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DLN: 93491133020791

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

For	cale	endar year 2010, or tax y	year beginning 01-	01-2010 , and	d end	ding 12-31-	2010	
G CI	neck a	Ill that apply Initial retu	_	n of a former public change			turn	
		undation					entification numb	er
нс	IBBS FA	MILY CHARITABLE TRUST				06-1602789		
Num	ber and	d street (or P O box number if mail is	not delivered to street addres	s) Room/suite		B Telephone nu	ımber (see page 10	of the instructions)
	9 MAIN			-, ,		(914) 273-530)	
						6 16 200 200 200 200		a, check here ▶ □
		n, state, and ZIP code AN, CT 068405608					application is pendin rganizations, check h	<u></u>
						D I. Toleigil o	iganizations, check ii	eie 🕨 j
		ype of organization Section					rganizations meeting re and attach comput	
		n 4947(a)(1) nonexempt charita ket value of all assets at end	JAccounting method			E If private fo	undation status was t	terminated
		from Part II, col. (c),	Other (specify)	r casii r Acc	ıuaı		n 507(b)(1)(A), chec	
		\$ 959,303	(Part I, column (d) mus	t be on cash basis.)			ation is in a 60-mont n 507(b)(1)(B), cheo	
Pa	rt I	Analysis of Revenue a total of amounts in columns (b), (in necessarily equal the amounts in the instructions)	c), and (d) may not	(a) Revenue and expenses per books	(b) N	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , rece	ived (attach schedule)					
	2	Check 🟲 🔽 if the foundation is not	required to attach Sch B					
	3	Interest on savings and tempo	orary cash investments	39,150		39,150		
Revenue	4	Dividends and interest from se	ecurities					
	5a	Gross rents						
	Ь	Net rental income or (loss)		4.654				
	6a	Net gain or (loss) from sale of		1,654				
	b	Gross sales price for all assets on line Capital gain net income (from				1,654		
	7 8	Net short-term capital gain .				1,054		
	9	Income modifications						
	10a	Gross sales less returns and allowance	1					
	ь	Less Cost of goods sold						
		Gross profit or (loss) (attach s						
	11	Other income (attach schedule	e)					
	12	Total. Add lines 1 through 11		40,804		40,804		
	13	Compensation of officers, direc	ctors, trustees, etc	0		0		0
92	14	Other employee salaries and v	vages					
ž	15	Pension plans, employee bene	fits					
<u>a</u>	16a	Legal fees (attach schedule).		l _ 				
	Ь	Accounting fees (attach sched		2,175		0		0
E G	C	Other professional fees (attac						
Ţ.	17	Interest						
Ē	18	Taxes (attach schedule) (see page 1	,					
₫	19	Depreciation (attach schedule Occupancy						
and Administrative Expenses	20 21	Travel, conferences, and meet						
	22	Printing and publications	•					
Ē	23	Other expenses (attach sched						
äti	24	Total operating and administra						
Operating		Add lines 13 through 23	-	2,175		0		0
ō	25	Contributions, gifts, grants pai	d	46,865				46,865
	26	Total expenses and disbursemen	ts. Add lines 24 and 25	49,040		0		46,865
	27	Subtract line 26 from line 12						
	a	Excess of revenue over expens	ses and disbursements	-8,236				
	ь	Net investment income (if neg				40,804		
	С	Adjusted net income (if negati	ve, enter - 0 -)					

