use assets  5,020,665.  11,226,228.  15,921,246.  15,788,384.  14,195,625.	efore mak	ing any entries (d) Distribution ra (col (b) divided by	otto (c)) 0.020260 0.023448 0.030000 0.099956
<u>lf'</u> 1 2	Enter the appropriate am  (a)  Base period years calendar year (or tax year beginning in)  2008 2007 2006 2005 2004  Total of line 1, column (d) Average distribution ratio	the section 4942 tax on the distribution qualify under section 4940(e) ount in each column for each year  (b) Adjusted qualifying distributions  101,717. 263,231. 477,641. 1,578,136. 858,190.	Do not complete this part  see page 18 of the instructions be  (c)  Net value of nonchantable-use assets  5,020,665.  11,226,228.  15,921,246.  15,788,384.  14,195,625.  the total on line 2 by 5, or by the	efore make	ing any entries (d) Distribution ra (col (b) divided by	tio (c)) 0.020260 0.023448 0.030000 0.099956 0.060455
<u>lf'</u> 1 2	Enter the appropriate am  (a)  Base period years calendar year (or tax year beginning in)  2008 2007 2006 2005 2004  Total of line 1, column (d) Average distribution ratio	the section 4942 tax on the distribution of qualify under section 4940(e) count in each column for each year  (b) Adjusted qualifying distributions  101,717. 263,231. 477,641. 1,578,136. 858,190.	Do not complete this part  see page 18 of the instructions be  (c)  Net value of nonchantable-use assets  5,020,665.  11,226,228.  15,921,246.  15,788,384.  14,195,625.  the total on line 2 by 5, or by the	efore maki	ing any entries (d) Distribution ra (col (b) divided by	tto (c)) 0.020260 0.023448 0.030000 0.099956 0.060455
<u>lf'</u> 1 2	Enter the appropriate ame (a) Base period years (a) Ealendar year (or tax year beginning in)  2008 2007 2006 2005 2004  Total of line 1, column (d) Average distribution ratio number of years the found	the section 4942 tax on the distribution qualify under section 4940(e) ount in each column for each year  (b) Adjusted qualifying distributions  101,717. 263,231. 477,641. 1,578,136. 858,190.	Do not complete this part  see page 18 of the instructions be  (c)  Net value of nonchantable-use assets  5,020,665.  11,226,228.  15,921,246.  15,788,384.  14,195,625.  the total on line 2 by 5, or by the than 5 years	efore make	ing any entries (d) Distribution ra (col (b) divided by	tio (c)) 0.020260 0.023448 0.030000 0.099956 0.060455
1f' 1 	Enter the appropriate ame (a) Base period years (a) Ealendar year (or tax year beginning in)  2008 2007 2006 2005 2004  Total of line 1, column (d) Average distribution ratio number of years the found	the section 4942 tax on the distribution of qualify under section 4940(e) count in each column for each year (b)  Adjusted qualifying distributions  101,717. 263,231. 477,641. 1,578,136. 858,190.  for the 5-year base period - divided dation has been in existence if less incharitable-use assets for 2009 from	Do not complete this part  see page 18 of the instructions be  (c)  Net value of nonchantable-use assets  5,020,665.  11,226,228.  15,921,246.  15,788,384.  14,195,625.  the total on line 2 by 5, or by the than 5 years	efore make	Ing any entries (d) Distribution ra (col (b) divided by	tio (c)) 0.020260 0.023448 0.030000 0.099956 0.060455 0.234119
1f' 1	Enter the appropriate am  (a)  Base penod years calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  Total of line 1, column (d) Average distribution ratio number of years the found Enter the net value of nor  Multiply line 4 by line 3	the section 4942 tax on the distribution of qualify under section 4940(e) count in each column for each year (b)  Adjusted qualifying distributions  101,717. 263,231. 477,641. 1,578,136. 858,190.  for the 5-year base period - divided dation has been in existence if less incharitable-use assets for 2009 from	Do not complete this part  see page 18 of the instructions be (c)  Net value of nonchantable-use assets  5,020,665.  11,226,228.  15,921,246.  15,788,384.  14,195,625.  the total on line 2 by 5, or by the than 5 years  m Part X, line 5	2 3	Ing any entries (d) Distribution ra (col (b) divided by	tto col (c)) 0.020260 0.023448 0.030000 0.099956 0.060455 0.234119 0.046824 668,490.
2 3 6	Enter the appropriate ame (a) Base period years (a) Base period years (a) 2008 2007 2006 2005 2004  Total of line 1, column (d) Average distribution ratio number of years the found function the net value of normal function (a) Multiply line 4 by line 3 Enter 1% of net investments	the section 4942 tax on the distribution of qualify under section 4940(e) ount in each column for each year  (b)  Adjusted qualifying distributions  101,717. 263,231. 477,641. 1,578,136. 858,190.  for the 5-year base period - divided dation has been in existence if less incharitable-use assets for 2009 from	Do not complete this part see page 18 of the instructions be (c) Net value of nonchantable-use assets 5,020,665. 11,226,228. 15,921,246. 15,788,384. 14,195,625.  the total on line 2 by 5, or by the than 5 years  m Part X, line 5	2 3	ing any entries (d) Distribution ra (col (b) divided by	col (c)) 0.020260 0.023448 0.030000 0.099956 0.060455 0.234119 0.046824 668,490.

