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### ON EXTENTION UNTIL AUGUST 15, 2011

### **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. **2010** 

OMB No 1545-0052

For calendar year 2010, or tax year beginning and ending Initial return of a former public charity Final return G Check all that apply: Initial return Amended return Address change Name change Name of foundation A Employer identification number WOMAN'S SEAMEN'S FRIEND SOC. OF CT. INC. C/O TRUST COMPANY OF CONNECTICUT 06-0655133 Number and street (or PO fox purce) may price were to free and street (or PO fox purces Room/suite B Telephone number P. O. BOX 302 203-777-2165 City or town, state, and ZIP code C If exemption application is pending, check here NEW HAVEN, CT 06502 D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated J Accounting method: X Cash 1 Fair market value of all assets at end of year Accrual under section 507(b)(1)(A), check here (from Part II, col. (c), line 16) Other (specify) If the foundation is in a 60-month termination 4838709. (Part I, column (d) must be on cash basis.) ▶\$ under section 507(b)(1)(B), check here Part | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) for charitable purposes (cash basis only) expenses per books income income N/A Contributions, gifts, grants, etc., received Check I If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 127569 123669 STATEMENT Dividends and interest from securities 5a Gross rents **3**7 SCANNER OUN b Net rental income or (loss) 132056 6a Net gain or (loss) from sale of assets not on line 10 678520. 132056 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital CEIVED Income modifications 100 8 I VIUI b Less Cost of good Ö c Gross profit or (loss) 11 Other income OGDEN. UT 259625. 255725 Total. Add lines 1 through 11 31151 31151. 0. Compensation of officers, directors, trustees, etc. 9803. 0. 9803. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 2 2100. 0 2100. **b** Accounting fees 0. STMT 29486. 29486. c Other professional fees 50. 0. and Administrative 50. 17 Interest STMT 4 10115. 10115. 18 Taxes 0. 19 Depreciation and depletion 1820. 0. 20 Occupancy 6077. 0. 6077. 2454. 0 2454. 21 Travel, conferences, and meetings 22 Printing and publications 8227 8227. STMT 5 0 Operating 23 Other expenses 24 Total operating and administrative 101283. 29536 69927. expenses. Add lines 13 through 23 99920. 99920. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 201203 169847. 29536 Add lines 24 and 25 Subtract line 26 from line 12: 58422 2 Excess of revenue over expenses and disbursements 226189 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2010)

Form 990>PF

Department of the Treasury

Internal Revenue Service

INC. DE FREST NIA GABA PRIVATE Chest SEAVI

End of year Beginning of year Balance Sheets Attached schedules and amounts in the description (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 360091. 866797. 867377. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 474916. 172571 184469. 10a Investments - U.S. and state government obligations STMT 6 STMT 609814 565695. 3701840. **b** Investments - corporate stock STMT 8 180000. 80000 83519. c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 20865. 14 Land, buildings, and equipment basis 19361. 1504. 1504. Less accumulated depreciation STMT 9 > 3324 15 Other assets (describe ▶ 1628145. 1686567. 4838709. Total assets (to be completed by all filers) Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund ightharpoonsFoundations that do not follow SFAS 117, check here and complete lines 27 through 31. 6 1628145 1686567 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0. 0. 0. 0. 29 Retained earnings, accumulated income, endowment, or other funds 1628145. 1686567 30 Total net assets or fund balances 1628145 1686567 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 1628145. (must agree with end-of-year figure reported on prior year's return) 58422. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 4 5 Decreases not included in line 2 (itemize) 5 1686567. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

WOMAN'S SEAMEN'S FRIEND SOC. OF CT.