)a	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year			f year
		Balance Sheets should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Va		(c) Fair Market Value
	1	Cash—non-interest-bearing	13,290		3,145	<u> </u>
	2	Savings and temporary cash investments	933,000	<u>`</u>	34,909	956,158
	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 (attach schedule) (see page 15 of the				
	_	instructions)				
	7	Other notes and loans receivable (attach schedule)				
اہ		Less allowance for doubtful accounts 🟲				
Á	8	Inventories for sale or use				
-	9	Prepaid expenses and deferred charges				
-	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis 🕨				
		Less accumulated depreciation (attach schedule) 🟲				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis 🟲				
		Less accumulated depreciation (attach schedule) 🟲				
	15	Other assets (describe 🟲)				
	16	Total assets (to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	946,290	ġ	38,054	959,303
	17	Accounts payable and accrued expenses				
	18	Grants payable]
αl	19	Deferred revenue]
[≧	20	Loans from officers, directors, trustees, and other disqualified persons]
	21	Mortgages and other notes payable (attach schedule)]
╛╽	22	Other liabilities (describe 🟲)]
]
	23	Total liabilities (add lines 17 through 22)	0		0	
		Foundations that follow SFAS 117, check here 🕨 🦵				
۸.		and complete lines 24 through 26 and lines 30 and 31.				
or Fund Balances	24	Unrestricted				
≅∣	25	Temporarily restricted				
8	26	Permanently restricted				
≅I		Foundations that do not follow SFAS 117, check here 🕨 🔽				
Ξ		and complete lines 27 through 31.			_	
	27	Capital stock, trust principal, or current funds	0			
ASSets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0		0	
اک	29	Retained earnings, accumulated income, endowment, or other funds	946,290	į	38,054	
	30	Total net assets or fund balances (see page 17 of the				
뒬		instructions)	946,290	Ġ	38,054	
	31	Total liabilities and net assets/fund balances (see page 17 of				
		the instructions)	946,290	Ġ	38,054	
Pa	rt II	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 (must ad	-p.p.		
-			(a), fille 30 (fildst agi		1	946,290
2		Enter amount from Part I, line 27a		_	2	-8,236
3		Other increases not included in line 2 (itemize)			3	0,230
, 1		Add lines 1, 2, and 3			4	938,054
5		Decreases not included in line 2 (itemize)			5	0
5		Total net assets or fund balances at end of year (line 4 minus line 5)—P			5	938,054
		, ,		ı	1	, .

	ind(s) of property sold (e g , re or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	ا(c) ك	ate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1a 50,000 CD REDEPMTION			Р	20	09-04-21	2010-06-22
b 50,000 CD REDEPMTION			Р	20	08-04-14	2010-06-22
С						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basıs kpense of sale		• •	or (loss)) mınus (g)
a 49,84			50,00	_		-152
b 51,80	6		50,00	0		1,806
С						
d						
е						
Complete only for assets shown	<u> </u>	·				(h) gain minus
(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	COI		less than -0-) or om col (h))
a	as 0112/31/09	Over C	cor (j), ir arry	+	200000 (11	-152
b						1,806
	+			+		1,500
<u> </u>	+			+		
d						
e		<u> </u>	D 17 1 7 3	+		
2 Capital gain net income or		If gain, also enter If (loss), enter -0-		. _		
3 Net short-term capital gair	ل n or (loss) as defined in sectioi		J	2		1,654
If gaın, also enter ın Part I If (loss), enter -0- ın Part I	, line 8, column (c) (see pages I, line 8	13 and 17 of the i	instructions)	}		
Part V Qualification Unde		adused Tax or	. Not Toyogtm	<u> </u>	<u> </u>	
-						
(For optional use by domestic private	e foundations subject to the se	ection 4940(a) tax	on net investment	incom	e)	
If section 4940(d)(2) applies, leave	this part blank					
Was the foundation liable for the sec If "Yes," the foundation does not qua				erıod?		┌ Yes ┌ No
1 Enter the appropriate amount in	each column for each year, se	ee page 18 of the 11	nstructions before	makıng	any entries	
(a) Base period years Calendar	(b) djusted qualifying distributions	(c) Net value of noncha	ntable-use assets		(d) Distribution	
year (or tax year beginning in) 2009	48,250		968,978		(col (b) divided	0 049795
2008	49,412		956,119			0 051680
2007	52,845		955,531			0 055304
2006	49,520		962,676			0 051440
2005	43,580		885,236			0 049230
2 Total of line 1, column (d).				2		0 257449
	for the 5-year base period—div		ne 2 by 5, or by	_		0 201 111
	undation has been in existence			3		0 051490
4 Enter the net value of nonc	harıtable-use assets for 2010	from Part X, line 5	5	4		
E Molton In Long A houlings 2						967,994
5 Multiply line 4 by line 3.				5		
				5		49,842
6 Enter 1% of net investmen	nt income (1% of Part I, line 27	7 b)		6		967,994 49,842 408
	nt income (1% of Part I, line 27	7b)	· · · · · ·			49,842