Pai	t Vi Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of	the ins	truction	ons)
1 a	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 ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.
	here ▶ and enter 1% of Part I, line 27b			-
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
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-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0.
6	Credits/Payments			
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 14,771.			
	Exempt foreign organizations-tax withheld at source 6b 0.			
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d	•	14,7	77Ĩ.
8	Enter any penalty for underpayment of estimated tax. Check here   If Form 2220 is attached		<u> </u>	
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		14,7	771.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax   14,771. Refunded			
	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	1	Yes	No
	participate or intervene in any political campaign?	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
_	of the instructions for definition)?	16		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	<b>X</b>	Sant Y	
	published or distributed by the foundation in connection with the activities			,
c	Did the foundation file Form 1120-POL for this year?	1 c	PER AND A	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		1	<b>1</b>
_	(1) On the foundation >\$ (2) On foundation managers >\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		1.2	
·	on foundation managers > \$			<b>2</b>
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	EREAL CV	X
^	If "Yes," attach a detailed description of the activities	7 7 8	7.75°, C	7.
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	15.	<b>第</b> 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
•	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?	4a		Х
b				
5	If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?			Х
3	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			ĺ
•	By language in the governing instrument, or	1		l
	By state legislation that effectively amends the governing instrument so that no mandatory directions that     conflict with the state low remain in the construction party.		х	-
-	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? If "Yes," complete Part II, col (c), and Part XV	7		<del></del>
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) F <sup>E</sup> L'			1
L			}	ĺ
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	,	х	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	-,-	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		}	ĺ
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	_		Х
	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			Х
	names and addresses	10	i	

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	•	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Ν/Δ			
14	The books are in care of SAME AS PAGE ONE  Located at SAME AS PAGE ONE  ZIP + 4 Section 4947(a)(1) progressing characteristics files Form 900 PE in less of Form 4941. Check here			
	Located at ►SAME AS PAGE ONE ZIP+4 ►			
15	Occition 4347 (a)(1) monexempt charkable trusts ming roth 350-FF in field of Form 1041 - Check field		▶	$\cdot \square$
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		l	
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		·	
	the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			
	the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			Ì
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)?	1 b		<b> </b>
	Organizations relying on a current notice regarding disaster assistance check here	\$ , , ,	`	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	14: "4"	`	lg fud X
_	were not corrected before the first day of the tax year beginning in 2009?	1 c		A man
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1	3.31	·
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	3,1		
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	- 7	1	34.0
		' '		
	If "Yes," list the years	١٠.	"	$\mathbb{R}^{-1}$
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	٠ ا	`*	· '
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2 b	NI	<b>a</b> .
_	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	20	14/1	-
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	V			
		l		
	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
		3 b	Ν	A
	foundation had excess business holdings in 2009.)	4a	<del>/\/</del>	X
	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?	4 b		Х
		<u> ~</u>		

	rt VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)				
ъa	During the year did the foundation pay or incur any amou	int to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No							
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
	directly or indirectly, any voter registration drive?							
	(3) Provide a grant to an individual for travel, study, or other similar purposes?							
	(4) Provide a grant to an organization other than a charitable, etc., organization described in							
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?			Yes X No				
			,	. Lies Lies	'			
	(5) Provide for any purpose other than religious, charita	•		Yes X No				
	purposes, or too the protection of steady to simulation at the state of the state o							
þ	If any answer is "Yes" to 5a(1)-(5), did any of the trans	•	•			NA		
	Regulations section 53 4945 or in a current notice regard				5b	N/M		
	Organizations relying on a current notice regarding disas	ter assistance check h	nere	▶ [X]	- }			
C	If the answer is "Yes" to question 5a(4), does the found	ation claim exemption	from the tax					
	because it maintained expenditure responsibility for the g	rant?		. Yes X No	,	ŀ		
	If "Yes," attach the statement required by Regulations sec	tion 53 4945-5(d)				1		
6 a	Did the foundation, during the year, receive any funds, of	firectly or indirectly, to	pay premiums					
	on a personal benefit contract?			Yes X No	,			
ь	Did the foundation, during the year, pay premiums, direct			::17	6 Б	X		
	If "Yes" to 6b, file Form 8870	,	•			ı		
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X No	,			
	If yes, did the foundation receive any proceeds or have	-				X		
	t VIII Information About Officers, Directors							
	and Contractors				•			
_1	List all officers, directors, trustees, foundation m	anagers and their (b) Title, and average	(c) Compensation (See	(d) Contributions to				
	(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other all			
		devoted to position		and deterred compensation				
 ТАТ	TACHMENT 12		0					
			0.	0.1		0		
			0.	0.		0		
			0.	0.		0		
			0.	0.		0		
			0.	0.		0		
			0.	0.		0		
			0.	0.		0		
						0		
	Compensation of five highest-paid employees (ot	her than those inc			ructions).	0		
				e page 23 of the inst				
	Compensation of five highest-paid employees (ot	(b) Title, and average hours per week		e page 23 of the inst	ructions).  (e) Expensother all	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE."	(b) Title, and average	luded on line 1 - se	e page 23 of the inst	(e) Expens	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens			
	Compensation of five highest-paid employees (ot If none, enter "NONE."	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		
	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		
(a	Compensation of five highest-paid employees (ot If none, enter "NONE." ) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	luded on line 1 - se	e page 23 of the inst  (d) Contributions to employee benefit plans and deferred	(e) Expens	e account,		