023511

Form 990-PF (2010)

Page 3

(a) List and desci	ribe the ki	nd(s) of property sold (e.g. or common stock, 200 shs	., real estate,	income	( <b>b</b> ) l	How acc	quired (c	) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
			5. WILC CO.)		D	- Dona	iiiii	·	<del></del>
12 SEE SCHEDULE A					-			ARIOUS	VARIOUS
b SEE SCHEDULE A	TTAC	uen			1		P   V	ARIOUS	VARIOUS
<u>c</u>					<del> </del>				<del> </del>
<u>d</u>		· · · · · · · · · · · · · · · · · · ·			1		<del>   </del>		<del>                                     </del>
<u>e</u>		Depreciation allowed	(a) Cos	et or other bacic	<del>'                                    </del>			(h) Gain or (los	
(e) Gross sales price		(or allowable)		xpense of sale				(e) plus (f) minus	s (g)
a 150000.				15000					0.
ь 528520.				39646	4.			·- <del></del>	132056.
C									
d									<u> </u>
e Consider a service and a sharing		anti-ma (h) and award bu	h	40/04/00					
Complete only for assets showing		· · · · · · · · · · · · · · · · · · ·	r					iains (Col. (h) gai <), but not less th	
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				osses (from col	
a									0.
b									132056.
С									
d									
e									
		∫ If gain, also enter	r in Part I. line	7	7				
2 Capital gain net income or (net ca	ıpıtal loss		- ın Part I, line	7	<i>)</i>	2			132056.
3 Net short-term capital gain or (los			nd (6):		٦				
If gain, also enter in Part I, line 8,	column (	c).			١			37 /	_
If (loss), enter -0- in Part I, line 8  Part V Qualification U	ndor 6	Section 4940(e) for	Doduces	Toy on Not	-   -	3	ont Inco	N/.	A
(For optional use by domestic private if section 4940(d)(2) applies, leave to Was the foundation liable for the sec if "Yes," the foundation does not qua	his part b tion 4942	lank. tax on the distributable an	nount of any y	ear in the base pe		·			Yes X No
1 Enter the appropriate amount in					es.				
(a)		(b)			(c)	١			(d)
Base periód years Calendar year (or tax year beginni	(מו מח	Adjusted qualifying dis	tributions	Net value of no	oncha	rıtable-ı	use assets	(col. (b) o	ribution ratio livided by col. (c))
2009	<u>g/</u>		65304.			40	24811.	(35(5)	.090763
2008	-		99929.				64836.		.040269
2007			63114.				83905.		.028698
2006			68490.			•	45890.		.032118
2005			97854.				76877.		.038972
2 Total of line 1, column (d)								2	.230820
3 Average distribution ratio for the	5-year ba	se period - divide the total	on line 2 by 5.	or by the number	r of ve	ears			
the foundation has been in existe				,	- 4			3	.046164
		•							
4 Enter the net value of noncharital	ole-use as	sets for 2010 from Part X,	line 5					4	4011375.
F. Maritania in a 4 haritana 2									105101
5 Multiply line 4 by line 3								5	185181.
6 Enter 1% of net investment incor	ne (1% o	f Part I, line 27b)						6	2262.
7 Add lines 5 and 6								7	187443.
7 Add lines 5 and 6									10/443.
8 Enter qualifying distributions from								8	169847.
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, c	heck the box in Part VI, line	tb, and com	olete that part usir	ng a 1	% tax r	ate.		
See the Falt VI Instructions.		<u> </u>							- 000 PF

WOMAN'S SEAMEN'S FRIEND SOC. OF CT. INC. Form 990-PF (2010) C/O TRUST COMPANY OF CONNECTICUT 06-0655133 Part VI | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% 4524. of Part I line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: 2880 a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 2880. 7 Total credits and payments. Add lines 6a through 6d 7 11. 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 1655. 9 Tax due, If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Х c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: \_\_\_\_0 . (2) On foundation managers. ▶ \$ \_\_ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ Х 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 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 X bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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: By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X remain in the governing instrument? 6 X 7 Did the foundation have at least \$5,000 in assets at any time during the year? 7 If "Yes," complete Part II, col. (c), and Part XV. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) X of each state as required by General Instruction G? If "No," attach explanation 8b 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresse

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orm 990-PF (2010) C/O TRUST COMPANY OF COM			<u>06-0655</u> 1	<u> 133</u>	Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which F	orm 4/20 May Be F	Required (continu	ued)		<del></del>
<ul> <li>5a During the year did the foundation pay or incur any amount to:</li> <li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section</li> <li>(2) Influence the outcome of any specific public election (see section 4955); or</li> </ul>			s 🗓 No		
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	s X No s X No		
<ul> <li>(4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?</li> <li>(5) Provide for any purpose other than religious, charitable, scientific, literary, or the section of the</li></ul>			s 🗓 No		
the prevention of cruelty to children or animals?  b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		☐ Ye	s X No		
section 53.4945 or in a current notice regarding disaster assistance (see instructional Organizations relying on a current notice regarding disaster assistance check here.	ctions)?	<b>3</b>	N/A ▶□	5b	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro expenditure responsibility for the grant?	om the tax because it maintal N	. —	s No		
If "Yes," attach the statement required by Regulations section 53.4945 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p a personal benefit contract?		Ye	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a per <i>If</i> "Yes" to 6b, file Form 8870.	ersonal benefit contract?			6b	X
7a At any time during the tax year, was the foundation a party to a prohibited tax st b If "Yes," did the foundation receive any proceeds or have any net income attribution.	table to the transaction?		s X No N/A	7b	
Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors	es, Foundation Ma	nagers, Hignly	1		
List all officers, directors, trustees, foundation managers and their of	compensation.				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acc a	Expense count, other llowances
SEE STATEMENT 10		40954.	0		0.
				-	
				_	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none, (b) Title, and average	enter "NONE."	(d) Contributions to	T 16	) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	acc	Expense count, other llowances
NONE			-		
				$\perp$	
	-				
Total number of other employees paid over \$50,000			Forn	990-	<u>0</u> • <b>PF</b> (2010)

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Part VIII Inform	nation Abo	out Offices	cers, Direct	ors,	Trustees, Foundation Managers,	Highly	

Part VIII Paid Employees, and Contractors (continued)	ation Managers, migniy	
3 Five highest-paid independent contractors for professional services. If none, enter	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
	<del> </del>	
		·
	<del> </del>	
Total number of others receiving over \$50,000 for professional services	·	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati	stical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc.	Expenses
1 N/A		
2		
3		
4		
Port IV P C		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year of	n lines 1 and 2	Amount
	Times Tand 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		0

Form 990-PF (2010)

Р	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·a	Average monthly fair market value of securities	1a	4008961.
	Average of monthly cash balances	1b	655972.
	Fair market value of all other assets	1c	2414.
đ	Total (add lines 1a, b, and c)	1d	4667347.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4667347.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) STMT 11	4	655972.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4011375.
6	Minimum investment return. Enter 5% of line 5	6	200569.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	200569.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	4524.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	196045.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	196045.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	196045.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	`	
а	Expenses, contributions, gifts, etc total from Part 1, column (d), line 26	1a	<u> 169847.</u>
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	169847.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	169847.
	Note: The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation of	unalified for	the costion

Form **990-PF** (2010)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,		···································		<del></del>
line 7				196045.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:				
,,	<u>-</u>	0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
<b>b</b> From 2006				
c From 2007				
d From 2008				
e From 2009 87098.	27222			
f Total of lines 3a through e	87098.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 169847.				
a Applied to 2009, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			160045
d Applied to 2010 distributable amount				169847.
e Remaining amount distributed out of corpus	0.			0.51.00
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)	26198.			26198.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	60900.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b	ł	0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.	·		
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	60900.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009 60900.				
e Excess from 2010		·		

C/O TRUST COMPANY OF CONNECTICUT

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Form **990-PF** (2010)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year  SEE STATEMENT 13	or substantial contributor	recipient		
Total	·	•	<b>▶</b> 3a	99920.
b Approved for future payment  NONE  Total			> 3a 	0.

