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Form **990-EZ** 

Department of the Treasury Internal Revenue Service

# **Short Form Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

2010

**Open to Public** Inspection

	Α	For the	e 2010 calen	dar year, or tax year beginning , and ending	_			
	В		applicable	C Name of organization	D En	mployer identification number		
		Address	change	KEVIN M. EIDT SCHOLARSHIP FUND		06 1470000		
		Name cl	hange	Number and street (or P O box, if mail is not delivered to street address)  Room/suite	F Te	ephone r	6-1473626 number	
		Initial ref	turn	Tionivalite		-p.10110 1		
		Termina	ited	7 BUMBLEBEE LANE		20	3-846-9718	
		Amende	ed return	oup Exe	emption			
		Applicat	ion pending	NORWALK CT 06851-1404	ımper 🖻	•		
	G	Accoun	iting Method	X Cash Accrual Other (specify) ▶	1 Check	$\blacksquare$	If the organization is	
				KevinsFund.org			o attach Schedule B	
	J	Tax-exen	npt status (che	eck only one) — X 501(c)(3)	(Form	990, 99	00-EZ, or 990-PF)	
				organization is not a section 509(a)(3) supporting organization and its gross receipts are n	orm allu r		o than \$50,000	
				organization is not a section 309(a)(b) supporting organization and its gloss receipts are in orm 990 return is not required though Form 990-N (e-postcard) may be required (see instru				
				re to file a complete return	J. 10/13/. 1	ou n' une	organization chooses	
	L	Add line	s 5b, 6c, and	7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	assets			
	(Pa	rt II, line		(B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶\$	199,173	
	Pá	art i		e, Expenses, and Changes in Net Assets or Fund Balances (see the i				
			Check if	the organization used Schedule O to respond to any question in this Part	1		X	
		1	Contributio	ns, gifts, grants, and similar amounts received		1	115,042	
		2	Program s	ervice revenue including government fees and contracts		2		
		3	Membersh	ip dues and assessments		3		
	- [	4		Income		4	23,410	
		5a		unt from sale of assets other than inventory	40,471			
		b		or other basis and sales expenses	31,874			
	ō			ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	8,597	
	ž	6	•	d fundraising events		328		
2011	Revenue	а		me from gaming (attach Schedule G if greater than				
	Œ	h		me from fundraising events (not including \$ 79,481 of contributions				
8				alsing events reported on line 1) (attach Schedule G if the				
0				h gross income and contributions exceeds \$15,000)   6b	20,250			
NOC		cL		expenses from gaming and fundraising events 6c	18,952			
				e or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract				
CANNED						6d	1,298	
Z		7a	Gross sale	s of inventory, less returns and allowances				
Z				of goods sold				
$\ddot{c}$				it or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	0	
Ö		8		nue (describe in Schedule O)		8		
	_	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c,,and 8	•	9	148,347	
		10	Grants and	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	•	10	135,925	
	(0	11	Selerice o	ther compensation, and employee penefits		11		
	se	12 13	Drofession	al fees and other payments to independent/pontractors		13		
	Expenses	1				14		
	Ξ×Ε	15	Printing of	ublications, postage, and shipping	•	15	89	
	_	16	Other expe	when the state of	•	16	6,120	
		17	Total expe	enses. Add lines 10 through 16	<b>▶</b>	17	142,134	
	S	18	Excess or	(deficit) for the year (Subtract line 17 from line 9)		18	6,213	
	set	19		or fund balances at beginning of year (from line 27, column (A)) (must agree wit			, , , , , , , , , , , , , , , , , , , ,	
	AS			r figure reported on prior year's return)		19	65,265	
	Net Assets	20		iges in net assets or fund balances (explain in Schedule O)		20	49,126	
	Ž	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	▶	21	120,604	

For Paperwork Reduction Act Notice, see the separate instructions. (HTA)

Form **990-EZ** (2010)