Part VIII	Information About Officers, Directors, Trustees, Foundation Mar and Contractors (continued)	nagers, Highly Paid Emplo	yees,	
3 Five high	est-paid independent contractors for professional services (see page 23	of the instructions), If none,	enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	
NONE				
			L	
Total number	er of others receiving over \$50,000 for professional services		<b>▶</b>	NONE
Part IX-A	Summary of Direct Charitable Activities		···	
	dation's four largest direct chantable activities during the tax year. Include relevant statistical infor ons and other beneficianes served, conferences convened, research papers produced, etc	mation such as the number	Ехре	nses
1 NOT A	PPLICABLE			
2				
3				
4				
Part IX-B	Summary of Program-Related Investments (see page 23 of the inst		Amo	
1 NONE	the largest program-related intestricing made by the loandation during the tax year on lines 1 an		Allic	Junt
2				
All other prog	ram-related investments See page 24 of the instructions			
3 NONE				
iotal. Add li	nes 1 through 3	<u> </u>		

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the instructions.)	gn foundation	S,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.	<u> </u>	
а	Average monthly fair market value of securities	1a	5,483,281.
b	Average of monthly cash balances	1b	44,827.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	1,234,965.
d	Total (add lines 1a, b, and c)	1d	6,763,073.
е	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	. ;	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,763,073.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	101,446.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,661,627.
6	Minimum investment return. Enter 5% of line 5	6	333,081.
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here ► and do not complete this privations.		
1	Minimum investment return from Part X, line 6	1	333,081.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	333,081.
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	333,081.
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	333,081.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	103,184.
b	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	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	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	103,184.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	103,184.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating we qualifies for the section 4940(e) reduction of tax in those years	hether the foun	dation

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Pa	rt XIII Undistributed Income (see pag	e 26 of the instructio	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				333,425.
2	Undistributed income, if any, as of the end of 2009				
a					
h	Total for pnor years 20 07 .20 06 .20 05				
3	Excess distributions carryover, if any, to 2009				
a	From 2004 161, 335.				
h	From 2004				
	F 8000				
4	From 2007				
۵.	F 0000				
•	Total of lines 3a through e				
4	Qualifying distributions for 2009 from Part XII,	· · · ·		· · · · · · · · · · · · · · · · · · ·	
•	line 4 ▶ \$ 103,184.				
а	Applied to 2008, but not more than line 2a			~	,
			•		, , , , , , ,
D	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)			5-	
_	Treated as distributions out of corpus (Election			, '	
·	required - see page 26 of the instructions)			. , . ,	
d	Applied to 2009 distributable amount			الم	103,184.
е	Remaining amount distributed out of corpus	0.		CHARLES THE STATE OF	7. A. W. Marie
5	Excess distributions carryover applied to 2009	230,241.		The state of the s	230,241.
	(If an amount appears in column (d), the same		* **	The second second	7.3
6	amount must be shown in column (a) ) Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	751,829.	· 's		
b	Pnor years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed		····		
	income for which a notice of deficiency has been	第一次という。			
	issued, or on which the section 4942(a) tax has been previously assessed				
ત	Subtract line 6c from line 6b Taxable			- %. X.	AND THE PARTY OF T
u	amount - see page 27 of the instructions				£
e	Undistributed income for 2008 Subtract line				
	4a from line 2a. Taxable amount - see page 27 of the instructions				,
T	Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2010				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the				
	instructions)			,= ,,	
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	751,829.			· · · · · · · · · · · · · · · · · · ·
	Analysis of line 9				
	Excess from 2005				
	Excess from 2006				
	Excess from 2007				
	Excess from 2008				
e	Excess from 2009				

