



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Triangle Community Center, Inc.

EIN 22-3079559

Schedule A (Form 990 or 990-EZ) 2010

Page 3

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.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►

1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")

2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . .

3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . .

4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .

5 The value of services or facilities furnished by a governmental unit to the organization without charge . . .

6 **Total.** Add lines 1 through 5 . . .

7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . .

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 . . .

c Add lines 7a and 7b . . .

8 **Public support** (Subtract line 7c from line 6.)

| | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
|----|----------|----------|----------|----------|----------|-----------|
| 1 | 23000 | 43190 | 40748 | 48735 | 48429 | 203202 |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | 23000 | 43190 | 40748 | 48735 | 48429 | 203202 |
| 7a | 0 | 10000 | 5000 | 5000 | 0 | 20000 |
| b | | | | | | |
| c | 0 | 10000 | 5000 | 5000 | 0 | 20000 |
| 8 | | | | | | |
| | | | | | | 183202 |

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

9 Amounts from line 6

10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .

b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . .

c Add lines 10a and 10b

11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . .

12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . .

13 **Total support.** (Add lines 9, 10c, 11, and 12.)

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►

| | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
|-----|----------|----------|----------|----------|----------|-----------|
| 9 | 23000 | 43190 | 40748 | 48735 | 48429 | 203202 |
| 10a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| 11 | | | | | | |
| 12 | | | | | | |
| 13 | 23000 | 43190 | 40748 | 48735 | 48429 | 203202 |
| 14 | | | | | | |

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) 15 90.2 %

16 Public support percentage from 2009 Schedule A, Part III, line 15 16 87.5 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) 17 %

18 Investment income percentage from 2009 Schedule A, Part III, line 17 18 %

19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b **33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Schedule A (Form 990 or 990-EZ) 2010

0425874017
June 11, 2012 LTR 2695C O R
22-3079559 201012 67
00023558

TRIANGLE COMMUNITY CENTER INC
PO BOX 4062
NORWALK CT 06852

DECLARATION

055900

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.


Signature of officer or trustee

6/31/12
Date

Treasurer
Title

Exhibit B pg 5/6

04 B 004