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Return of Private Foundation

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

OMB No 1545-0052

		t of the Treasury venue Service	Note. The fo	undation may	_	to use a copy of this			rting requirements.	2010
		dar year 2010, or tax	x year beginning	9			, and e	nding		
G (heck	all that apply:	Initial retur			Initial return of a fo	•	charity	Final return Name change	
Na	ne of	foundation				7.00.000 0.121.	<u>g-</u>		A Employer identification	number
		MEISENH						F=	06-1336907	
Nur	nbera	nd street (or P 0 box nur		delivered to street	address)		Room/suite	B Telephone number (203)878-46	518
Cit	or to	own, state, and ZIP co		5460					C If exemption application is per D 1. Foreign organizations,	
H	_	type of organization:	X Section	on 501(c) <u>(3) e</u> x		rivate foundation			Foreign organizations mee check here and attach con	ting the 85% test,
 L E:		ction 4947(a)(1) none irket value of all asset				axable private founda hod: Cash	ition X Accr	ual	E If private foundation statu under section 507(b)(1)(s was terminated
(fi	rom F	Part II, col. (c), line	16)	O1	her (sp	ecify)			F If the foundation is in a 6	0-month termination
	\$		<u> 237,049</u> .			must be on cash b	oasis.)		under section 507(b)(1)(
Pa	art I	Analysis of Revent (The total of amounts in necessarily equal the a	n columns (b), (c), a	nd (d) may not	(a ex) Revenue and penses per books	(b) Net in	vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts,	. ,			20,000.			N/A	
	3	Check If the for if the for interest on savings and cash investments	indation is not required temporary	to attach Sch B		1,288.		1,288.		STATEMENT 1
	4	Dividends and intere	st from securitie	s						
	5a	Gross rents					 			
	b	Net rental income or (los	is)			440				
ĕ	6a b	Net gain or (loss) from sa Gross sales price for all		10 53.		-119.	•			
Revenue	7	assets on line 6a Capital gain net income	(from Part IV, line 2		<u> </u>			0.		^
ď	8	Net short-term capita	al gain							
	9 10a	Income modification Gross sales less returns and allowances								
	1	Less Cost of goods sole								
	1	Gross profit or (loss))		ļ					
	11 12	Other income Total Add lines 1 th	rough 11			21,169.		1,288.		
	13	Compensation of officer		es, etc		0.		0.		0.
	14	Other employee sala		,						
er Aria	15	Pension plans, empl	oyee benefits			<u>_</u>				
Se	16a	Legal fees						.		
	D	Accounting fees Other professional fe	200							
器	17									
Ö	18	Interest RECE	IVEU SI	цит 2		50.		0.		0.
	19	Depreciation and depoceupancy AY 0	9 2011 S	PMT 2		<u> </u>				
Adr	21	Travel, conferences,	and meetings o	2						
SCANNED MAY 1 9 2011	22	Printing and publicat	tigns (17	-		170		0		
	23	Other expenses Total operating and		rMT 3		170.		0.		0.
er.	-'	expenses. Add lines				220.		0.		0.
0	25	Contributions, gifts,	grants paid			9,200.				9,200.
	26	Total expenses and	disbursements	•		0.400		•		0 200
	27	Add lines 24 and 25 Subtract line 26 from	n line 12:		\vdash	9,420.		0.	-	9,200.
	27 a	Excess of revenue over		ursements		11,749.				
	1	Net investment inco	•					1,288.		
0225		Adjusted net incom	e (if negative, enter	· -0-)	<u> </u>				N/A	

12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

023511 12-07-10

6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

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8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Form **990-PF** (2010)

13.

9,231.

9,200.

6

7

8

	990-PF (2010) MEISENHEIMER FOUNDATION, INC rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 49	06-	1336	907	ction	Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	1	- 10				
18	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)						
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		1				26.
U	of Part I, line 27b	ŀ	•				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).						
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				0.
	Add lines 1 and 2	ſ	3				26.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	Ī	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				26.
	Credits/Payments:						
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a						
	Exempt foreign organizations - tax withheld at source 6b						
	Tax paid with application for extension of time to file (Form 8868) 6c						
	Backup withholding erroneously withheld 6d 6d						
	Total credits and payments. Add lines 6a through 6d		7				0.
	Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached		8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9				26.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10				
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax	ed 🕨	11				
Pa	rt VII-A Statements Regarding Activities				,		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence and state and s	tervene i	ın			Yes	
	any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definit				1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pu	blished	d or				
	distributed by the foundation in connection with the activities.						_
-	Did the foundation file Form 1120-POL for this year?				1c		<u>X</u>
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year:	_					
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	Π					
	managers. ► \$0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.				2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpor	ation, oi	r				
	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		_X_
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		_X_
	If "Yes," attach the statement required by General Instruction T.						
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 remain in the governing instrument? 	he state	law		6		x
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
	If "Yes," complete Part II, col. (c), and Part XV.						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				1		
	CT						
b	if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)						
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	for cale	ndar		İ		
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV				9	ļ	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	<u>s S'</u>	TMT	5	10	X	<u> </u>