Pa	rt XIV Private Oper	ating Foundations	(see page 27 of the		art VII-A, question 9)	Page 10 NOT APPLICABI
1 à	If the foundation has r					
	foundation, and the ruling	ıs effective for 2009, e	enter the date of the ruling	)	. <b>&gt;</b>	
b	Check box to indicate who	ether the foundation is a	a private operating found	dation described in section	n 4942(j	)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	··· <del>············</del> -··	(e) Total
	justed net income from Part or the minimum investment	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(1)
	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 exempt activities		<u> </u>		<u> </u>	
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line	İ				
3	2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon	İ				
а	"Assets" alternative test - enter	İ				
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
h	4942(j)(3)(B)(i) "Endowment" alternative test-					!  - <del></del>
	enter 2/3 of minimum invest-					
	ment return shown in Part X					
С	line 6 for each year listed					
·	"Support" alternative test - enter (1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),					
	or royalties) (2) Support from general				-	
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(iii)			1		
	port from an exempt					
	organization (4) Gross investment income					
Pa		ry Information (C	omplete this part	only if the found	ation had \$5,000	or more in assets
	at any time d	uring the year - see	e page 28 of the in	structions.)	anon naa vo,ooo	or more in assem
1	Information Regarding					·
а	List any managers of the	he foundation who h	ave contributed more	e than 2% of the tota	al contributions receive	ed by the foundation
	before the close of any	tax year (but only if th	iey have contributed r	more than \$5,000). (S	ee section 507(d)(2))	
	THOMAS C. Q	UICK				
Ь	List any managers of t	the foundation who	own 10% or more of	f the stock of a corp	oration (or an equally	large portion of the
	ownership of a partners	ship or other entity) of	which the foundation	n has a 10% or greater	r interest.	
	1.6		N/A	<del> </del>		
2	Information Regarding		•	., ,		
	Check here ▶ if th	ie foundation only r	nakes contributions	to preselected charm	table organizations ai	nd does not accept
	unsolicited requests fo organizations under oth	or conditions, comple	dation makes gifts, g	rants, etc (see page	28 of the instruction	ns) to individuals or
				* ***	<del></del> ,	
	The name, address, an N/A	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
b	The form in which applied	cations should be sub	omitted and information	on and materials they	should include	
	N/A					
С	Any submission deadling	es				··· · · · · · · · · · · · · · · · · ·
	N/A					
d	Any restrictions or lim	nitations on awards.	such as by geogra	iphical areas, charita	ble fields, kinds of iii	nstitutions or other
	factors		-, 5910	, 2.200, 0.101110		
	N/A					
JSA 190 1 (	100					Form <b>990-PF</b> (2009)

Part XV Supplementary Information 3 Grants and Contributions Paid D	(continued)	roved for F	Future Payment	
Recipient	If recipient is an individual	Foundation	T	T
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a raid during the year				
ATTACHMENT 13				
111111011111111111111111111111111111111				
		:		
•				
				•
,				
Total	<u> </u>		▶ 3a	91,215
<b>b</b> Approved for future payment				
				-
		L	<u></u>	
Total			▶ 3b	I

Enter gross						
	s amounts unless otherwise indicated	(a)	ated business income (b)	(c)	section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
a						
b						<del></del>
c						· <del>-</del> · · · ·
d						
e f		-			-	
	s and contracts from government agencies					
	rship dues and assessments			14	9.	
	on savings and temporary cash investments	_		14	53,782.	·
	ds and interest from securities tal income or (loss) from real estate	<del> </del>			33,702.	
	ot-financed property					· · · · · · · · · · · · · · · · · · ·
	debt-financed property					-
	al income or (loss) from personal property			**		-
	nvestment income					
	(loss) from sales of assets other than inventory			18	-54,050.	
	ome or (loss) from special events		-			
	profit or (loss) from sales of inventory.					
	evenue a				-	
_				1		
		_				
е						
12 Subtota	Add columns (b), (d), and (e)			<b>发展</b>	-259.	
	dd line 12, columns (b), (d), and (e)				13	-259.
(See works	heet in line 13 instructions on page 28 t	to verify calcu	ulations )			
Line No. ▼	Explain below how each active the accomplishment of the for page 29 of the instructions.)		exempt purposes (			
		<del></del> .				

Information Regarding Transfers To and Transactions and Relationships With Non-Exempt Organizations  1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political	Yes	table
	Yes	
organizations?		No
a Trănsfers from the reporting foundation to a noncharitable exempt organization of:		,.
(1) Cash	1	X
(2) Other assets	)	<del>  ^</del>
b Other transactions  (1) Sales of assets to a people witching exempt example to a second of the sec		x
(1) Sales of assets to a noncharitable exempt organization		$+\frac{x}{x}$
(3) Rental of facilities, equipment, or other assets	7	<del>  x</del>
(4) Reimbursement arrangements	-	X
(5) Loans or loan guarantees	5)	X
(6) Performance of services or membership or fundraising solicitations	)	X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	<u> </u>	X
d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the		
value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than		
value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or servi	ces re	ceived
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing an	angem	ents
N/A N/A		
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in		<del></del>
	′es [	X No
b If "Yes," complete the following schedule		
(a) Name of organization (b) Type of organization (c) Description of relationship		
		<del></del>
		<del></del>
Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my	knowled	ige and
belief, it is true correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has a	any kno	wledge
3/15/12 TRUST	يح	<b>2</b>
Signature of officer or trustee Date Title		
Signature of officer or trustee  Date  Title  Date  Check if self-employed  Preparer's identi number (See Signature page 30 of the instance page 30 of		n
Bo Preparer's page 30 of the ins	tructions	5)
Signature		
Preparer's signature  Preparer's signature  Firm's name (or yours if self-employed), address, and self-employed), address, and self-employed), address, and self-employed), address, and self-employed), address, and self-employed).		
and ZIP code / NEW YORK, NY 10004-2306 Phone no 212-422-3	1000	
Form 9	90-PF	(2009)

