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# 'Form. 990-PF

# **Return of Private Foundation**

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

2010

OMB No 1545-0052

		of the Treasury		be able to use a copy of this		rting requirements.	2010
			tax year beginning,		and ending		
		all that apply:	Initial return Amended return	Initial return of a fo	ormer public charity	Final return Name change	
Nam	e of	foundation				A Employer identification	number
			FOUNDATION IN			26-0432677	<del></del>
Numb	er au	•	number if mail is not delivered to street  INKER BIDDLE &		1	B Telephone number 609-716-65	00
City	or to	own, state, and ZIP	code FON, NJ 08542			C if exemption application is po D 1. Foreign organizations	
H Ch	eck	type of organizatio		xempt private foundation		Foreign organizations me check here and attach col	eting the 85% test,
				Other taxable private founda	ation	E If private foundation stat	•
l Fair	ma	rket value of all ass	sets at end of year   J   Account	ing method: X Cash	Accrual	under section 507(b)(1)	(A), check here
(fro	m F	Part II, col (c), line	e 16) 🔲 0	ther (specify)		F If the foundation is in a 6	60-month termination
<b></b> \$			372,749. (Part I, colu	ımn (d) must be on cash l	basis)	under section 507(b)(1)	(B), check here
Par	<u>t l</u>	The total of amount	enue and Expenses is in columns (b), (c), and (d) may not be amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>~</b>	1		ts, grants, etc., received				
2011	2		e foundation is not required to attach Sch. B				
e	3	Interest on savings ar cash investments		200.	200.	<del></del>	STATEMENT 1
	4		erest from securities	7,863.	7,863.		STATEMENT 2
>		Gross rents					
M	_	Net rental income or (	· ·	<41,389.		The same	
(E)	ua h	Gross sales price for	n sale of assets not on line 10 all 89,012.	(41)3031		I AEE	TVEDO
	7	assets on line 6a Capital gain net incor	me (from Part IV, line 2)		0.	S 0000	<u> </u>
<b>E</b>	8	Net short-term car				MAY Y	1 2011 A
SCANKENEND MAY	9	Income modificati	ions				
W I	10a	Gross sales less returned allowances	rns			OGDE	N. UT
	b	Less Cost of goods	sold				
	C	Gross profit or (lo	ss)	!			
	11	Other income		.22 226	0.063	· · · · · · · · · · · · · · · · · · ·	
-	12	Total Add lines 1		<33,326.	> 8,063. 0.		0.
- 1	13 14	Other employee sa	cers, directors, trustees, etc		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
- 1	15	Pension plans, em	<del>-</del>				
		Legal fees	STMT 3	2,502.	1,251.	0.	1,251.
ens		Accounting fees	2				
찞		Other professiona	I fees				
<u>8</u>	17	Interest					
rrat	18	Taxes					
n s	19	Depreciation and	depletion				
	20	Occupancy					
Ą	21	Travel, conference					
a	22 23	Printing and publi Other expenses	ICATIONS			<del>                                     </del>	
		Total operating a	nd administrative				-
Sera	- '		nes 13 through 23	2,502.	1,251.	0.	1,251.
ŏ	25	Contributions, gift		40,400.			1,251. 40,400.
		· <del>-</del>	nd disbursements.				
		Add lines 24 and	25	42,902.	1,251.	0.	41,651.
	27	Subtract line 26 fr	rom line 12:				
			ver expenses and disbursements	<76,228.			
			ncome (if negative, enter -0-)		6,812.	0.	
	<u>C</u>	Adjusted net inco	OME (if negative, enter -0-)	1			<u> </u>

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	460,186.
2	Enter amount from Part I, line 27a	2	<76,228.>
3	Other increases not included in line 2 (itemize) .	3	0.
4	Add lines 1, 2, and 3	4	383,958.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	383,958.

41,651.