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	Analysi	a of Incom	a-Draducina	Activition
Part XVI-A	Analysi	S OI IIICUIII	e-Producing	<b>MCHAIRE</b>

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Exclude	d by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	1 0000	<del> </del>			<del></del> .
b					
c					
d					
e			ļ <u> </u> _		
f	_		<u> </u>		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1		
investments			<del>                                     </del>		
4 Dividends and interest from securities			<del> </del>		127569
5 Net rental income or (loss) from real estate:			<del>                                     </del>		
a Debt-financed property	ļ		1		
b Not debt-financed property			<del>-</del>		
6 Net rental income or (loss) from personal					
property	ļ		+-+		
7 Other investment income			+		
8 Gain or (loss) from sales of assets other					120056
than inventory			+ +		132056
9 Net income or (loss) from special events	<b> </b>	·	-		
10 Gross profit or (loss) from sales of inventory	-		<del>-</del>		
11 Other revenue:					
a	-		+ +		
b	1 1		+-+		
c			1 +		
d	-		+		
e	-	0.	+ +	0.	259625
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>		·LL		
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	233023
Part XVI-B Relationship of Activities	to the Accor	mplishment of E	vamnt	Durnoses	
		· · · · · · · · · · · · · · · · · · ·			
Line No. Explain below how each activity for which inc	•		A contribu	ted importantly to the accomp	plishment of
the foundation's exempt purposes (other tha			7m.G		
AID TO MERCHANT SEAMED	N AND THE	IR DEPENDER	VI'S	<u></u>	
		······································			
			·		
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023621 12-07-10					Form <b>990-PF</b> (2010

C/O TRUST COMPANY OF CONNECTICUT Form 990-PF (2010) Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) Х X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) 1b(4) (4) Reimbursement arrangements (5) Loans or loan guarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No \_\_ Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (c) Description of relationship (a) Name of organization (b) Type of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, Sign Here Signature of officer or trustee Date Title Check PTIN Print/Type preparer's name 's signature Date self- employed Paid **Preparer** Firm's name ► LEVITSKY & BERNEY Firm's EIN ▶ **Use Only** 

Form **990-PF** (2010)

<u>(203)389-5371</u>

Firm's address ► 100 BRADLEY ROAD

WOODBRIDGE, CT\_06525

Phone no.

2010 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

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Asset No	Description	Date Acquired M	Method	Lıfe	No No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	10FFICE CONSTRUCTION070105SL	07010581		39.00	17	1750.			1750.	201.		45.
73	2COMPUTER EQUIPMENT	18566090		5.00	17	1825.	•		1825.	1825.		.0
m	3FAX	080197SL		7.00	17	732.	,		732.	732.		0
7	4COPY MACHINE	121500SL		7.00	17	1395.			1395.	1219.		176.
Ŋ	5COMPUTER EQUIPMENT	082900SL		5.00	17	2357.			2357.	2061.		296.
9	(	111500SL		7.00	17	3156.			3156.	2762.		394.
7	FUKNITUKE & S	111500SL		7.00	17	7267.			7267.	6358.		906
8	SOFFICE ART, ETC.	061501SL		7.00	17	871.	,	,	871.	871.		.0
<u>o</u>	EQUIPMENT	111503SL		5.00	17	1512.		,	1512.	1512.		0.
	TOTAL 990-FF FG L DEPR			¢		20865.		0	20865.	17541.	0.	1820.
			·				,					
						*						
-												
				- :								
						,						

(D) - Asset disposed

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

FORM '990-PF DIVIDEND	S AND	INTER	EST F	ROM	SECUR	ITIES	STATEMENT	1
SOURCE		GROSS	AMOU	NT		TAL GAINS	COLUMN (A AMOUNT	)
TRUST CO. OF CONNECTICUT	-		1275	69.		0.	1275	69.
TOTAL TO FM 990-PF, PART I, I	,N 4 =		1275	69.		0.	1275	69.
FORM 990-PF	AC	COUNTI	NG FE	ES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS		INVE	ST-		(D) CHARITA E PURPOS	
ACCOUNTING FEES		2100.			0.		21	00.
TO FORM 990-PF, PG 1, LN 16B		2100.			0.		21	00.
FORM 990-PF (	THER	PROFES	SIONA	L FE	ES		STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS		INVE			CHARITA	
INVESTMENT MANAGEMENT FEES		29486.		29	486.			0.
TO FORM 990-PF, PG 1, LN 16C		29486.		29	486.			0.
FORM 990-PF		TAX	ES				STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	NET MENT			(C) ADJUSTED NET INCOM		
PAYROLL TAXES EXCISE TAXES	<u> </u>	5194. 4921.			0.			94. 21.
TO FORM 990-PF, PG 1, LN 18		10115.	-		0.			15.