orm 990-PF (2010) MEISENHEIMER FOUNDATION,			<u>06-13369</u>	07	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955); (· · · ·	ectiv.			
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	27		s X No		
(4) Provide a grant to an individual for travel, study, or other similar purposes		'\ `			
• • •	iii uescribeu iii section		es X No		
509(a)(1), (2), or (3), or section 4940(d)(2)?	4		טא נבבו צי		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or		[]		
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	•	in Regulations		_	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t	nere		▶□□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined			
expenditure responsibility for the grant?	N	I/A 📖 Ye	es L No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y6	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			5 b	x
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	□ v ₄	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	+
Information About Officers Discotors Truck	• • • • • • • • • • • • • • • • • • • •	nagers Highly		, , , , , , , , , , , , , , , , , , ,	
Part VIII Paid Employees, and Contractors	ood, i danidadidii iiid	magoro, riigini	•		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred		xpense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation		nt, other vances
RICHARD C. MEISENHEIMER	PRESIDENT	enter-o-j	compensation	anov	various
884 ROBERT TREAT EXT.	PRESIDENT				
	0.00	0.	0.		0
DRANGE, CT 06477		U .	0.		0.
DANIEL T. MEISENHEIMER III	VICE PRES.				
477 SKYLINE DRIVE					•
DRANGE, CT 06477	0.00	0.	0.		0.
LINDA MEISENHEIMER	SECRETARY				
884 ROBERT TREAT EXT.					
DRANGE, CT 06477	0.00	0.	0.		0.
	<u> </u>				
2 Compensation of five highest-paid employees (other than those inc	T	enter "NONE."	Lana in ii . T		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) E	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allov	vances
NONE					
]				
THE COLUMN TO TH					
	1				
	1				
					
	1				
F. J. Lawrence of other complement and pure OFO 000	L	<u></u>			
Fotal number of other employees paid over \$50,000			₽⊥.		0

Total. Add lines 1 through 3

06-1336907

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	8,336.
	Average of monthly cash balances	1b	8,336. 209,701.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	218,037.
	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	
3	Subtract line 2 from line 1d	3	218,037.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,271.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	214,766.
6	Minimum investment return. Enter 5% of line 5	6	10,738.
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.)	id certain	
1	Minimum investment return from Part X, line 6	1	10,738.
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	26.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,712.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10,712.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	10,712.
P 1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	[
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	9,200.
	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:		
8		3a	
-	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	9,200.
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	9,200.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for t	he section

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,				
line 7				10,712.
2 Undistributed income, if any, as of the end of 2010	1			
a Enter amount for 2009 only	· 		14,252.	
b Total for prior years:				
2008,,		765.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006	[1	
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 9,200.				
a Applied to 2009, but not more than line 2a			9,200.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 31, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		765.		
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		765.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see ınstr.			5,052.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				10,712.
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	0.			
IO Analysis of line 9:				<u> </u>
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010	Í			
e choose from EO IO				5 000 DE (0040)

Part XIV Private Operating F	EIMER FOUNL		I A supertion (I)		35907 Page 10
		****	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	·	=	▶ └	14040(3/0) 14	240(-)(5)
b Check box to indicate whether the found		ng toundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2010	(b) 2009	Prior 3 years (c) 2008	(d) 2007	(e) Total
income from Part I or the minimum	(a) 2010	(0) 2009	(6) 2000	(0) 2007	(8) 10(2)
investment return from Part X for					
each year listed				-	
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	·				
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		1			
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					-
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed		-			
c "Support" alternative test - enter:					
 Total support other than gross investment income (interest, 					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)		 	<u> </u>		
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization		-	-		
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5 000 or m	ore in assets
at any time during			ii tiio iodiidatioi	1 11au 40,000 01 111	
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	_	than 2% of the total con	tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed i			•		·
SEE STATEMENT 6					
b List any managers of the foundation wh	no own 10% or more of the	ne stock of a corporation	(or an equally large port	ion of the ownership of a p	partnership or
other entity) of which the foundation ha					
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here ▶ ☐ If the foundation				not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations	under other conditions, o	complete items 2a, b, c, an	d d
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:		
_	·				
SEE STATEMENT 7 b The form in which applications should	be submitted and informa	ation and materials they s	:hould include:		
c Any submission deadlines:		<u> </u>	<u> </u>		
d Any restrictions or limitations on award	ls, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	