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			816
c	here Fand enter 1% of Part I, line 27b			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			816
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			816
6	C redits/P ay ments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 1,091			
ь	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			1,091
8	Enter any penalty for underpayment of estimated tax. Check here Tif Form 2220 is attached 8			8
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10			267
11	Enter the amount of line 10 to be Credited to 2011 estimated tax > 267 Ref unded > 11			0
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt partıcıpate or ıntervene ın any political campaign?	1a		No
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of			
	the instructions for definition)?	1b		No
	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.			
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers \blacktriangleright \$0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	_		
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
ь -	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
_	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 remain in the governing instrument?	6		No
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	_ -		
	instructions) ►CT			
ь	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	Yes	
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 on			
	page 27)? If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	110
	Website address ►N/A			<u> </u>
14	The books are in care of ►MICHAEL D HOBBS Telephone no ►(203)	966-	5091	
	Located at ▶249 MAIN STREET NEW CANAAN CT ZIP+4 ▶06840			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			<u> </u>
13	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over			
	a bank, securities, or other financial account in a foreign country?	16		No
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a dısqualıfıed person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes 🔽 No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2010?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b		
_		20		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3a	▶ 20, 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business			
Ja	enterprise at any time during the year?			
ь	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation			
,	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2010.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
ъ.	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			<u> </u>
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		No

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Pai	rt VIII-B Statements Rega	ardir	ng Activities for	Wh	ich Form 4720	May I	Be Required	(cont	inue	d)	
5a	During the year did the foundation	n pay	or incur any amoun	t to							
	(1) Carry on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 494	45(e))´	·	Yes	√ No		
	(2) Influence the outcome of any	spec	ıfıc publıc electıon (see	section 4955), or to	carry					
	on, directly or indirectly, any	vote	r registration drive?.								
	(3) Provide a grant to an individu	ıal for	travel, study, or oth	ner s	mılar purposes?		Γ	Yes	√ No		
	(4) Provide a grant to an organiz										
	ın section 509(a)(1), (2), or	(3), o	r section 4940(d)(2)? (s	ee page 22 of the in	structi	ons) [Yes	√ No		
	(5) Provide for any purpose othe										
	educational purposes, or for	the pr	evention of cruelty t	o ch	ıldren or anımals?.			Yes	✓ No		
b	If any answer is "Yes" to 5a(1)-	(5), dı	d any of the transac	tions	fail to qualify under	r the ex	xceptions desc	rıbed ın			
	Regulations section 53 4945 or	ın a c	urrent notice regard	ıng d	ısaster assıstance ((see pa	age 22 of the in	structi	ons)?	5b	
	Organizations relying on a currei	nt not	ice regarding disast	eras	sistance check here	e		. 🕨	_		
c	If the answer is "Yes" to question										
	tax because it maintained expen	dıture	responsibility for th	ne gr	ant [?]			Yes	_ No		
	If "Yes," attach the statement requ	ured E	y Regulations section	n 53.	4945-5(d).						
6a	Did the foundation, during the ye	ar, re	ceive any funds, dire	ctly	or indirectly, to pay	′					
	premiums on a personal benefit o	ontra	ct?				Г	Yes	√ No		
b	Did the foundation, during the ye	ar, pa	y premiums, directly	orı	ndırectly, on a perso	onal be	nefit contract?			6b	No
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year,	was tl	ne foundation a party	/ to a	prohibited tax shel	lter trai	nsaction? [Yes	√ No		
b	If yes, did the foundation receive	any	proceeds or have an	y ne	t income attributable	e to the	e transaction?			7b	
	Information Abou	t Of	ficers, Directors	s, Tı	ustees, Founda	ation	Managers, I	lighly	Paid	Empl	oyees,
	and Contractors										
1	List all officers, directors, trustee								ns).		
	(a) Name and address	(b)	Title, and average hours per week	٠ ،	c) Compensation If not paid, enter		l) Contributions ployee benefit ;		(e) E	xpense	account,
	(a) Name and address	de	evoted to position	(.	-0-)		eferred comper		otl	her allov	vances
MICH	AEL D HOBBS		STEE		0		•	0			0
249	MAIN STREET	0 00)								
NEW	CANAAN,CT 06840										
HAZE	L R HOBBS	_	STEE		0			0			0
	MAIN STREET	0 00)								
	/CANAAN,CT 06840			<u> </u>							
2	Compensation of five highest-paid If none, enter "NONE."	d emp	oloyees (other than	t hose	e included on line 1–	-see pa	age 23 of the in	structi	ons).		
	ii none, enter NONE.					Т	(d) Contribution	ns to			
(a)	Name and address of each emplo	yee	(b) Title, and aver hours per week	_	(c) Compensatio		employee be		(e) E	Expense	account,
	paid more than \$50,000		devoted to positi		(c) Compensatio	JII	plans and def		ot	her allov	wances
			<u>'</u>				compensati	on			
NON	IE		4								
			1								
									1		
			1								
Tota	I number of other employees paid	over	\$50.000					-			
	The second secon		, ,				• • •	•	Form	1 990- 1	PF (2010)