### Schedule B

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

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

OMB No 1545-0047

Name of the organization		Employer identification number
THE THOMAS C. QUICK CHA	RITABLE TRUST	
U/A DECEMBER 29, 1986	<u></u>	59-2819786
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private four	ndation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundati	on
	501(c)(3) taxable private foundation	
	d by the <b>General Rule</b> or a <b>Special Rule.</b> or (10) organization can check boxes for both the General Rule and a S	pecial Rule See
General Rule		
	Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 ontributor. Complete Parts I and II	r more (ın money or
Special Rules		
sections 509(a)(1) and 17	ganization filing Form 990 or 990-EZ that met the 331/3 % support test 0(b)(1)(A)(vi), and received from any one contributor, during the year, the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line	a contribution of the greater
the year, aggregate contri	B), or (10) organization filing Form 990 or 990-EZ that received from a butions of more than \$1,000 for use exclusively for religious, charitable the prevention of cruelty to children or animals. Complete Parts I, II, and	e, scientific, literary, or
the year, contributions for aggregate to more than \$ year for an exclusively religables to this organization	3), or (10) organization filing Form 990 or 990-EZ that received from a use <i>exclusively</i> for religious, charitable, etc., purposes, but these cont 1,000. If this box is checked, enter here the total contributions that we gious, charitable, etc., purpose. Do not complete any of the parts unless in because it received nonexclusively religious, charitable, etc., contributions.	ributions did not re received during the s the General Rule utions of \$5,000 or more
990-EZ, or 990-PF), but it <b>must</b> ansv	covered by the General Rule and/or the Special Rules does not file Sci ver "No" on Part IV, line 2 of its Form 990, or check the box on line H of ertify that it does not meet the filing requirements of Schedule B (Form	of its Form 990-EZ,

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

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

of	of Part I

THE THOMAS C. QUICK CHARITABLE TRUST U/A DECEMBER 29, 1986 Name of organization

Employer identification number 59-2819786

#### Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THOMAS QUICK  291 EL VEDADO  PALM BEACH, FL 334480	\$226,875.	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)
(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)

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

Name of organization THE THOMAS C. QUICK CHARITABLE TRUST U/A DECEMBER 29, 1986

Employer identification number 59-2819786

Part II	Noncash Pr	onerty (see	instructions)
r au t u	HOHCASHIII	operty (see	monuciona,

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	15,000 SHARES OF BANK OF AMERICA		
		<b>\$</b> \$	12/31/2009
(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

JSA 9E 1254 1 000

THE THOMAS C. QUICK CHARITABLE TRUST

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		NS AND LOSSES FOR TAX ON INVESTI					Date	Date sold
Kind of F		Description				ď	acquired	Date soid
price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
P 2012 89 OF SMILE	аломаыс	TOTAL SHORT PARTNERSHIP ESTATES OR	TERM COMMO	ON TRUST FUR	ND AND		22,480.	
		TOTAL LONG-' PARTNERSHIP ESTATES OR '	, S CORPORA	TION, AND			-76,530.	
OTAL GAIN(L	oss)			•••••	•••••		-54,050.	

6466356-83006

ATTACHMENT 1

5XW0M9 700H

GIFTS AND GRANTS RECEIVED - CONTRIBUTIONS, PART I FORM 990PE,

DATE

NAME AND ADDRESS

12/31/2009

SUPPORT DIRECT PUBLIC

226,875.

33480 THOMAS QUICK 291 EL VEDADO PALM BEACH, FL

TOTAL CONTRIBUTION AMOUNTS

226,875.