	Very or Assessed for Future I	Day		
3 Grants and Contributions Paid During the Recipient	If recipient is an individual			<u> </u>
	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	Contribution	7.11100171
a Paid during the year				
SEE STATEMENT 8				
Total STATEMENT O			▶ 3a	9,200
b Approved for future payment			Va Va	3,200
_				
NONE				
		İ		
Total			▶ 3b	000.05
3611 12-07-10			Fo	rm 990-PF (201

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	I business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
C					
d					
e					
f	· - · -				_
g Fees and contracts from government agencies					
2 Membership dues and assessments	<u> </u>				
3 Interest on savings and temporary cash			۱.,	4 000	
investments	ļ		14	1,288.	
4 Dividends and interest from securities	 				****
5 Net rental income or (loss) from real estate:					,,,,
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	1 1				
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	E 0 2 0 0 0	110			
than inventory	523000	-119.			
9 Net income or (loss) from special events	··· ·-				
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					· · · · · · · · · · · · · · · · · · ·
c		· · · · · · · · · · · · · · · · · · ·			·····
e		-119.		1,288.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	117.		13	
(See worksheet in line 13 instructions to verify calculations.)					1/1051
				. D	
Part XVI-B Relationship of Activities	to the Accol	mpiisnment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-A	contrib	uted importantly to the accord	nplishment of
the foundation's exempt purposes (other than				,,	
					-,-
_					
			_		
				· · · · · · · · · · · · · · · · · · ·	····
				······	
					
1					

023821 12-07-10

Form **990-PF** (2010)

203-481-1120

Paid

Preparer

Use Only

DOMINIC SCARANO J 04/09/11

Preparer's signature

Firm's name ► BAILEY MURPHY & SCARANO, LLC

1224 MAIN STREET

Firm's address ▶ BRANFORD, CT 06405

Print/Type preparer's name

DOMINIC SCARANO JR.

Check If

self- employed

Firm's EIN ▶

PTIN

Date

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

2010

Employer identification number Name of the organization 06-1336907 MEISENHEIMER FOUNDATION, INC Organization type (check one): Section: Filers of: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year. aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively ▶ \$ religious, charitable, etc., contributions of \$5,000 or more during the year.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Page 1 of 1 of Part I

Name of organization

Employer identification number

MEISENHEIMER FOUNDATION, INC

06-1336907

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SPECTRUM ASSOCIATES INC. 440 NEW HAVEN AVENUE MILFORD, CT 06460	\$ 20,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions \$	Person Payroll 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 Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page

of Part II

Name of organization

Employer identification number

of

MEISENHEIMER FOUNDATION, INC

06-1336907

	oncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
		 \$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ _			

Name of organization

Employer identification number

III	more than \$1 000 for the year. Complete	columns (a) through (e) and the foll	01(c)(7), (8), or (10) organizations aggregating owing line entry For organizations completing					
1	Part III, enter the total of exclusively religion	us, charitable, etc., contributions of	-					
; <u> </u>	\$1,000 or less for the year. (Enter this info	ormation once. See instructions)	<u> </u>					
No. m t I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
'								
-								
-								
		(e) Transfer of gift						
		1710 4	5					
	Transferee's name, address, an	Id ZIP + 4	Relationship of transferor to transferee					
-								
lo. m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
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			-					
	(e) Transfer of gift							
1	Transferee's name, address, an	.d 71D . 4	Relationship of transferor to transferee					
	Transieree s flame, address, an	U ZIF T 4	nelationship of transferor to transferee					
lo.								
n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
m	(b) Purpose of gift		(d) Description of how gift is held					
No. m	(b) Purpose of gift	(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held					
m	(b) Purpose of gift Transferee's name, address, an	(e) Transfer of gift	(d) Description of how gift is held Relationship of transferor to transferee					
m		(e) Transfer of gift						
m		(e) Transfer of gift						
m		(e) Transfer of gift						
m	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee					
		(e) Transfer of gift						
n i i	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee					
m	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee					
m t l	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee					
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee					
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee					
n i i	Transferee's name, address, an	(e) Transfer of gift d ZIP + 4 (c) Use of gift (e) Transfer of gift	Relationship of transferor to transferee					
	Transferee's name, address, and (b) Purpose of gift	(e) Transfer of gift d ZIP + 4 (c) Use of gift (e) Transfer of gift	Relationship of transferor to transferee (d) Description of how gift is held					
	Transferee's name, address, and (b) Purpose of gift	(e) Transfer of gift d ZIP + 4 (c) Use of gift (e) Transfer of gift	Relationship of transferor to transferee (d) Description of how gift is held					