FORM 990-PF	RM 990-PF OTHER EXPENSES				STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS			(C) ADJUSTED NET INCOM		
POSTAGE AND OFFICE EXPENSE INSURANCE UTILITIES	3770. 2112. 2345.		0. 0. 0.		377 211 234	2.
TO FORM 990-PF, PG 1, LN 23	8227.		0.		822	27.
FORM 990-PF U.S. AND S	TATE/CITY G	OVERNMENT	OBLI	GATIONS	STATEMENT	6
DESCRIPTION	U.S GOV'		воо	K VALUE	FAIR MARKET VALUE	?
· · · · · · · · · · · · · · · · · · ·	X			172571.	18446	59.
TOTAL U.S. GOVERNMENT OBLIGAT	CIONS	-		172571.	18446	59.
TOTAL STATE AND MUNICIPAL GOV	ERNMENT OBL	- IGATIONS				
TOTAL TO FORM 990-PF, PART II	, LINE 10A	=		172571.	18446	59.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7
DESCRIPTION			вос	K VALUE	FAIR MARKET	י
		-		565695.	370184	10.
TOTAL TO FORM 990-PF, PART II	, LINE 10B	-		565695.	370184	10.

FORM 990-PF	CO	RPORATE BONDS		STATEMENT 8
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
			80000.	83519.
TOTAL TO FORM	990-PF, PART II, LIN	E 10C	80000.	83519.
FORM 990-PF	DEPRECIATION OF ASSE	TS NOT HELD FOR	INVESTMENT	STATEMENT 9
DESCRIPTION		COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
OFFICE CONSTRUCTORY COMPUTER EQUIPMENT EQUIPME	PMENT  PMENT  URE & FIXTURES  FC.	1750. 1825. 732. 1395. 2357. 3156. 7267. 871. 1512.	246. 1825. 732. 1395. 2357. 3156. 7267. 871. 1512.	1504. 0. 0. 0. 0. 0. 0.
TOTAL TO FM 9	90-PF, PART II, LN 14	20865.	19361.	1504.

<u> </u>								
	- LIST OF OFFICERS, DIREC S AND FOUNDATION MANAGERS	IST OF OFFICERS, DIRECTORS STATEMENT 1 ND FOUNDATION MANAGERS						
NAME AND ADDRESS		MPEN- TION	EMPLOYEE BEN PLAN CONTRIB					
CARL GOTTSCHALK 8 BEACHWOOD LANE NEW HAVEN, CT 06511	BOARD MEMBER 1.00	0.	0.	0.				
DAWN DAVIDSON 15 WOODSTOCK ROAD HAMDEN, CT 06517	BOARD MEMBER 1.00	0.	0.	0.				
MARY ESTABROOK 176 CARMALT ROAD HAMDEN, CT 06517	BOARD MEMBER 1.00	0.	0.	0.				
SALLY FERGUSON 33 BEACHWOOD LANE NEW HAVEN, CT 06511	BOARD MEMBER 1.00	0.	0.	0.				
RICHARD HEGEL 29 LOOMIS PLACE NEW HAVEN, CT 06511	BOARD MEMBER 1.00	0.	0.	0.				
THERESA MESTER 21 PECK LANE HAMDEN, CT 06518	SECRETARY 15.00	9803.	0.	0.				
E. W. SLOAN 20 RIVER EDGE FARMS ROAD MADISON, CT 06443	BOARD MEMBER 1.00	0.	0.	0.				
MARCIA CAVANAUGH 51 HEPBURN ROAD HAMDEN, CT 06517	PRESIDENT 1.00	0.	0.	0.				
NANCY WHEELER 68 SUNSET HILL DRIVE BRANFORD, CT 06405	IMMEDIATE PAST PRE 1.00	SIDENT 0.	0.	0.				
DAVID TOTMAN 291 WHITNEY AVENUE NEW HAVEN, CT 06505	EXECUTIVE DIRECTOR 30.00	31151.	0.	0.				
SUSAN EHRENKRANZ 25 KILLDEER ROAD HAMDEN, CT 06517	BOARD MEMBER 1.00	0.	0.	0.				