INVESTMENTS
CASH
ON TEMPORARY CASH
NO.
INTEREST
1
PART
FORM 990PF,
FORM

NET INVESTMENT	INCOME	. 6
REVENUE AND EXPENSES	PER BOOKS	<b>o</b>
	DESCRIPTION	WACHOVIA

TOTAL

<u></u>	
AND INTEREST FR	
- DIVIDENDS AND	
PAKI	
より大国 シンフア	

THE THOMAS C. QUICK CHARITABLE TRUST

	NET	INVESTMENT	INCOME	14,467.	12,381.	2,935.	406.	4,375.	8,900.	9,253.	1,065.	53,782.	
REVENUE	AND	EXPENSES	PER BOOKS	14,467.	12,381.	2,935.	406.	4,375.	8,900.	9,253.	1,065.	53,782.	
			DESCRIPTION	DIVIDEND THRU UBS	DIVIDEND THRU SHOSHONE PARTNERS LP	INTEREST THRU SHOSHONE PARTNERS LP	INTEREST THRU NATIONAL SPORTS MUSEUM	INTEREST THRU UBS	INTEREST ON SENESCO TECH.	ORIGINAL ISSUE DISCOUNT ON SENESCO TECH.	DIVIDEND FROM BF ENTERPRISES INC.	TOTAL	

TRUST
CHARITABLE
QUICK
ပ်
THOMAS
THE

59-2819786

ATTACHMENT

OTHER PROFESSIONAL FEES 1 PART I FORM 990PF,

EXPENSES PER BOOKS REVENUE AND DESCRIPTION

INVESTMENT INCOME NET

1,500.

PROFESSIONAL FEES THRU SHOSHONE PARTNERS, LP

1,500.

TOTALS

1,500.

ATTACHMENT 5

59-2819786

FORM 990PF, PART I - INTEREST EXPENSE

NET INVESTMENT INCOME	6,849.	24,428.
REVENUE AND EXPENSES PER BOOKS	6,849. 17,579.	24,428.
DESCRIPTION	THRU - NATIONAL SPORTS MUSEUM THRU- SHOSHONE PARTNERS LP	TOTALS

11	
TAXES	
- 1	
н	
PART	
990PF,	
FORM	

THE THOMAS C. QUICK CHARITABLE TRUST

59-2819786

	NET	INVESTMENT	INCOME	353.	353.
REVENUE	AND	EXPENSES	PER BOOKS	353.	353.
					TOTALS
			DESCRIPTION	FOREIGN TAX PAID	

TRUST	
CHARITABLE	
QUICK	
ပ်	
THOMAS	
THE	

- OTHER EXPENSES PART I FORM 990PF,

DESCRIPTION INV ADV FEES THRU UBS INV ADV FEES THRU WACHOVIA MISCELLANEOUS EXPENSES PORTFOLIO EXP THRU SHOSHONE	

NET	INVESTMENT	INCOME	10,194.	10,518.	11,183.	9,171.
AND	EXPENSES	PER BOOKS		10,518.	11,183.	9,171.

REVENUE

41,066.

41,066.

TOTALS

PART II - CORPORATE STOCK

FORM 990PF,

THE THOMAS C. QUICK CHARITABLE TRUST

$\frac{\texttt{ENDING}}{\overline{\texttt{FMV}}}$	4,143,126.			
ENDING BOOK VALUE	11,462,471.			
BEGINNING BOOK VALUE	11,170,943.			
	TOTALS			
				-
DESCRIPTION	SECURITIES			

- OTHER INVESTMENTS THE THOMAS C. QUICK CHARITABLE TRUST PART II FORM 990PF,

6 LNI	ENDING <u>FMV</u>	-299,604. 1,021,683. 236,065. 118.	
ATTACHMENT 9	ENDING BOOK VALUE	-299,604. 1,021,683. 236,065. 118.	
	BEGINNING BOOK VALUE	-261,801. 844,934. 250,000. 1,366. 834,499.	
	DESCRIPTION	NATIONAL SPORTS MUSEUM MGMGT SHOSHONE PARTNERS BF ENTERPRISES AMEX	

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

DESCRIPTION

AMOUNT

UNREALIZED GAIN FROM SHOSHONE PARTNERS

254,088.

TOTAL

254,088.

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

DESCRIPTION		AMOUNT
UNREALIZED LOSS FROM NATIONAL MUSE NON-DEDUCTIBLE EXPENSES	UM	31,735. 336.
	TOTAL _	32,071.

ATTACHMENT 12	EXPENSE ACCT AND OTHER ALLOWANCES		0
ATTACH	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS		.0
	COMPENSATION	.0	0
- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	GRAND TOTALS
FORM 990PE, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	THOMAS C. QUICK 291 EL VEDADO PALM BEACH, FL 33486	

59-2819786

THE THOMAS C. QUICK CHARITABLE TRUST

59-2819786

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

SEE STATEMENT 16

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

ATTACHMENT 13

91,215

THE PURPOSE OF THESE CONTRIBUTIONS IS TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT

FUNCTIONS

91,215

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 13

6466356-83006

**5XWOM9 700H** 

#### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

THE THOMAS C. QUICK CHARITABLE TRUST

U/A DECEMBER 29, 1986

Employer identification number 59-2819786

Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (see page 4 of the (d) Sales price the entire year (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) instructions) Subtract (e) from (d) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 3 22,480. Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back. 22,480. Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the instructions) the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Gain from Form 4797, Part I . . . . . . . . . . . . . . . . . .