ı aı	Check if the organization used Schedule O t	•	his Part II			<b>X</b>
			(A) Begir	ning of year		(B) End of year
22	Cash, savings, and investments			440,957	22	473,469
23	Land and buildings				23	
24	Other assets (describe in Schedule O)			424	24	325
25 26	Total assets			441,381 376,116	25 26	473,794 353,190
27	Net assets or fund balances (line 27 of colum			65,265		120,604
	rt III Statement of Program Service Acc					Expenses
	Check if the organization used Sched					ired for section
Wha	at is the organization's primary exempt purpose?				,	)(3) and 501(c)(4) izations and section
	cribe what was achieved in carrying out the organization			escribe	4947(	a)(1) trusts, optional
	ervices provided, the number of persons benefited, and	other relevant information for each	ch program title		for otl	ners)
28	SEE ATTACHED STATEMENT					
	(Create the second of this amount	 int includes foreign grants, ch	ack boro			
29	· · · · · · · · · · · · · · · · · · ·				28a	136,373
23						
		ınt includes foreign grants, ch	eck here	▶ 🔲	29a	
30						
				· · · · · · · · · · · · · · ·		
	<u> </u>	ınt includes foreign grants, ch			30a	
31	Other program services (describe in Schedule O					
		int includes foreign grants, ch			31a	100.070
	Total program service expenses. (add lines 28 rt IV List of Officers, Directors, Trustees, an				32	136,373
Га	Check if the organization used Schedule (					
	- Oncold if the organization about contours of	(b) Title and average	(c) Compensation	(d) Contributi		(e) Expense
	(a) Name and address	hours per week	(If not paid,	employee benefi	•	account and
	RISTIAN H. EIDT	devoted to position  Title DIRECTOR	enter -0)	deferred compe	ensation	other allowances
	JMBLEBEE LANE NORWALK CT 06851	Hr/WK 10.00	o			
	EN M. EIDT	Title DIRECTOR	·			
	JMBLEBEE LANE NORWALK CT 06851	Hr/WK 2.00	0			
	RISTIAN J. EIDT	Title DIRECTOR		·		
	HISTLE LANE WILTON CT 06897	Hr/WK2.00	0			
CAF	ROLYN H. STRAZZA	Title DIRECTOR				
1 C	DACHMANS COURT NORWALK CT 06850	Hr/WK 1.00	0	ļ		
	TER GRACE CHRISTINE	_ Title DIRECTOR	_			
	84TH STREET BROOKLYN NY 11209	Hr/WK 1.00	0			
	TER GRACE ANN	Title DIRECTOR				
40-3	34 196TH STREET FLUSHING NY 11358	Hr/WK 1.00	0			
		_ Title Hr/WK .00	o			
		Title		L		
	• • • • • • • • • • • • • • • • • • • •	Hr/WK .00	0			•
_		Title				
		Hr/WK .00	0			
		Title				
		Hr/WK .00	0			
		_ Title				
		Hr/WK .00	0			
		_ Title				
		Hr/WK 00	. 0			
		_ Title				
		THr/WK .00	1 0	Į.		I

Par	Other Information (Note the statement requirements in the instructions for Part V.)  Check if the organization used Schedule O to respond to any question in this Part V			. Г
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed			
24	description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O (see instructions)	34		x
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but	04		<u> </u>
	not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.		,	
а	Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4),			ļ
	501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?	35b		Х
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36	ļ	X
	Enter amount of political expenditures, direct or indirect, as described in the instructions.▶ 37a	<b>_</b>		
	Did the organization file Form 1120-POL for this year?	37b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	- <u></u> -	<b> </b> -	<del></del>
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
	If "Yes," complete Schedule L, Part II and enter the total amount involved	┥ '		
39	Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on line 9			1
	Gross receipts, included on line 9, for public use of club facilities	┪	,	
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under:	┦ '		
	section 4911 ► ; section 4912 ► ; section 4955 ►		_	
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	Sp.	\$.	'X. 9.
	organization managers or disqualified persons during the year under sections 4912,	1		
	4955, and 4958	.	,	
a	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c		ļ ,	
	reimbursed by the organization		_	
·	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed.	100	L	1
	The organization's books are in care of ► CHRISTIAN H. EIDT Telephone no. ►	203-8	46-971	18
	Located at ► 7 BUMBLEBEE LANE City NORWALK ST CT ZIP + 4 ► 06			· · · · ·
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority	201-140	/ <u></u>	
_	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		X
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			ļ
	and Financial Accounts.	<b></b>		,
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		<u> </u>
	If "Yes," enter the name of the foreign country:			_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶∟
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			
	District the second		Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	4-	<del> </del>	<del> </del>
L	completed instead of Form 990-EZ	44a	ļ	X
D	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	AAL		-
^	Did the organization receive any payments for indoor tanning services during the year?	44b 44c	-	X
	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	776	<b></b>	<del>  ^</del>
-	explanation in Schedule O	44d	· · · · · · · · · · · · · · · · · · ·	X