WOMAN'S SEAMEN'S FRIEND SOC. OF	CT. INC.		06	5-0655133
DOROTHY VENTER 125 POMPERAUG WOODS SOUTHBURY, CT 06488	BOARD MEMBER 1.00	0.	0.	0.
MICHELE WATERS P. O. BOX 3261 STONEY CREEK, CT 06405	BOARD MEMBER 1.00	0.	0.	0.
JANE ANN MILLER 337 RACE HILL ROAD MADISON, CT 06443	BOARD MEMBER 1.00	0.	0.	0.
TIMOTHY GRIMES 71 SWATHMORE STREET HAMDEN, CT 06517	BOARD MEMBER 1.00	0.	0.	0.
DEBORAH EDWARDS 600 ELLSWORTH AVENUE NEW HAVEN, CT 06511	FIRST VICE PRES	SIDENT 0.	0.	0.
NANCY PUGSLEY 88 NOTCH HILL ROAD #355 NO. BRANFORD, CT 06471	BOARD MEMBER 1.00	0.	0.	0.
NANCY AHERN 295 WEST ROCK AVENUE NEW HAVEN, CT 06515	BOARD MEMBER 1.00	0.	0.	0.
MELISSA LOGAN 2 LONG POINT ROAD BRANFORD, CT 06405	BOARD MEMBER 1.00	0.	0.	0.
SUSAN BLANCHARD 25 WOODSTOCK ROAD HAMDEN, CT 06517	BOARD MEMBER 1.00	0.	0.	0.
KATHLEEN LUNGREN 31 ALSTON AVENUE NEW HAVEN, CT 06515	SECRETARY 1.00	0.	0.	0.
MARIANNE MAZAN 613 CHAPEL STREET NEW HAVEN, CT 06511	BOARD MEMBER 1.00	0.	0.	0.
CATHARIME.  KITTY BARCLAY  88 NOTCH HILL ROAD #273  NO. BRANFORD, CT 06471	BOARD MEMBER 1.00	0.	0.	0.
AMY ESTABOROOK 1625 RIDGE ROAD NO. HAVEN, CT 06473	TREASURER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	40954.	0.	0.

FORM 990-PF CASH DEEMED CHARITABLE EXPLANATION STATEMENT STATEMENT PART X, LINE 4

11

THE CASH DEEMED HELD FOR CHARITABLE PURPOSES EXCEEDS 1 1/2% BECAUSE THE OPERATING BUDGET AND REQUIRED DISTRIBUTIONS ARE FAR IN EXCESS OF THAT AMOUNT.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

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NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

WOMAN'S SEAMEN'S FRIEND SOCITY OF CONNECTICUT, INC. 291 WHITNEY AVENUE NEW HAVEN, CT 06511

TELEPHONE NUMBER

203-777-2165

FORM AND CONTENT OF APPLICATIONS

SCHOLARSHIP NOTICE AND APPLICATION AVAILABLE FROM SOCIETY.

### ANY SUBMISSION DEADLINES

FOR SUMMER SCHOOL - APRIL 1ST FOR ACADEMIC YEAR-MAY 15TH.

### RESTRICTIONS AND LIMITATIONS ON AWARDS

- CT. RESIDENTS WHO ARE MERCHANT SEAFARERS AND/OR THEIR DEPENDENTS. (1)
- CT. RESIDENTS STUDYING AT STATE MARITIME ACADEMIES. (2)
- (3) CT. RESIDENTS MAJORING IN MARINE SCIENCES.
- LEGAL RESIDENT OF OTHER STATES MAJORING IN MARINE SCIENCES AT A (4)COLLEGE, UNIVERSITY OR OTHER APPROVED INSTITUTION IN CT.