Capital gain distributions

Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts

Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss

Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a,

Schedule D (Form 1041) 2009

8

9

10

11

-76,530.

-76,530.

8

9

10

column (3) on the back

Schedule D (Form 1041) 2009

31

32

33

31

32

Figure the tax on the amount on line 23 Use the 2009 Tax Rate Schedule for Estates and Trusts

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041. Schedule

(see the Schedule Ginstructions in the instructions for Form 1041)......

G, line 1a (or Form 990-T, line 36).

# THE THOMAS C. QUICK CHARITABLE TRUST CHARITABLE CONTRIBUTIONS F/Y/E NOVEMBER 30, 2010

<u>Descriptions</u>	Locations	Amount
American Ireland Fund	Boston, MA	2,500
Archilles Freedom Team of Wounded Veterans	New York, NY	600
Best Buddies International	Miami, FL	4,541
Best Buddies International-Miami	Mıamı, FL	2,675
Best Buddies International-Miami	Miami, FL	38,000
Boys & Girls Clubs Of Palm Beach County	West Palm Beach, FL	200
Breast Cancer Research Foundation	New York, NY	1,500
Brigham And Woman's Hospital	Boston, MA	1,500
Casita Maria, Inc	New York, NY	5,237
Casita Maria, Inc	New York, NY	2,250
Century for The Cure	Warren, NJ	500
Children's Home Society Of Florida	West Palm Beach, FL	200
Children's Home Society Of Florida	West Palm Beach, FL	2,750
Church of St Joseph	Boston, MA	150
Community Coalition	Palm Beach, FL	2,000
Daubach Foundation	Sanford, FL	1,500
Farm Street Church	London, UK	100
Jack The Bike Man, Inc	Palm Beach, FL	500
Glades Academy	West Palm Beach, FL	1,000
Hospital Albert Schweitzer	Pittsburgh, PA	1,081
Hospital Albert Schweitzer	Pittsburgh, PA	1,081
Our Little Roses Foundation	Gordonsville, VA	2.000
Palm Beach Civic Association	Palm Beach, FL	500
Palm Beach Flappers	Palm Beach, FL	500
Patrons Of The Arts In The Vatican Museum	West Palm Beach, FL	1,000
Physicians for Peace	Norfolk, VA	2,500
Preservation Foundation of Palm Beach	Palm Beach, FL	250
Salvation Army Of New York	New York, NY	1,000
Sisters of Mercy	Glendale, NY	2,500
Sisters of St. Joseph-Brentwood	Brentwood, NY	250
Society Of The Four Arts	West Palm Beach, FL	5,000
St Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	100
St. Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	1,000
St Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	150
St Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	100
St Juliana's Parish	West Palm Beach, FL	100
St Vincent's Hospital	New York, NY	1,000
Sutton Area Community, Inc	New York, NY	200
Town of Palm Beach United Way	Palm Beach, FL	200
Town of Palm Beach United Way	Palm Beach, FL	1,000
YMCA of Palm Beaches	West Palm Beach, FL	1,000
YMCA of Palm Beaches	West Palm Beach, FL	100

91,215

### Form 8'868

(Rev January 2011)

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

Department of t Internal Revenue		► File a	separate a	pplication for each return.								
				···		<b>▶</b> X						
<ul> <li>If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box</li></ul>												
	-			itomatic 3-month extension on a pre			8					
a corporatio 8868 to req Return for	n required juest an ext Transfers A	to file Form 990-T), or an addition tension of time to file any of the associated With Certain Persona	nal (not au forms liste al Benefit	ou need a 3-month automatic extentionatic) 3-month extension of time ed in Part I or Part II with the excellent contracts, which must be sent to	You can eption of F or the IRS	electronical orm 8870, I in paper f	ly file Form Information format (see					
				sit www.irs gov/efile and click on e-	rile for Cha	inties & Nonj	oronis					
		-Month Extension of Time. Or										
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete												
Part I only  All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time												
			iips, REIVIIC	os, and trusts must use Form 7004 to	request ai	n extension c	or time					
to file incom		s. Tempt organization THE THOMAS	C 0111	CV CUADITABLE TOUGT	Employer	r identification	number					
Type or	1		, C. QUI	ICK CHARTTABLE IKOSI	1	59-2819786						
print	Number street and room or suite no. If a P.O. box see instructions											
File by the due date for	•	VEDADO	, , , , , , , , , , , , , , , , , , ,									
filing your		or post office, state, and ZIP code For	a foreign ad	dress, see instructions.								
return See Instructions		EACH, FL 33480	a foreign aa	areae, and management.								
	1711111 1	22 33 100			<del></del>							
Enter the Re	turn code f	or the return that this application	is for (file a	a separate application for each return	)		. 04					
Application			Return	Application			Return					
ls For			Code	is For			Code					
Form 990			01	Form 990-T (corporation)			07					
Form 990-BL	-		02	Form 1041-A			08					
Form 990-EZ	7		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 THOMAS C.	QUICK	CHARITABLE								
Telephone	No. ►		F	FAX No ▶								
		es not have an office or place of b	 ousiness in	the United States, check this box			▶□					
		leturn, enter the organization's for				. If thi	s is					
for the whole	group, che	eck this box ▶  If	it is for pa	rt of the group, check this box	▶	and atta	ach					
		d EINs of all members the extensi				<del></del>						
1 I reque:	st an autom	atic 3-month (6 months for a corp	poration re	quired to file Form 990-T) extension	of time							
until $07/15$ , $2011$ , to file the exempt organization return for the organization named above. The extension is												
for the organization's return for:												
▶ calendar year 20 or												
► X tax year beginning 12/01, 20 09, and ending 11/30, 20 10												
2 If the tax year entered in line 1 is for less than 12 months, check reason. Initial return Change in accounting period												
20 16 44:-		In for Form 000 DI 000 DE 00	O T 4700	or 6060 pates the tastation to								
	3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions											
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and												
estimated tax payments made. Include any prior year overpayment allowed as a credit.												
	c Balance Due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS											
(Electro	nic Federal	Tax Payment System) See instruc	tions			3c \$ NC						
•	-	ig to make an electronic fund w	ntnarawai	with this Form 8868, see Form 8	403-EU ai	na rom 88	19-FO 101					
payment inst	LUCTIONS											