Part VIII Information About Officers, Directors, True and Contractors (continued)	ustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional service	ces (see page 23 of the instructions). If none, e	nter "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional service	es	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Includ organizations and other beneficiaries served, conferences convened, research papers		Expenses
1PLEASE NOTE THE FOUNDATION IS NOT INVOLVED IN ANY		0
PRIMARY PURPOSE IS TO SUPPORT, BY CONTRIBUTIONS, O	THER ORGANIZATIONS EXEMPT UNDER	
INTERNAL		
2 REVENUE CODE SECTION 501(C)(3)		0
3		
4		
Part IX-B Summary of Program-Related Investmen Describe the two largest program-related investments made by the foundation du		A mount
1	ming the tax year on lines I and 2	Amount
<u>-</u>		
2		
All other program-related investments See page 24 of the instruct	lons	
3		

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Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	958,164
b	A verage of monthly cash balances	1b	24,571
c	Fair market value of all other assets (see page 24 of the instructions)	1 c	0
d	Total (add lines 1a, b, and c)	1d	982,735
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	982,735
4	Cash deemed held for charitable activities Enter 1 $1/2\%$ of line 3 (for greater amount, see page 25		
	of the instructions)	4	14,741
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	967,994
6	Minimum investment return. Enter 5% of line 5	6	48,400
Par	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(
	foundations and certain foreign organizations check here 🕨 📗 and do not complete t	his pa	
1	Minimum investment return from Part X, line 6	1	48,400
2a	Tax on investment income for 2010 from Part VI, line 5 2a 816		
b	Income tax for 2010 (This does not include the tax from Part VI) 2b	_	
c	Add lines 2a and 2b	2c	816
3	Distributable amount before adjustments Subtract line 2c from line 1	3	47,584
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	47,584
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	47,584
Par	Qualifying Distributions (see page 25 of the instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	46,865
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
ь	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	46,865
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	46,865
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years	her the	<u> </u>