Form 99	0-EZ (2010)	KEVIN M.	EIDT SCHO	DLARSHI	P FUND						_	06-14736	26	Page 4
					-					- X - G			Yes	No
45	ls any related org	anization a	controlled e	entity of th	ne organizatior	n within t	he me	aning o	of section 51	2(b)(1	3)?	45		X
а	Did the organizat	on receive	any paymen	nt from or	engage in any	y transac	tion w	ith a co	ontrolled ent	ity with	in the			
1	meaning of section	on 512(b)(1	3)? If "Yes,"	Form 99	0 and Schedul	le R may	need	to be c	ompleted in	stead	of			
	Form 990-EZ											45a		Х
46	Did the organizati	ion engage	, directly or i	ndirectly,	in political cai	mpaign a	ctivitie	es on b	ehalf of or in	1 орро	sition			
1	to candidates for	public offic	e? If "Yes,"	complete	Schedule C,	Part I		<u> </u>	<u> </u>			46		X
Part \	VI Section 5	01(c)(3) o	rganizatio	ns and s	section 4947	'(a)(1) n	onex	empt (	charitable	trust	only. A	All section	1	
		•			17(a)(1) none	•	harita	able tru	ists must a	ınswe	questio	ns 47–49	€	
		•			es 50 and 51.									_
	Check if the	ne organiz	ation used	Schedul	e O to respor	nd to an	y que	stion ir	n this Part	VI				. <u></u>
													Yes	No
47	Did the organizati	ion engage	in lobbying	activities'	? If "Yes," com	plete Sc	hedule	e C, Pa	rt II			47		X
48	ls the organizatio	n a school	as described	d in section	on 170(b)(1)(A	)(ii)? <b>If</b> "\	es," c	complet	e Schedule	Ε		48		Х
	Did the organizati				•		ated o	rganiza	ition?			49a		X
	If "Yes," was the				•							49b		<u> </u>
	Complete this tab		•	_	•	•	-	•		-	-		•	
	employees) who	each receiv	ed more tha	ın \$100,0		sation frond nd average	m the		zation if the impensation		ontributions to		) Expens	<u> </u>
	(a) Name and addre		oloyee paid more	•	hours p	er week		(6, 5)	inpondation	employe	e benefit plan	s& ào	count ar	nd
Name		an \$100,000			Title	to position				deterre	d compensate	on othe	r allowar	nces
City	140116	Str ST	ZIP		Hr/WK		.00							
Name		Str			Title						_ <del>-</del>	<del>-  </del>		
City		ST	ZIP		Hr/WK		.00			ŀ				
Name		Str			Title									
City		ST	ZIP		Hr/WK		.00							
Name		Str			Title									
City		ST	ZIP		Hr/WK		.00							
Name		Str			Title									
City		ST	ZIP	<del></del>	Hr/WK		.00			<u> </u>				
	Total number of c		•			▶.								
	Complete this tab		-	-	-		-		ractors who	each	received	more than	1	
	\$100,000 of com				. If there is nor paid more than \$1		<u>"INONE</u>	<u>∍.</u> "	(b) Turn	e of serv		(a) Co.		
Name		ina address or	Str	ii contractor	paid mole than \$1	00,000			(b) Typ	e or serv	ice	(6) 001	mpensati	<u> </u>
City	140116		ST		ZIP									
Name	· · · · · · · · · · · · · · · · · · ·		Str											
City			ST		ZIP									
Name			Str											
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City			ST		ZIP				<del> </del>	_				
Name			Str											
City	Tatal acceptance of a		ST		ZIP	6400								
	Total number of o Did the organizati				_				ond 4047/o	\/1\				
	nonexempt charit						_		•			► X Y	$\Box$	No
	penalties of perjury, lef, it is true, correc													ige
		Thush		dt						l			nougo.	
Sign	Signature	<del></del>	w 11.ac	ar .						Date	- 5/	/12/2011		
Here	I . *	/	T, DIRECTO	)B						Date				
		int name and to		<u></u>										
	Print/Type pre			Prepare	er's signature		Date		Check if		PTIN			
Paid	.			SELF.	-PREPARED F	RETURN			self- employed					
Prepar	i Firm's name	_ ▶	-	,			-		1	Firm's I	IN ▶			
Use O	Firm's addres	s Þ								Phone				
Mav th	e IRS discuss thi	s return wit	h the prepar	er shown	above? See i	nstructio	ns					▶ TY	es 🗍	No
	4100400 (111		p. opui	3. 3							<del>- · · ·</del>		90-ÉZ	
												roim <b>3</b>	JU-LZ	- (2010)

## SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

►See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► Se

(EV	IN M.	EIDT SCHO	LARSHIP FUND	)						06-14	<del>173626</del>		
Pa	rt I	Reason	for Public Ch	arity Status (All org	anizatior	ns must c	complete	this part	t.) See in	struction	18.		
he	o <u>rga</u> r	nization is not	a private found	ation because it is: (Fo	or lines 1	through 1	1, check	only one l	oox.)				
1	Ш	A church, co	nvention of chu	rches, or association of	of churche	es describ	ed in <b>sec</b>	tion 170(	b)(1)(A)(i	i).			
2		A school des	scribed in <b>sectio</b>	on 170(b)(1)(A)(ii). (At	tach Sche	edule E.)							
3		A hospital or	r a cooperative h	nospital service organi	zation des	scribed in	section	170(b)(1)	(A)(iii).				
4			esearch organiza	ation operated in conju ate:	inction wit	th a hospi	tal descri	bed in <b>se</b>	ction 170	)(b)(1)(A)	(iii). En	ter the	•
5		An organizat	tion operated for	r the benefit of a collect (Complete Part II.)	ge or univ	ersity owr	ned or ope	erated by	a govern	mental ur	nit desc	rıbed	
6	П			ernment or governme	ntal unit d	escribed i	in <b>sectio</b> i	n 170(b)(¹	1)(A)(v).				
7		An organizat	tion that normall	ly receives a substanti	al part of					or from th	e genei	ral pub	lic
8					•	omplete f	Part II.)						
9	X	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  X  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)											
10		An organizat	tion organized a	nd operated exclusive	ly to test f	for public	safety. So	ee <b>sectio</b>	n 509(a)(	4).			
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  a Type I b Type II c Type III-Functionally integrated d Type III-Other												
е	Ш	persons other		y that the organization on managers and othe 2).			-	-	-		-		ion
f				a written determination	n from the	IRS that	it is a Tvr	e I. Type	II. or Typ	e III supp	ortina		
		_	, check this box										. $\square$
g		Since Augus	st 17, 2006, has	the organization acce	pted any	gift or con	tribution f	from any	of the				
		following per											
				or indirectly controls,							<u> </u>	Yes	No
				verning body of the su person described in (i		-					11g(i)	-	
		• •	=	ty of a person describe	•						11g(ii) 11g(iii)	<del>                                     </del>	
h				ation about the suppor						• • •	i ig(iii)	1	L
(i		of supported anization	(ii) EiN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the o		(v) Did y the organ col (i)	ou notify nization in of your port?	organiza (i) organi	Is the tion in col ized in the S?		) Amoun support	
				(**************************************	Yes	No	Yes	No	Yes	No	1		
A)													
					ļ			ļ					0
B)													0
C)													0
D)		·											0
E)											ļ		0
Γota	ıl								1				0