FORM'990-PF

13

STATEMENT

	DURING THE YEAR		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
AID TO MERCHANT SEAMEN AND THEIR DEPENDENTS VARIOUS	NONE GENERAL ASSISTANCE	NONE	14420.
NEW HAVEN READS COMMUNITY BOOK BANK NEW HAVEN, CT	NONE OPERATIONS	NONE	10000.
FIRST CONGREGATIONAL CHURCH NEW HAVEN, CT	NONE OPERATIONS	NONE	9600.
MAINE MARITIME ACADEMY MAINE, ME	NONE SCHOLARSHIPS & OPERATIONS	NONE	4700.
MASS. MARITIME ACADEMY MASSACHUSETTS, MA	NONE SCHOLARSHIPS AND OPERATIONS	NONE	15300.
INTERNATIONAL FESTIVAL OF ARTS ON IDEAS NEW HAVEN, CT	NONE OPERATIONS	NONE	5000.
COLD SPRING SCHOOL NEW HAVEN, CT	NONE SCHOLARSHIPS AND OPERATIONS	NONE	4500.
AMERICARES-HAITI NEW HAVEN, CT	NONE OPERATIONS	NONE	5000.

GRANTS AND CONTRIBUTIONS

WOMAN'S SEAMEN'S FRIEND SOC. O	OF CT. INC.		06-0655133
SAIL CONNECTICUT WATERTOWN, CT	NONE OPERATIONS	NONE	7000.
SCHOONER, INC. NEW HAVEN, CT	NONE OPERATIONS	NONE	7500.
SUNY MARITIME COLLEGE THROGS NECK, NY	NONE SCHOLARSHIPS & OPERATIONS	NONE	6150.
U. S. COAST GUARD ACADEMY NEW LONDON, CT	NONE SCHOLARSHIPS & OPERATIONS	NONE	1000.
U. S. MERCHANT MARINE ACADEMY KINGS POINT, NY	NONE SCHOLARSHIPS & OPERATIONS	NONE	-1000.
U. S. NAVAL ACADEMY ANNAPOLIS, MD	NONE SCHOLARSHIPS & OPERATIONS	NONE	1000.
VARIOUS 501C3 ORGANIZATIONS VARIOUS	NONE SCHOLARSHIPS AND OPERATIONS	NONE	6600.
VARIOUS SCHOLARSHIPS VARIOUS, CT	NONE SCHOLARSHIPS	NONE	1150.
YMCA SEAMEN'S HOUSE NEW YORK, NY	NONE OPERATIONS	NONE	2000.
TOTAL TO FORM 990-PF, PART XV, I	LINE 3A		99920.

# 2010 Tax Information Statement

2nd TIN notice 203)789-2779 06-0655133 06-0469580 NH0030 Recipient's Tax ID Number: Payer's Federal ID Number: Account Number: Corrected **Questions?** 

TRUST COMPANY OF CONNECTICUT

100 PEARL STREET HARTFORD, CT 06103

Payer's Name and Address:

WOMENS SEAMENS FRIEND SOCIETY Recipient's Name and Address: C/O LAURENCE SCHIFFRES WOODBRIDGE, CT 06525 LEVITSKY & BERNEY 100 BRADLEY ROAD

Page रेप् , Ref:े

A DIVISION OF NEW ALLIANCE BANK

2010 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS are Gross Proceeds less commissions and option premiums.

1 14-34-5-7	K-To-Terror	¥						
Federal Income Withheld	0000	0.00	0.00	0.00	00 0	0.00	00 0	00 0
Net Gain or Loss	00.0	0.00	134,400.94	93 75	00.0	0.00	-2,438 44	132,056.25
Cost or	50,000 00	150,000.00	44,119.54	49,906.25	100,000,00	100,000.00	102,438,44	396,464.23
Bonds, etc.	50,000,00	150,000.00	178,520.48	50,000,00	100,000.00	100,000 00	100,000,00	528,520.48
Date of Sale (Box 1a)	18/07/2009 03/02/2010 12/22/2010 09/17/2010		ARIQUS 05/27/2010	5/23/2008_06/23/2010	02/12/2010	03/15/2010	08/15/2010	
ate couring	08/07/2009		VARIQUS	05/23/2008	01/25/2008	03/05/2007	03/20/2002	
Number Office Shares CUSIP (Box 1b) (Box 7)	Short Term Sales Reported on 1099-B 50000.0000_3128X9CG3	irted on 1099-B	ong Term 15% Sales Reported on 1099-B 4000 0000 055622104 BP AMOCO PLC SPNSR ADR	50000,0000 3133XRD23 FHLB 4.625% 6/11/15	100000,0000 3133XPCL6 FHLB 4.750% 2/12/18 01/25/2008 02/12/2010	100000,0000 4165X0DS6 HARTFORD LIFE IN MTN 5,500% 3/15/16 03/05/2007 03/15/2010	100000 0000 9128276J6 U.S. TREASURY NOTES 5.750% 8/15/10 03/20/2002 08/15/2010	Reported on 1099-B
Number CUSIP (Box 1b)	Short Term Sales Reported on 1099-B 50000.0000.3128X9CG3 FHLMC 100000.0000.3136FMBQ6 FNMA	Total Short Term Sales Reported on 1099-B	Long Term 15% Sales Reported on 1099-B 4000.0000. 055622.104 BP.AMOCQ	50000.0000 3133XRD23	100000.0000 3133XPCL6	100000,0000 4165X0DS6	100000 0000 912827616	Total Long Term 15% Sales Reported on 1099-B