P	undistributed Income (see page	26 of the instruct	ions)		<u> </u>
		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1	Distributable amount for 2010 from Part XI, line 7				47,584
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only			0	
ь	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2010				
а	From 2005				
b	From 2006				
c	From 2007 6,098				
d	From 2008				
	From 2009				
f	Total of lines 3a through e	28,021			
4	Qualifying distributions for 2010 from Part				
	XII, line 4 🕨 \$ 46,865				
	Applied to 2009, but not more than line 2a			0	
b	Applied to undistributed income of prior years		0		
_	(Election required—see page 26 of the instructions) Treated as distributions out of corpus (Election				
Ĭ	required—see page 26 of the instructions)	0			
d	Applied to 2010 distributable amount				46,865
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2010	719			719
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	27,302			
b	Prior years' undistributed income Subtract line 4b from line 2b		О		
С	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 page 27 of the instructions		0		
e	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page 27 of the instructions			0	
•	Undistributed income for 2010 Subtract				
•	lines 4d and 5 from line 1. This amount must				
	be distributed in 2011				0
7	A mounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27	0			
۰	of the instructions)				
•	applied on line 5 or line 7 (see page 27 of the instructions)	0			
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a	27,302			
10	Analysis of line 9				
а	Excess from 2006	l			
b	Excess from 2007 6,098	l			
c	Excess from 2008 2,565				
	Excess from 2009				
е	Excess from 2010				

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines

factors

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year See Additional Data Table 46,865 **b** Approved for future payment

Fell CAVE	I-A Analysis of Income-Produc	ina Activitie	e			Page 1 2
Enter gros	s amounts unless otherwise indicated		siness income	Excluded by section	512, 513, or 514	(e)
-	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemp function income (See page 28 of
b	and contracts from government agencies riship dues and assessments on savings and temporary cash investments ands and interest from securities			14	39,150 1,654	
c d e 12 Subtota 13 Total. A (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Forksheet in line 13 instructions on page 2 EB Relationship of Activities to Explain below how each activity for wh the accomplishment of the organization page 28 of the instructions)		ulations) plishment of E ported in column (Exempt Purpose e) of Part XVI-A co	es entributed importa	40,804 ntly to

(2) Other assets	p(2) p(3) p(4) p(5) p(6) 1c t value	No No No No No No
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash	a(1) a(2) b(1) b(2) b(3) b(4) b(5) b(6) 1c t value	No No No No No No
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash	p(1) p(2) p(3) p(4) p(5) p(6) t value	No No No No No No
(1) Cash	p(1) p(2) p(3) p(4) p(5) p(6) t value	No No No No No No
(2) Other assets	p(1) p(2) p(3) p(4) p(5) p(6) t value	No No No No No No
b Other transactions (1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Ib (6) Performance of services or membership or fundraising solicitations. (8) It (9) Performance of services or membership or fundraising solicitations. (9) It (10) It the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing	p(1) p(2) p(3) p(4) p(5) p(6) 1c t value	No No No No No
(1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Loans or facilities, equipment, mailing lists, other assets, or paid employees. (8) Loans or facilities, equipment, mailing lists, other assets, or paid employees. (9) Loans or facilities, equipment, mailing lists, other assets, or paid employees. (1) Loans or facilities, equipment, mailing lists, other assets, or paid employees. (1) Loans of facilities, equipment, mailing lists, other assets, or paid employees. (2) Loans or facilities, equipment, mailing lists, other assets, or paid employees. (3) Loans of facilities, equipment, mailing lists, other assets, or paid employees. (4) If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market of the goods, other assets, or services given by the reporting foundation of the foundation received less than fair market vin any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing (d) Description of transfers, transactions, and sharing line of the goods, other assets, or services received (e) Line of the goods	p(2) p(3) p(4) p(5) p(6) 1c t value	No No No No No
(2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees. (8) It is answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market vin any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Description of transfers, transactions, and sharing. (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Description of transfers, transactions, and sharing.	p(2) p(3) p(4) p(5) p(6) 1c t value	No No No No No
(3) Rental of facilities, equipment, or other assets	o(3) o(4) o(5) o(6) 1c t value	No No No No
(4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. 1b. (c) Sharing of facilities, equipment, mailing lists, other assets, or paid employees. 1 d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market vin any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Description of transfers, transactions, and sharing. (d) Description of transfers, transactions, and sharing. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations.	o(4) o(5) o(6) 1c t value	No No No
(5) Loans or loan guarantees	o(5) o(6) 1c t value value	No No No
(6) Performance of services or membership or fundraising solicitations	t value	No No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c t value value	No
d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market vin any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing	t value value	
of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market vin any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing the column (d) Description of transfers, transactions, and sharing transactions (d) Description of transfers, transactions (d) Description of transfers (d) Description of transfers (d	/alue	ments
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations	g arrange	ments
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	Yes	I ✓ No
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statem	nents, a	nd to
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or based on all information of which preparer has any knowledge L ****** 2011-05-09 L *******	fiducia	ry) ıs
Signature of officer or trustee Date Title		
	TIN	
Check if self-	1 114	
Preparer's SAM BURRUANO CPA Signature 2011-05-09		
BURRUANO DOLAN LLP Firm's name BURRUANO DOLAN LLP 200 BUSINESS PARK DRIVE - STE 307		
200 BUSINESS PARK DRIVE - STE 307		
Firm's address F ARMONK, NY 10504 Phone no (914) 2	73-53	00