Schedule A (Form 990 or 990-EZ) 2010 KEVIN M. EIDT SCHOLARSHIP FUND 06-1473626 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . . 0 Tax revenues levied for the organization's benefit and either paid to or expended on ıts behalf . . . . . . . . . . . . . . 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . . Total. Add lines 1 through 3 . . . . . 0 0 0 ol 0 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2%

	of the amount shown on line 11,	ŀ					
	column (f)						
6	Public support. Subtract line 5 from line 4.						0
Sect	ion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
7	Amounts from line 4	О	o	О	0	C	0
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar			•			1
	sources				:		0
9	Net income from unrelated business						
	activities, whether or not the business is						
	regularly carried on						0
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	0					0
11	Total support. Add lines 7 through 10.	'					0
12	Gross receipts from related activities, etc. (		•			12	·
13	First five years. If the Form 990 is for the o						
	organization, check this box and stop here						<u></u> ▶∐_
Sect	tion C. Computation of Public Support						
14	Public support percentage for 2010 (line 6,					14	0.00%
15	Public support percentage from 2009 Sche	dule A, Part II, I	ine 14			15	0.00%
16a	33 1/3% support test-2010. If the organization	ation did not che	eck the box on	line 13, and lin	ne 14 is 33 1/3°	% or more, ch	eck this box
	and stop here. The organization qualifies a		•				
b	33 1/3% support test-2009. If the organization				nd line 15 is 3	3 1/3% or mor	e, check this
	box and stop here. The organization qualif	ies as a publicly	supported org	ganization .			▶∐
17a	10%-facts-and-circumstances test-2010	. If the organiza	tion did not ch	eck a box on lir	ne 13, 16a, or	16b, and line 1	4
	is 10% or more, and if the organization mee	ets the "facts-ar	nd-circumstanc	es" test, check	this box and s	stop here. Exp	lain ın
	Part IV how the organization meets the "fac	ts-and-circums	tances" test. T	he organizatıor	n qualifies as a	publicly supp	orted
	organization						▶□
b	10%-facts-and-circumstances test-2009.	. If the organiza	tion did not ch	eck a box on lir	ne 13, 16a, 16t	o, or 17a, and	line
	15 is 10% or more, and if the organization i	meets the "facts	s-and-circumst	ances" test, ch	eck this box ar	nd <b>stop here</b> .	Explain in
	Part IV how the organization meets the "fac	ts-and-circums	tances" test. T	he organization	n qualifies as a	publicly	
	supported organization						▶□
18	Private foundation. If the organization did	not check a box	x on line 13, 16	6a, 16b, 17a .o	r 17b, check th	is box and se	_ <b>_</b> _
	instructions			. ,	,		

### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants.")	200,242	_113,26 <u>3</u>	104,530	116,401	115,042	649,478
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished					·	
	in any activity that is related to the			40.000			0.505
•	organization's tax-exempt purpose	-536	-2,002	12,836	-5,071	1,298	6,525
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on						
_	its behalf	0		-			0
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge	o					0
6	Total. Add lines 1 through 5	199,706	111,261	117,366	111,330	116,340	656,003
7a	Amounts included on lines 1, 2, and 3	,					
	received from disqualified persons .	21,843	18,930	18,578	35,452	27,655	122,458
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year .						0
_	Add lines 7a and 7b	21,843	18,930	18,578	35,452	27,655	122,458
8	Public support (Subtract line 7c from line 6)						533,545
	tion B. Total Support	( ) 0000	(1.) 0007	(-) 0000	(4) 0000	(-) 0040	40 T
Cale	endar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
9	Amounts from line 6	199,706	111,261	117,366	111,330	116,340	656,003
10a	Gross income from interest, dividends,						
	payments received on securities loans,	54 700	47.007	45.000	05.000	00.440	404 007
b	rents, royalties and income from similar sources Unrelated business taxable income (less	51,792	47,967	45,808	25,990	23,410	194,967
b	section 511 taxes) from businesses						
	acquired after June 30, 1975 .						0
С	Add lines 10a and 10b	51,792	47,967	45,808	25,990	23,410	194,967
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV.)	o	0	۰ ا	l o	o	0
13	Total support. (Add lines 9, 10c, 11,				<u> </u>		
	and 12.)	251,498	159,228	163,174	137,320	139,750	850,970
14	First five years. If the Form 990 is for the organization, check this box and stop here			or fifth tax year a		c)(3)	▶□
Sec	tion C. Computation of Public Support	Percentage	_				
15	Public support percentage for 2010 (line 8, column		e 13, column (f)	)		15	62.70%
16	Public support percentage from 2009 Schedule A,					16	62 28%
Sec	tion D. Computation of Investment Inco	ome Percenta	age			-	_
17	Investment income percentage for 2010 (line 10c,		-	umn (f))		17	22.91%
18	Investment income percentage from 2009 Schedu					18	24.46%
19a	33 1/3% support tests-2010. If the organization of						
	not more than 33 1/3%, check this box and stop h	-			_		. <b>▶</b> X
b	33 1/3% support tests-2009. If the organization of line 18 is not more than 33 1/3%, check this box a						▶□
20	Private foundation. If the organization did not che		=		-	=	··· 【片
20	Fireate iounication. It the organization did not one	on a box on mile	ı <del>-ı</del> , ı∂a, ∪l 180,	CHECK HIS DOX 9	ma see mstructio	nı <b>o</b> .	· 📂 [ ]

Schedule A (Form	990 or 990-EZ) 2010 KEVIN M. EIDT SCHOLARSHIP FUND	06-147 <u>3626</u>	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required	by Part II, line 1	0;
·····	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional instructions).		
		•	
			•
		••••••	

#### **SCHEDULE G** (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

	Revenue Service	► A	ttach to Form 990	or Form 990-E	Z. ►See	separate instructions.		Inspection
	of the organization	* DOLUD 5: 11:5					Employer identificat	
KEVII	N M. EIDT SCHOL		amplete if the	orgonizati	on onewa	ered "Yes" to Forn	06-14	
Par		EZ filers are not	•	-		ered res to Forn	ii 990, Part IV, iiri	e 17.
1						ving activities. Ched	ck all that apply.	
а	X Mail solicitati					of non-government		
b	Internet and	email solicitations		f Sc	licitation of	of government gran	ts	
С	Phone solicit	ations		g X Sp	ecial fund	Iraising events		
d	In-person so	licitations						
2a	Did the organiza	tion have a written	or oral agreem	ent with an	y individu	al (including officers	s, directors, trustee	s or
	key employees li	sted in Form 990,	Part VII) or ent	ity in conne	ction with	professional fundra	aising services?	Yes X No
b					isers) pur	suant to agreemen	ts under which the	fundraiser is
	to be compensat	ed at least \$5,000	by the organiz	ation.				
			T	1		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	(i) Name and addres	s of individual		(iii) Did fund		(iv) Gross receipts	(v) Amount paid to (or retained by)	(vi) Amount paid to
	or entity (fund		(ii) Activity	custody or contribu		from activity	fundraiser listed in	(or retained by) organization
		<del></del>		Yes	No		col (i)	
1				163	140			
				<u> </u>		0	0	0
2								
						0	0	0
3						0	0	0
4							0	0
						0	0	0
5	-	-						
	<del></del>			1		0	0	0
6							0	0
7				<del>                                     </del>		0	0	0
						0	0	0
8								
						0	0	0
9								•
10				+		0	0	0
						o	o	0
Total		<u> </u>		<u> </u>	▶	0	0	0
3		-	tion is registere	ed or licens	ed to solic	it contributions or h	as been notified it	is exempt from
СТ	registration or lic	_						
.91		• • • • • • • • • • • • • • • • • • • •						

Part II

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported

more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events **BENEFIT DINNER INUAL GOLF BENEI** NONE (add col (a) through col (c)) (event type) (event type) (total number) Revenue Gross receipts . . . . 86,422 13,309 99,731 Less: Charitable contributions . . . . . . 0 70,447 9,034 79,481 Gross income (line 1 minus line 2) . . 15,975 4,275 0 20,250 Cash prizes . . . . . . 0 100 0 100 553 <u>1,193</u> 0 Noncash prizes . . . . . 1,746 Direct Expenses 0 0 Rent/facility costs . . . . 3,599 3,599 9,936 0 600 Food and beverages . . . 10,536 2,000 Entertainment . . . . 2,000 581 Other direct expenses . . 390 971 Direct expense summary. Add lines 4 through 9 in column (d) . . . . . . . . . 18,952) Net income summary. Combine line 3, column (d), and line 10. 1,298 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more Part III than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue . . . . . 0 Direct Expenses 2 Cash prizes . . . . . 0 Noncash prizes . . . . . Rent/facility costs . . . . 0 Other direct expenses . Yes Yes Yes % Volunteer labor . . . No Direct expense summary. Add lines 2 through 5 in column (d) 0) Net gaming income summary. Combine line 1, column d, and line 7. . . . . . . . . . . . . . . . 0 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . b If "Yes," explain:

Scried	tile d (1 dilli 950 di 950-E2) 2010 REVIIN M EIDT SCHOLARSHIP FOND	UO	14/3	020 1	Page 3
11	Does the organization operate gaming activities with nonmembers?			es 🔲	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		<b>□</b> Y	es 🔲	No
13	Indicate the percentage of gaming activity operated in:				
<b>a</b>	· ·	13a			<u>%</u>
14	An outside facility	13b	L		%
1~	and records:	•			
	Name ▶				
	Address ▶				
15a	Does the organization have a contract with a third party from whom the organization receives gaming		,		
	revenue?		Y	es	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ 0 and the amount of gaming revenue retained by the third party ▶ \$ 0				
C	If "Yes," enter name and address of the third party:				
	Name ▶				
	Address ▶				
16	Gaming manager information:				
	Name ▶				
	Gaming manager compensation ► \$0				
	Description of services provided				
	Director/officer Employee Independent contractor				
17 a b	Mandatory distributions:  Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year		<u></u> Y	es 🗌	<b>No</b> 0
Par		art I.	line 2	b. colu	
	(iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete provide any additional information (see instructions).	-			
	•••••••••••••••••••••••••••••••••••••••				

#### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047
2010
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection
Employer identification number

KEVIN M. EIDT SCHOLARSHIP FUND 106-14/3626	
Form 990-EZ, Part I, Line 10, Grants Paid: Activity: , Grantee: , Cash Grant: 135,925,	
Relationship:	
Form 990-EZ, Part I, Line 16, Other Expenses: Supplies: 211	
Form 990-EZ, Part I, Line 16, Other Expenses: INVESTMENT EXPENSES: 5,761	
Form 990-EZ, Part I, Line 16, Other Expenses: NORWALK HIGH SCHOOL PERPETUAL SCHOLARSHIP	
PLAQUE: 148	••••
Form 990-EZ, Part I, Line 20, Net Assets: CHANGE IN UNREALIZED APPRECIATION OF INVESTMENTS:	
26,201	
Form 990-EZ, Part I, Line 20, Net Assets: CHANGE IN SCHOLARSHIPS PAYABLE: 22,925	
Form 990-EZ, Part II, Line 24, Other Assets: PREPAID EXPENSES: Beginning of year: 422, End of	
year: 325	
Form 990-EZ, Part II, Line 24, Other Assets: ALL OTHER: Beginning of year: 2, End of year: 0	
Form 990-EZ, Part II, Line 26, Liabilities: ACCRUED SCHOLARSHIPS PAYABLE: Beginning of year:	
376,115, End of year: 353,190	
Form 990-EZ, Part II, Line 26, Liabilities: OTHER: Beginning of year: 1, End of year: 0	
	•••••
	••••

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization	Employer identification number
KEVIN M. EIDT SCHOLARSHIP FUND	06-1473626

,	Contributions	1	35,561
	Noncash contributions	2 —	<del>-</del>
	Membership dues and assessments (contributions from the public)	3 —	
	Government contributions (grants)		
	Commercial co-venture		
	Special events contributions (Line 6 - Special Events)		
	Associated organization contributions		
	·	8	
)		9	
)		10	
	Total	11	115.042
10		10 11	_
		••	110,042
	rt I, Line 4 (990-EZ) - Investment Income	1	
1	rt I, Line 4 (990-EZ) - Investment Income Interest on savings and temporary cash investments		3,080
<u>a</u>	rt I, Line 4 (990-EZ) - Investment Income Interest on savings and temporary cash investments	2 _	3,080
<u>a</u>	rt I, Line 4 (990-EZ) - Investment Income Interest on savings and temporary cash investments	<sup>2</sup> / <sub>3</sub>	3,080

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	<b>Than Inventory</b>	
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	Gain/Loss	
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	(III ) ) ) (III ) (III )													
								Totals.	Gross	SS	Cost,	Cost, other		•
									sales	SS	basis and	basis and expenses		•
							Public	Public Securities		18,724		31,874		
							Non-Public Securities	Securities		21,747		0		•
							0	Other sales		0		0		
		Check if	Check if Check if									Expense		
		gain/loss is	gain/loss is	Check if					_	Cost or o	Cost or other basis	of sale and		
		from sale	from sale from sale of	purchaser					!	(Enter one	(Enter one field only)	cost of		
		of public	of public non public	is a		Date	Acquisition	Date	Gross sales	_	Donatad	Improve-		Description of
Index	Description	securities	securities	business	Purchaser	acquired	method	plos	brice	Cost	value	ments	Depreciation	Basis Method
-	E*TRADE SECURITIES	×							18,724	31,874				
2	RAM MANAGEMENT FUND		×						21,747	0				
3														
4														:
သ														
9														
7														
8														
6														
10														