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

# Form **8868**(Rev. January 2011) Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No. 1545-1709

	are filing for an Automatic 3-Month Extension, care filing for an Additional (Not Automatic) 3-Mo						. ▶ 🗸
	complete Part II unless you have already been g						8868.
Electronal corporations of the corporation of the c	ration required to file Form 990-T), or an additional request an extension of time to file any of the for Transfers Associated With Certain Personal ions). For more details on the electronic filing of the Automatic 3-Month Extension of Time oration required to file Form 990-T and request only	8868 if you al (not auto orms listed Benefit C is form, vis Only sub sting an a	u need a 3-month automatic extensionatic) 3-month extension of time. If in Part I or Part II with the exception of the sent to sit www.irs.gov/efile and click on extensionatic of the community original (no copies needed) automatic 6-month extension—checks, and trusts must use Form 7004	sion of ti You can otion of the IRS file for Control	ime in electronic forms in charic box. est a	to file (6 in ctronical) at 8870, ling paper for ties & No. and co	months for y file Form nformation ormat (see nprofits.  mplete  months for yellow in the first profit in t
due date	10/0 INUST COMITANT OF CONSECTION, F.O.	. BOX 302					
filing you retum Se	City town or post office state and ZID ands For		ddress, see instructions.				
instructio		_					
4	<del></del>						
Enter tl	ne Return code for the return that this application is	s for (file a	separate application for each retur	n) .			0 4
Applic	ation	Return	Application				Return
Is For		Code	is For				Code
Form	990	01	Form 990-T (corporation)				07
Form	990-BL	02	Form 1041-A				08
Form	990-EZ	03	Form 4720				09
Form	990-PF	04	Form 5227				10
Form	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form	990-T (trust other than above)	06	Form 8870				12
	ooks are in the care of ►	 F	AX No. ►	·	. <b></b>		
	organization does not have an office or place of bi						. ▶□
	is for a Group Return, enter the organization's fou			• •	• •	. If this	_
	whole group, check this box	-	· · · · · · · · · · · · · · · · · · ·		<b>▶</b> [		
	ith the names and EINs of all members the extensi	•	to the group, onesk this box			] 4,14 4(1	4011
1	I request an automatic 3-month (6 months for a countil AUGUST 15, 20, 11, to file the exert for the organization's return for:  Y calendar year 20 10 or	orporation in mpt organization	zation return for the organization na	amed ab	ove.		
	▶ ☐ tax year beginning					, 20	
	If the tax year entered in line 1 is for less than 12 n Change in accounting period				rn		
	If this application is for Form 990-BL, 990-PF, 990 nonrefundable credits. See instructions.				3a_	\$	
b	If this application is for Form 990-PF, 990-T, 4 estimated tax payments made. Include any prior y				3b	\$	
С	Balance due. Subtract line 3b from line 3a. Include yo (Electronic Federal Tax Payment System). See instruc		t with this form, if required, by using E		3с	\$	
	n. If you are going to make an electronic fund vent instructions.		with this Form 8868, see Form 8				879-EO for