Software ID: Software Version:

EIN: 06-1602789

Name: HOBBS FAMILY CHARITABLE TRUST

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (nome of pusiness)	or substantial contributor	,		
a Paid during the year				
ALZHEIMERS ASSOCIATION 2075 SILAS DEANE HWY STE 100 ROCKY HILL,CT 06037	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	5,000
AMERICAN INSTITUTE OF PHILANTHROPY 3450 N LAKE SHORE DR STE 2802 CHICAGO,IL 60657	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST 79TH ST NEW YORK,NY 10024	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	195
AMERICARES 88 HAMILTON AVENUE STAMFORD,CT 06902	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	250
ARC - CONNECTICUT REGION 209 FARMINGTON AVENUE FARMINGTON,CT 06032	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	500
BLUE JAYS HOLIDAY MAGIC 3400 N CHARLES ST 2ND FL BALTIMORE, MD 21218	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	1,000
BRUCE MUSEUM 1 MUSEUM DRIVE GREENWICH,CT 06830	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	60
DAVIDSON COLLEGE BOX 7173 DAVIDSON,NC 28035	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	1,000
FAIRFIELD CTY COMMUNITY FOUNDATION 383 MAIN AVENUE NORWALK,CT 06851	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	1,000
FAMILY CENTERS 40 ARCH STREET PO BOX 7550 GREENWICH,CT 06836	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	3,000
FAMILY REENTRY 9 MOTT AVENUE STE 104 NORWALK,CT 06850	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
FIRST PRESBYTERIAN CHURCH 178 OENOKE RIDGE NEW CANAAN,CT 06840	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	2,700
FUTURE 5 135 ATLANTIC STREET STAMFORD,CT 06901	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	250
GETABOUT INC PO BOX 224 NEW CANAAN,CT 06840	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
GOUCHER COLLEGE 1021 DULANEY VALLEY ROAD BALTIMORE, MD 21204	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	2,500
Total				46,865