7

8

Add lines 5 and 6

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

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

	990-PF (2010) THE RSW FOUNDATION INC.  IT VI Excise Tax Based on Investment Income (Section 4940)	(a) 4940(b) 4940(a	or 4	<u> 26 -</u>	0432	677	ction	age 4
	Exempt operating foundations described in section 4940(d)(2), check here and en		), UI ¬	3-10	366 11	1500	CHOI	13)
	Date of ruling or determination letter: (attach copy of letter if nece							
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	Y and enter 1%		1				68.
	of Part I, line 27b	A and circi 170		<u>'</u>				<del>50.</del>
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part Lline 12 col (h)	J					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other		,	2				0.
	Add lines 1 and 2	noro untor o ,		3				68.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-1		4	<u> </u>			0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	thors critici o j		5			-	68.
	Credits/Payments:			<del></del>			•	<del></del>
	2010 estimated tax payments and 2009 overpayment credited to 2010	6a			•			
	Exempt foreign organizations - tax withheld at source	6b		i	ŀ			
	Tax paid with application for extension of time to file (Form 8868)	6c		ĺ				
	Backup withholding erroneously withheld	6d						
	Total credits and payments. Add lines 6a through 6d			7	1			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	ched		8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		•	9				68.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10				
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	Refun	led 🕨	11				
	rt VII-A Statements Regarding Activities							
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate or i	ntervene	ın			Yes	No
	any political campaign?					1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions for defir	ıtıon)?			1b		X
-	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and			d or				
	distributed by the foundation in connection with the activities.							
c	Did the foundation file Form 1120-POL for this year?					1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:						
Ī	(1) On the foundation. > \$ 0. (2) On foundation managers.		0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit			•				
•	managers. ► \$ _0.							
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?				2		X
	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 in	nstrument, articles of incorp	oration,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change					3_		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	r۶				4a		_X_
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•				5		X
	If "Yes," attach the statement required by General Instruction T.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied er	ther:						
	By language in the governing instrument, or							
	• By state legislation that effectively amends the governing instrument so that no mandatory	y directions that conflict with	the stat	e law				
	remain in the governing instrument?					6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?					7	_X_	
	If "Yes," complete Part II, col. (c), and Part XV							
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) ►						
	NJ							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney General (or designate	<del>?</del> )					
	of each state as required by General Instruction G? If "No," attach explanation					8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of se		) for cal	endar				
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," c					9		X
10	Did any nersons become substantial contributors during the tax year? it "yes " attach a schedu	ile lieting their names and address	e e e			10	l	X

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

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Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be H	equirea (contin	ued)	<del></del>	_
5a During the year did the foundation pay or incur any amount to:  (1) Carry on propaganda, or otherwise attempt to influence legislation (section).			s X No		
(2) Influence the outcome of any specific public election (see section 4955); o any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?	n described in section		s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo		a 21 110		
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described ii	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	_
Organizations relying on a current notice regarding disaster assistance check h			▶∟ ∣		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		. — —			
expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.494		/A Ye	is No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	pay promisino on	Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X	<u></u>
If "Yes" to 6b, file Form 8870.			_		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	·	nagers, Highly	<i>'</i>		
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(-) Evnanar	
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, oth allowances	e ier S
	DIRECTOR/PRES	IDENT			
DBR, 105 COLLEGE ROAD EAST				,	
PRINCETON, NJ 85420627	0.00	0.	0.	U	<u>) .</u>
	DIRECTOR/SECR	ETARI/TRE	ASUR		
DBR, 105 COLLEGE ROAD EAST PRINCETON, NJ 85420627	0.00	0.	0.	۱ ،	) .
PRINCETON, NJ 85420627 ALASDAIR R. YOUNG	DIRECTOR	· · · · · · · · · · · · · · · · · · ·	<u> </u>	-	<u>, .</u>
DBR, 105 COLLEGE ROAD EAST				:	
PRINCETON, NJ 85420627	0.00	٥.	٥.	0	<u>.</u>
<del></del>	DIRECTOR				_
DBR, 105 COLLEGE ROAD EAST					
PRINCETON, NJ 85420627	0.00	0.	0.	0	<u>) .</u>
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(-) Evnono	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, oth allowances	ner
NONE					
	-				
					—
	1				
					_
	1				
					_
			<u> </u>		
Total number of other employees paid over \$50,000			<b></b>		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NOI	VE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compens	sation
NONE			
Total number of others receiving over \$50,000 for professional services		<b>•</b>	
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infinumber of organizations and other beneficiaries served, conferences convened, research papers produced,	ormation such as the	Expenses	
1 N/A			
2			
3			
4			<del></del>
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount	
1 <u>N/A</u>			
2			
All other program-related investments. See instructions.			
3			
Total Add lines 1 through 3	<b>•</b>		0.