Form 8	868 (Re	v 1-2011)				Page 2				
• If y	ou are	filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part II and che	ck this box	<b>▶</b> X				
-		omplete Part II if you have already been gra								
	-	filing for an Automatic 3-Month Extension,			•					
Part		Additional (Not Automatic) 3-Month Ex			copies needed).					
Type		Name of exempt organization THE THOMAS		Employer identification n	umber					
print		U/A DECEMBER 29, 1986			59-2819786					
File by 1		Number, street, and room or suite no If a P O bo	L							
extende		291 EL VEDADO								
due dat		City, town or post office, state, and ZIP code. For a foreign address, see instructions								
retum S	See									
instruct	ions	PALM BEACH, FL 33480								
Enter	the Re	eturn code for the return that this application	ıs for (file a	a separate application for each return	)	04				
Applic	cation		Return	Application		Return				
Is For			Code	ls For		Code				
Form	990		01	Super Ferry Park To The	元年 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Form	990-BI	•	02	Form 1041-A		08				
Form	990-E2		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				
		(trust other than above)	06	Form 8870		12				
STOP	l Do no	ot complete Part II if you were not already	granted an	automatic 3-month extension on	a previously filed Form 8	3868.				
• The	books	s are in the care of  THE THOMAS C.	QUICK C	HARITABLE						
		e No. ▶		FAX No. ▶						
		inization does not have an office or place of t				▶□				
	_	or a Group Return, enter the organization's for				is				
		group, check this box								
		names and EINs of all members the extension		J	• • • • •					
		st an additional 3-month extension of time ur		10/15	20 11					
		endar year , or other tax year beginni			11/30, 20	10				
	f the ta	x year entered in line 5 is for less than 12 m	-		Final return	·				
	C.	hange in accounting period $_{ m ALL\ T}$	HE NECE	SSARY INFORMATION TO PR	FPARF A					
7 5		PLETE AND ACCURATE RETURN ARE	NOT AV	ATLABLE AT THIS TIME	BIAKU A	<del></del>				
-		FEETE AND ACCORATE RETORN ARE	NOI AV	AIBABBE AI INIS IIME.						
-										
0.	f there	application in far Form 000 BL 000 BE 00	O.T. 4720	or 6060, optor the tentative toy	loop ony!					
		application is for Form 990-BL, 990-PF, 99	0-1, 4/20	, or ooos, enter the tentative tax	$ 8a $  4, $ 4, \eta $	11				
		indable credits. See instructions application is for Form 990-PF, 990-T,	4720 05	6060 ontos any refundable es	10014					
		ed tax payments made. Include any pri	or year o	verpayment allowed as a credit		ml				
_		and previously with Form 8868.  8b \$ 14, 471								
			act line 8b from line 8a. Include your payment with this form, if required, by using EFTPS  8c. NoNE							
(	Electro	onic Federal Tax Payment System) See instruc			8c \$ ND	IVE				
		•		d Verification						
-		of perjury, I declare that I have examined this form, if and complete, and that I am authorized to prepare this for	-	ompanying schedules and statements, and to	o the best of my knowledge :	and belief,				
Signatur	re ►	m & shy		Title ▶ CP#	Date > 3/3/6	(/				
	G	RANT THORNTON LLP			Form <b>8868</b> (Re	ev 1-2011)				
	6	0 BROAD STREET								

NEW YORK, NY 10004-2306