cipient is an individual, ow any relationship to by foundation manager substantial contributor APPLICABLE APPLICABLE APPLICABLE	Foundation status of recipient 501C3 501C3	Purpose of grant or contribution UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION	A mount 100
APPLICABLE APPLICABLE APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION UNRESTRICTED UNRESTRICTED	
APPLICABLE APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION UNRESTRICTED UNRESTRICTED	
APPLICABLE		CONTRIBUTION UNRESTRICTED	770
	501C3		
APPLICABLE		CONTRIBUTION	5,000
	501C3	UNRESTRICTED CONTRIBUTION	300
APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	210
APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	250
APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	200
APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	75
APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	2,500
APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	1,500
W CANAAN FIREFIGHTERS MAIN STREET W CANAAN,CT 06840		UNRESTRICTED CONTRIBUTION	50
W CANAAN HISTORICAL NOT APPLICABLE OCIETY O O O O O O O O O O O O O O O O O O O		UNRESTRICTED CONTRIBUTION	250
	APPLICABLE APPLICABLE APPLICABLE APPLICABLE	APPLICABLE 501C3 APPLICABLE 501C3 APPLICABLE 501C3 APPLICABLE 501C3 APPLICABLE 501C3	APPLICABLE 501C3 UNRESTRICTED CONTRIBUTION APPLICABLE 501C3 UNRESTRICTED

Name and address (home or business) a Paid during the year NEW CANAAN ICE HOCKEY 26 GARIBALDI LANE NEW CANAAN,CT 06840 NEW CANAAN LIBRARY 151 MAIN STREET NEW CANAAN,CT 06840 NEW CANAAN NATURE CENTER 144 OENOKE RIDGE NEW CANAAN,CT 06840	If recipient is an individual, show any relationship to any foundation manager or substantial contributor NOT APPLICABLE NOT APPLICABLE NOT APPLICABLE NOT APPLICABLE	Foundation status of recipient 501C3 501C3 501C3	Purpose of grant or contribution UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION	200 1,350 305
a Paid during the year NEW CANAAN ICE HOCKEY 26 GARIBALDI LANE NEW CANAAN, CT 06840 NEW CANAAN LIBRARY 151 MAIN STREET NEW CANAAN, CT 06840 NEW CANAAN NATURE CENTER 144 OENOKE RIDGE NEW CANAAN, CT 06840 NEW CANAAN, CT 06840 NEW CANAAN PUBLIC TELEVISION	Or Substantial contributor NOT APPLICABLE NOT APPLICABLE NOT APPLICABLE	501C3 501C3	UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED	1,350 305
NEW CANAAN ICE HOCKEY 26 GARIBALDI LANE NEW CANAAN, CT 06840 NEW CANAAN LIBRARY 151 MAIN STREET NEW CANAAN, CT 06840 NEW CANAAN NATURE CENTER 144 OENOKE RIDGE NEW CANAAN, CT 06840 NEW CANAAN, CT 06840 NEW CANAAN PUBLIC TELEVISION	NOT APPLICABLE NOT APPLICABLE NOT APPLICABLE	501C3 501C3	UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED	1,350 305
26 GARIBALDI LANE NEW CANAAN, CT 06840 NEW CANAAN LIBRARY 151 MAIN STREET NEW CANAAN, CT 06840 NEW CANAAN NATURE CENTER 144 OENOKE RIDGE NEW CANAAN, CT 06840 NEW CANAAN, CT 06840 NEW CANAAN PUBLIC TELEVISION	NOT APPLICABLE NOT APPLICABLE NOT APPLICABLE	501C3 501C3	UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED CONTRIBUTION UNRESTRICTED	1,350 305
151 MAIN STREET NEW CANAAN, CT 06840 NEW CANAAN NATURE CENTER 144 OENOKE RIDGE NEW CANAAN, CT 06840 NEW CANAAN PUBLIC TELEVISION	NOT APPLICABLE NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION UNRESTRICTED	305
144 OENOKE RIDGE NEW CANAAN, CT 06840 NEW CANAAN PUBLIC TELEVISION	NOT APPLICABLE		CONTRIBUTION UNRESTRICTED	
		501C3		50
NEW CANAAN, CT 06840	NOT APPLICABLE			
NEW CANAAN VOLUNTEER AMBULANCE 182 SOUTH AVENUE NEW CANAAN,CT 06840		501C3	UNRESTRICTED CONTRIBUTION	500
NEW CANAAN YMCA 564 SOUTH AVENUE NEW CANAAN,CT 06840	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	500
NEW YORK BOTANICAL GARDEN 200TH STREET/KAZIMIROFF BLVD BRONX,NY 10458	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	110
NEW YORK PRESBYTERIAN 654 WEST 170TH STREET NEW YORK,NY 10032	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	1,000
NHCVNA FOUNDATION PO BOX 489 WILTON,CT 06897	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
NORWALK COMMUNITY COLLEGE 188 RICHARDS AVENUE RM E311 NORWALK,CT 06854	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	4,000
NORWALK HOSPITAL FOUNDATION 34 MAPLE STREET NORWALK,CT 06856	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	500
NTM INFO & RESEARCH 1550 MADRUGA AVENUE STE 230 CORAL GABLES, FL 33146	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
OPEN DOOR SHELTER 4 MERRITT STREET S NORWALK, CT 06854	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	250
OPERATION FUEL 1 REGENCY DRIVE STE 200 BLOOMFIELD, CT 06002	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
PACE ACADEMY 966 WEST PACES FERRY ROAD NW ATLANTA, GA 30327	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	250
Total				46,865