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Р	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	idations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	104,429.
Ь	Average of monthly cash balances	1b	75,706.
C	Fair market value of all other assets	1c	181,070.
d	Total (add lines 1a, b, and c)	1d	361,205.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	361,205.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,418.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	355,787.
6	Minimum investment return. Enter 5% of line 5	6	17,789.
P	Part XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here   and do not complete this part.)	d certain	
1	Mınımum investment return from Part X, line 6	1	17,789.
2a			
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	68.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	17,721.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	17,721.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	17,721.
P	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		A1 651
_	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	41,651. 0.
þ		1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	_	
a		3a	
b	,	3b	41,651.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	41,001.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	60
	Income. Enter 1% of Part I, line 27b	5	68. 41,583.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	tngillies tot (1	is section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	<b>(d)</b> 2010
1 Distributable amount for 2010 from Part XI, line 7	·	·		17,721.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			8,032.	
<b>b</b> Total for prior years:			-,	
3 Excess distributions carryover, if any, to 2010:		0.		
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ▶\$ 41,651.				
a Applied to 2009, but not more than line 2a			8,032.	
b Applied to undistributed income of prior			0,0021	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				17,721.
e Remaining amount distributed out of corpus	15,898.			11,141.
5 Excess distributions carryover applied to 2010	0.			0.
(if an amount appears in column (d), the same amount must be shown in column (a) )				<u> </u>
6 Enter the net total of each column as indicated below:	ŧ			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	15,898.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	15,898.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010 15,898.			·	

Part XIV   Private Operating F	oundations (see in		.Δ guestion 9)	N/A	-U432677 Fage 10			
			A, question 3)	N/A				
1 a If the foundation has received a ruling o								
foundation, and the ruling is effective for 2010, enter the date of the ruling  b Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or 4942(j)(5)								
		ig ioundation described i	Prior 3 years	<u> 4942(J)(3) 01                                   </u>	4942(])(3)			
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total			
investment return from Part X for	(4)2010	(0) 2000	(0) 2000	(4) 2301	(0) (0)			
each year listed <b>b</b> 85% of line 2a				<del></del>				
c Qualifying distributions from Part XII,					<del></del>			
line 4 for each year listed								
d Amounts included in line 2c not								
used directly for active conduct of								
exempt activities								
e Qualifying distributions made directly					<del>-                                    </del>			
for active conduct of exempt activities.								
Subtract line 2d from line 2c								
3 Complete 3a, b, or c for the			-	-				
alternative test relied upon:  a "Assets" alternative test - enter:								
(1) Value of all assets								
(2) Value of assets qualifying								
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter								
2/3 of minimum investment return shown in Part X, line 6 for each year								
listed	<u> </u>			<del></del>	-			
c "Support" alternative test - enter:								
(1) Total support other than gross investment income (interest,								
dividends, rents, payments on								
securities loans (section 512(a)(5)), or royalties)								
(2) Support from general public								
and 5 or more exempt	•							
organizations as provided in section 4942(j)(3)(B)(iii)	ł							
(3) Largest amount of support from								
an exempt organization								
(4) Gross investment income			j	<u> </u>				
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundatio	n had \$5,000 (	or more in assets			
at any time during t	-	instructions.)		·	· · · · · · · · · · · · · · · · · · ·			
1 Information Regarding Foundation	-	Abou 00/ of Abo 40401 cont			the close of any toy			
a List any managers of the foundation wh year (but only if they have contributed r			i ibulions received by th	ie toundation before	the close of any tax			
NONE								
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large por	tion of the ownership	of a partnership or			
NONE	C	<del></del>						
2 Information Regarding Contribut	ion, Grant, Gift Loan	Scholarship etc. Pr	rograms	<del></del>				
				not accept unsolicit	ed requests for funds. If			
Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.								
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:					
<b>b</b> The form in which applications should l	e submitted and informa	tion and materials they s	hould include:					
c Any submission deadlines:								
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:								

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	if recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient					
a Pard during the year	or substantial contributor	recipient					
SEE STATEMENT 7	e						
Total			▶ 3a	40,400.			
b Approved for future payment							
NONE							
Total		l	<b>▶</b> 3b	0.			