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
BANK OF AMERICA			•	1,288.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	LUMN A	:	1,288.
FORM 990-PF	TAX	ES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		CHARITABLE
EXCISE TAXES	50.	0.		0.
TO FORM 990-PF, PG 1, LN 18 =	50.	0.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
INVESTMENT FEES MISCELLANEOUS BANK CHARGES	53. 50. 67.	0. 0. 0.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	170.	0.		0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 4
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE
MARKETABLE SECURITIES			8,300.	8,300.
TOTAL TO FORM 990-PF, PART II	I, LINE 10B		8,300.	8,300.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

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NAME OF CONTRIBUTOR

ADDRESS

SPECTRUM ASSOCIATES INC

440 NEW HAVEN AVENUE MILFORD, CT 06460

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

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NAME OF MANAGER

RICHARD C. MEISENHEIMER DANIEL T. MEISENHEIMER III LINDA MEISENHEIMER

FORM 990-PF

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

STATEMENT

7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

RICHARD MEISENHEIMER 440 NEW HAVEN AVENUE MILFORD, CT 06460

TELEPHONE NUMBER

203-878-4618

FORM AND CONTENT OF APPLICATIONS

WRITTEN LETTER WITH NAME ADDRESS AND PHONE NUMBER

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE CORPORATION SHALL CONDUCT & SUPPORT SURVEYS, STUDIES, ANALYSES AND PUBLICATIONS IN THE FIELD OF SCIENCE, ENGINEERING, HISTORY, CURRENT EVENTS MEDICINE, ECONOMICS, DIPLOMACY, POLITICAL SCIENCE, COMMUNICATIONS AND WORLD RELIGIONS. THE CORPORATION MAY ALSO MAKE FROM TIME TO TIME, GRANTS OR AWARD SCHOLARSHIPS TO INDIVIDUALS PURSUING A COURSE OF STUDY IN ONE OR MORE OF THE ABOVE MENTIONED FIELDS OR MAKE GRANTS TO SIMILAR CHARITABLE INSTITUTIONS WITH A SIMILAR PURPOSE.

· · · · · · · · · · · · · · ·	TS AND CONTRIBUTIONS ID DURING THE YEAR	STATEMENT 8		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUN	ЛT
HATIAN HEAL FOUNDATION	NONE TO CONTINUE SERVICES AND PROGRAMS		60	00.
BETH EL CENTER	NONE TO CONTINUE SERVICES AND PROGRAMS		2,50	00.
DYLAN FORTUNATO FUND	NONE TO CONTINUE SERVICES AND PROGRAMS		5(00.
THS PTA	NONE TO CONTINUE SERVICES AND PROGRAMS		5(00.
TIM JAMES - ROBOTIC	NONE TO CONTINUE SERVICES AND PROGRAMS		1,00	00.
UNITED WAY	NONE TO CONTINUE SERVICES AND PROGRAMS		7!	50.
MASSARO COMMUNITY FARM INC	NONE TO CONTINUE SERVICES AND PROGRAMS		5(00.
MILFORD HOSPITAL	NONE TO CONTINUE SERVICES AND PROGRAMS		4!	50.

MEISENHEIMER FOUNDATION, INC		06-1336907
MILFORD POLICE BENEVOLENT ASSOC	NONE TO CONTINUE SERVICES AND PROGRAMS	500.
RUSSO FOUNDATION	NONE TO CONTINUE SERVICES AND PROGRAMS	400.
THE JIMMY STEWART MUSEUM	NONE TO CONTINUE SERVICES AND PROGRAMS	1,000.
ORANGE HISTORICAL SOCIETY	NONE TO CONTINUE SERVICES AND PROGRAMS	500.
TOTAL TO FORM 990-PF, PART XV, L	INE 3A	9,200.