Part	Part II (Sch G (990/990EZ)) - Events	99,731	79,481	20,250	100	1,746	3,599	10,536	2,000	1,76
		Line 1	Line 2	Line 3	Line 4	Line 5	Line 6	Line 7	Line 8	Une 9
_			Less	Gross income						
			(Charitable	(line 1 minus		Noncash	Rent/facility	Food and		Other direct
	Event type	Gross receipts	contributions)	line 2)	Cash prizes	prizes	costs	beverages	Entertainment	expenses
-	ANNUAL BENEFIT DINNER DANCE	86,422	70,447	15,975		553		966'6	2,000	. 581
7	ANNUAL GOLF BENEFIT	13,309	9,034	4,275	100	1,193	3,599	009		390
က				0						
4				0						
2				0						
9				0						
7				0						
8				0						
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15				0						
16				0						
17				0						
18			•	0						1
19				0						
20				0						

# KEVIN M. EIDT SCHOLARSHIP FUND 06-1473626 STATEMENT TO 2010 FORM 990EZ Part I - Line 10 / Part II - Column B, Line 26 / Part III - Line 28

THIS ORGANIZATION S PRINARY EXEMPT PURPOSE IS TO STIMULATE, PROMOTE, DEVELOP, AND SUSTAIN THE PUBLIC GOOD BY ACKNOWE, EDGING AND SUPPORTING EDUCATIONAL ADVANCEMENT AND COMMITMENT TO COMMUNITY SERVICE THROUGH SCHOLARSHIPS.

GRANTS	123,12010	221.250	900'1	97200	7,878	۰	(1,435)	86.	•	•	238,190		115,000	353,190			
8 8	TOTAL GRANTS 12	112,500	4,000	927	8,375	0	9	900 -	1,000,1	900	135,925	135,825		ı		40,000 30,000 27,600 12,600 12,600 1,700 1,000 1,000 1,000	135,628
NSES (B)							1,000				000'1	ı					11
2010 PROGRAM SERVICE EXPENSES (B)	GRANTS	97,500	2,000	3 750	4,875						108,125				СНООГ	CTICUT RSTTY	
2010 PROGR/	2010 GRANTS	15 000	2,000	95	95		97900	1,000	1,000	000,1	26,800		•		2010 GRANTS PAID BY SCHOOL	BOSTOW COLLEGE CEORGETOWN COLLUBRA COLLUBRA MILLAM & MARY THETS LUNKERSTY STRAFE UNIVERSITY STRAFE UNIVERSITY STRAFE UNIVERSITY STRAFE UNIVERSITY BRY ANT COLLEGE FARRELD UNIVERSITY UNIVERSITY UNIVERSITY UNIVERSITY	TOTAL GRANTS PAID
Clippent VEAD	GRANTS AWARDED (A)	100,000	2,000	900°E	4,000		000'9	000'1	900'1	000'1	118,000	DLARSHIPS PALD	2011 SCHOLARSKIPS ANNOUNCED BUT NOT PAID	ACCRUED SCHOLARSHIPS PAYABLE @ 12/31	KI.		J.
		RECOGNIZED DEMONSTRATED ACHEVEMENT BY A GRADUATING NORWALK HIGH SCHOOL SCHOOL SCHOOL WITH AREAS OF ACADEMICS, ATHLETICS, THE ARTS, AND COMMINIATY SERVICE. ZOID GRANT WAS A FOUR YEAR SCHOLARSHIP TO TUFTS UNIVERSITY	RECOCNIZED DEMONSTRATED ACKIEVEMENT BY A GRADUATING NORWALK HIGH SCHOOL SENIORS IN THE AREAS OF ACADEBINGS, ATHLETICS, THE ARTS, SADE COMMININT SERVICE. 2010 GRANT WAS FOR A ONE TIME SCHOLARSHIP TO BOSTON COLLEGE.	RECOCNIZED A GRADUATING SENIOR WHO AS A MEMBER OF THE NOTRWALK HIGH SCHOOL MARCHING BAND, ACHIEVED THE HIGHEST FOUR YEAR GRADE POUT YREFARE. ZOTO GRANT WAS A FOUR YEAR SCHOLARSHIP TO BOSTON COLLEGE.	RECOCNIZED A GRADJATING SENIOR WHO AS A MEMBER OF THE ST JEROME (NORWALK, CIT) PARIESY YOU'TH GROUP, DELOKSTRATED COMMITMENT TO STRING YEAR SCHOLLARSHIP TO STOMEHILL COLLEGE.	RECOGNIZED SENIOR IN THE BOSTON COLLEGE LITUROX ARTS GROUP FOR DEMONSTRATE COGNIMENT OF THE BUSIC AND THEIR COMBUNITY GRAPES WAS ALCE AFTER 1281/2007.	RECOCNIZED JUNOR IN THE BOSTON COLLEGE CARROLL SCHOOL OF MANAGEMENT HONGIS PROCRAM WITH DEMONSTREED CACHEVERENT CACHEVERENT CACHEVER LEAGHSHIP AND SCHOOL SPRIT 2010 GRANT WAS A ONE THE SCHOOLARSHIP TO BOSTON COLLEGE.	RECOCHIZED GRADUATHG SENOR WHO AS A MEMBER OF THE MORWALK HOS SCHOLLYZZ BAND DEMONSTRATED COMMITMENT TO THE JAZZ PROGRAM ZOOS GRANT WAS A ONE THE SCHOLLARSHIP TO UNIVERSITY OF COMMECTICUT	RECOCAUZED GRADJATNIG BENIOR WHO AS A MEMBER OF THE MORWALK KICH SCHOOL OF CHESTRAND ANDER AN OLITSTANDING COCHRIBATION TO THE CACHESTRA PROGRAM 2010 GRANT WAS A ONE THE SCHOLARSHIP TO RP.	RECOCAVIZED GRAZUATING SENIOR WHO AS A WEMBER OF THE MORWALK KIEN SCHOOL WAZE MO UNITY MORNOG CONTRIBUTION TO THE SCHOOL AS A SCHOLAR MAD AN ATHLETE. FOR OTHERS, 2010 GRANT WAS A ONE THE SCHOLARSHIP TO FARRELD UNIVERSITY		TOTAL 2010 SCHOLARSHIPS PAID	2011 SCHOLARSh	ACCRUED SCHOI	COLUMN REFLECTS THE VALUE OF THE SCHOLARSHIP AWARDED TO RECPIENTS DURING THE 2010 CALENDAR YEAR	PROGRAM SERVICE EXPENSE REFLECTS SCHOLARSHIP PAYMENTS MADE DURING THE 2010 CALENDAR YEAR	
	뛢	-	~		•	un	•	•	•	•					NOTES A	<u></u>	