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor			
PEOPLE TO PEOPLE 1956 AMBASSADOR WAY SPOKANE, WA 99224	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	50
RAINFOREST ALLIANCE 665 BROADWAY STE 500 NEW YORK, NY 10012	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	500
ROTARY CLUB OF NEW CANAAN PO BOX 62 NEW CANAAN,CT 06840	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	500
ROTARY FOUNDATION ONE ROTARY CNTR 1560 SHERMAN AVE EVANSTON, IL 60201	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	250
SHELTER FOR THE HOMELESS 597 PACIFIC STREET STAMFORD,CT 06902	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	250
STAMFORD HOSPITAL FOUNDATION 1351 WASHINGTON BLVD STE 202 STAMFORD,CT 06902	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	500
STAYING PUT IN NEW CANAAN PO BOX 484 NEW CANAAN, CT 06840	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
STEPPING STONES MUSEUM FOR CHILDREN 303 WEST AVENUE NORWALK,CT 06850	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	2,250
SUMMER THEATER OF NEW CANAAN 237 ELM STREET NEW CANAAN, CT 06840	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	150
US LACROSSE FOUNDATION 113 WEST UNIVERSITY PKWY BALTIMORE,MD 21210	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	100
VISITING NURSE & HOSPICE 1266 EAST MAIN STREET STAMFORD,CT 06902	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	350
WAVENY CARE CENTER 3 FARM ROAD NEW CANAAN,CT 06840	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	2,000
VILMER EYE INSTITUTE NOT APPLICABLE 100 N WOLFE STREET 1287		501C3	UNRESTRICTED CONTRIBUTION	1,000
WOODYS WARRIORS 1500 ROSECRANS AVE STE 200 MANHATTAN BEACH,CA 90266	500 ROSECRANS AVE STE 200		UNRESTRICTED CONTRIBUTION	100
ANKEE INSTITUTE FOR PUBLIC OLICY O BOX 2690660 ARTFORD, CT 06126		501C3	UNRESTRICTED CONTRIBUTION	100

Recipient	If recipient is an individual, show any relationship to	now any relationship to status of recipient	Purpose of grant or contribution	A mount	
Name and address (home or business)	any foundation manager or substantial contributor				
a Paid during the year					
HIGH MUSEUM OF ART ATLANTA 1280 PEACHTREE STREET NE ATLANTA,GA 30309	NOT APPLICABLE	501C3	UNRESTRICTED CONTRIBUTION	90	
				46,865	

TY 2010 Accounting Fees Schedule

Name: HOBBS FAMILY CHARITABLE TRUST

EIN: 06-1602789

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	2,175	0		0