# Kevin M. Eidt Scholarship Fund 06-1473626 2010 Form 990EZ Statement to Part III

The objective of the Fund is to recognize through scholarships demonstrated achievement across the spectrum of academics, arts, athletics, and community service. Scholarships are paid directly to the recipient's college or university. The 2010 scholarships supported by Kevin's Fund are:

- 1. \$100,000 to a graduating senior at Norwalk HS with demonstrated achievement across the spectrum of academics, arts, athletics, and community and religious service. In addition \$2,000 was made available, at the discretion of the Scholarship Selection Committee, to award the outstanding achievements of finalists for the Norwalk High School scholarship.
- 2. \$6,000 to a junior at Boston College in the School of Management Honors Program who has demonstrated the unique combination of academic achievement, character, leadership, and school spirit similar to Kevin's.
- 3. \$4,000 to a graduating senior in the St. Jerome parish youth group with demonstrated commitment to community and religious service.
- 4. \$3,000 to a graduating senior at Norwalk HS who as a member of the Marching Band achieved the highest cumulative grade point average similar to Kevin's accomplishment.
- 5. \$1,000 to a graduating senior at Norwalk HS who as a member of the Jazz Ensemble has demonstrated leadership and character similar to Kevin.
- 6. \$1,000 to a graduating senior at Norwalk HS who as a member of the Orchestra has made an outstanding contribution to the orchestra and has made themselves a role model for others.
- 7. \$1,000 to a graduating senior at Norwalk HS who has made an outstanding contribution to Norwalk High School both as a scholar and as an athlete.

Kevin's Fund grants scholarships to individuals with demonstrated achievements in academics, athletics, arts, and community and religious service. All scholarships are payable to accredited United States colleges or Universities. The Fund provides both one time awards and awards payable over a four year college career. To maintain the latter awards, the recipient must meet certain academic standards and conduct standards within their school and their community.

During 2010 Kevin's Fund announced the availability of \$115,000 in scholarships to the class of 2010. This brings the value of scholarships awarded by the Fund since its inception to over \$1,142,750 awarded to 87 individuals.

During the academic year commencing in the fall of 2010 Kevin's Fund is providing financial support to 17 students currently attending Columbia, Georgetown, Boston College (4), Tufts, Syracuse, San Francisco, Temple, Stonehill (2), Connecticut (2), Bryant, RPI, and Fairfield.

# KEVIN M. EIDT SCHOLARSHIP FUND 06-1473626 STATEMENT TO 2010 FORM 990EZ Part III ~ Line 28a ~ Expenses

Grants		135,925	
Grant related expenses		448	
Total Grants and Grant related expenses	Part III ~ Line 28a		136,373
Expenses related to income generation			5,761
Tatal Francisco	David Line 47		140 104
Total Expenses	Part I ~ Line 17		<u> 142,134</u>