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

iter gross amounts unless otherwise indicated.	Uniterated	d business income		by section 512, 513, or 514	(e)
Program service revenue:	* (a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	0000				
a	_				<del></del>
	1 1				
	1		1 1		
		<del></del>			
e	_ <del>   </del>				
g Fees and contracts from government agencies	_		<del>                                     </del>		
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	200.	
Dividends and interest from securities		<u> </u>	14	7,863.	
Net rental income or (loss) from real estate:				7,0001	····
a Debt-financed property			1.		
b Not debt-financed property					
Net rental income or (loss) from personal	1	- ·		· · · · · · · · · · · · · · · · · · ·	
property					
Other investment income					· <del></del>
Gain or (loss) from sales of assets other	<b>—</b>	· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>		
than inventory			14	-41 389	<b>&gt;</b>
Net income or (loss) from special events				(41,505.)	<u> </u>
Gross profit or (loss) from sales of inventory		<u> </u>			<del></del>
Other revenue:					· · · · ·
a					
b	— <del>                                    </del>	<del></del>	<del></del>		
c		<del> </del>			
d		· · · · · · · · · · · · · · · · · · ·			
c				<33,326.	
c d e Subtotal. Add columns (b), (d), and (e)			).	<33,326.	<33.32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)		(	).		<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations	s.)			13	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations	s.)			13	
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	s.)	mplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No.   Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) lee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	s.) es to the Acco	emplishment of	Exempt F	13 Purposes	<33,32

Form 990-PF (		SW FOUNDATION I		26-04: nd Relationships With Nonch		Pag	je 13
	Exempt Organ	nizations					
	•	rectly engage in any of the following				'es	No
	· ·	(3) organizations) or in section 5		Zations?			
	• •	ation to a noncharitable exempt or	rganization of,		1a(1)	ĺ	x
(1) Cash (2) Othe	•				1a(2)	_	$\frac{\mathbf{x}}{\mathbf{x}}$
	insactions:				10(2)	7	<u></u>
	s of assets to a noncharita	ible exempt organization			16(1)		X
		ncharitable exempt organization			1b(2)		X
(3) Rent	tal of facilities, equipment,	or other assets			1b(3)		X
( <b>4</b> ) Rein	nbursement arrangements	}			1b(4)		X
(5) Loar	ns or loan guarantees				1b(5)		X
		embership or fundraising solicitati		•	1b(6)		X
_		ailing lists, other assets, or paid en			1c		<u> </u>
	•		* *	ays show the fair market value of the goods		is,	
	• • •	other assets, or services received		in any transaction or sharing arrangement	, SHOW III		
(a) Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions, ar	nd sharing arrar	ngemer	
(2) 2	(5)	N/A		(4)		-	
	<del></del>			-			
		<u> </u>	<del></del>				
		<del> </del>	<del></del>				
<del></del>							
	- · · · ·						
2a Is the fou	undation directly or indirec	ctly affiliated with, or related to, on	e or more tax-exempt organiza	ations described			_
		er than section 501(c)(3)) or in sec	ction 527?		Yes	X	No
b If "Yes," o	complete the following sch		1057 . (	( ) December of calling			
	(a) Name of or	ganization	(b) Type of organization	(c) Description of relatio	nsnip		
	N/A						
		· · · · · · · · · · · · · · · · · · ·					
						_	
					<del>-</del>	_	
				statements, and to the best of my knowledge and	belief, it is true	, соггес	;t,
Sign	d complete Declaration of prep	arer (other than taxpayer or fiduciary) is I	based on all information of which pr	reparer has any knowledge			
Here		MMY	5/11/1	1 tresident			
	Signature of officer or tr		Date	Title		_	
	Print/Type preparer's n	ame Proparatis	signarore of	Date Check if PTi	N		
Doid	Charles H 1.	10.00011 11.191	Was L. X dul	r M 2011 self-employed P	ሰስ አየ	4	ŊĹ
Paid Preparer	VIVI ICO I I	CAMPOIU .		II ID YOUNG TIN		0	<b>1</b>
Preparer Use Only	1	INKER BIDDLE & I 05 COLLEGE ROAD	REATH/LLP	Firm's EIN ▶			
USE UIIIY	Firm's address ▶ PF		542-0627	Phone no. (60	9)716-	-65	00
		THOSTOR, NO 00.		1 none no. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
					Form <b>990-</b>	PF (	2010)

#### Schedule B (Forth 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

**Employer identification number** Name of the organization 26-0432677 THE RSW FOUNDATION INC. Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** J For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

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

Page 1 of 1 of Part I

Employer identification number

### THE RSW FOUNDATION INC.

26-0432677

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u> </u>	MENNETH M. YOUNG  DBR, 105 COLLEGE ROAD EAST  PRINCETON, NJ 085420627	\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	KENNETH M. YOUNG  DBR, 105 COLLEGE ROAD EAST  PRINCETON, NJ 085420627	\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	N.A. YOUNG  DBR, 105 COLLEGE ROAD EAST  PRINCETON, NJ 085420627	\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	N.A. YOUNG  DBR, 105 COLLEGE ROAD EAST  PRINCETON, NJ 085420627	\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Omplete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution )

Page 1 of 1 of Part II
Employer identification number

## THE RSW FOUNDATION INC.

26-0432677

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>1</u>	32,000 SHARES OF INFORMA 0.1P		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	4,770 SHARES OF HSBC		
		<b>\$</b>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	10,000 SHARES OF INFORMA 0.1P		
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	5,703 SHARES OF HSBC		
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (20

Schedule B (Fo	, rm 990, 990-EZ, or 990-PF) (2010)		Page of of Part I				
Name of orga		Employer identification number					
THE RS	W FOUNDATION INC.	26-0432677					
Part III	Exclusively religious, charitable, etc., in	e columns (a) through (e) and the follows, charitable, etc., contributions of	501(c)(7), (8), or (10) organizations aggregating lowing line entry For organizations completing				
(a) No. from Part I	) No. rom (b) Purpose of gift (c) Use of gift		(d) Description of how gift is held				
		(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				

FORM 990-PF INTEREST ON S	AVINGS AND T	EMPORARY C	ASH IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
TD MONEY MARKET ACCOUNT/IN	SURD DEP ACC	T		•		200.
TOTAL TO FORM 990-PF, PART	I, LINE 3,	COLUMN A				200.
FORM 990-PF DIVID	ENDS AND INT	EREST FROM	SECUR	ITIES	STATEMENT	2
SOURCE	GRO	SS AMOUNT		TAL GAINS VIDENDS	COLUMN (A	A)
DIAMOND HILL FDS CAP FD CL DODGE & COX INCOME FD COM FIDELITY ADVISOR SER C FLO		460. 1,487.		0.		460. 487.
RT HI INC FD RETAIL FNB OF DAMARISCOTTA GE MONEY BK SALT LAKE CITY UT HSBC HLDG GB COM INFORMA PLC ORD JANUS INVT FD PERKINS MID CP FD OAKMARK FDS OAKMARK INTL PLAINS CAPITAL BANK SEQUOIA FD INC COM		463. 20. 161.	ý	0. 0. 0.		463. 20. 161.
		2,445. 382.		0.	2,4	445. 382.
		205. 315.		0. 0.		205. 315.
		86. 640.		0. 0.		86. 640.
VANGUARD INFLATION PROTECT FD VANGUARD INTER TRM FD	ED SEC	392. 807.		0. 0.		392. 807.
TOTAL TO FM 990-PF, PART I	, LN 4	7,863.		0.	7,	863.
FORM 990-PF	LEG	AL FEES		·	STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOK			(C) ADJUSTED NET INCOM		
DRINKER BIDDLE & REATH LLP	2,50	2. 1	,251.		0. 1,	251.
TO FM 990-PF, PG 1, LN 16A	990-PF, PG 1, LN 16A 2,502. 1,251.		···	0. 1,	251.	

FORM 990-PF CC	ORPORATE STOCK		STATEMENT	4
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
10,473 SHS OF HSBC HLDG GB COM 2100 SHS OF INFORMA PLC ORD	-	59,633. 15,317.	37,171 12,705	
TOTAL TO FORM 990-PF, PART II, LIN	NE 10B	74,950.	49,876	; . =
FORM 990-PF OTH	HER INVESTMENTS		STATEMENT	<u> </u>
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
1151.985 DIAMOND HILL FDS SML FD	COST			_
COM		27,960.	29,721	
3140.299 DODGE & COX INCOME FD COM		41,487.	41,546	· .
2630.477 FIDELITY ADVISOR SER V FLOATING RT HI INC FD RETAIL	COST	25 462	25,752	<b>)</b>
1290.661 JANUS INVT FD PERKINS MIL	COST	25,463.	25,752	<b>.</b>
CP VL INV FD		27,705.	29,130	).
1988.191 OAKMARK FDS OAKMARK INTL	COST	35,315.	38,591	
331.226 SEQUOIA FD INC COM	COST	40,640.	42,824	
1555.218 VANGUARD INFLATION	COST			
PROTECTED SEC FD		20,000.	20,218	
3744.522 VANGUARD INTER TRM FD	COST	40,807.	41,976	٠.
TOTAL TO FORM 990-PF, PART II, LIN	NE 13	259,377.	269,758	_ }. <del>_</del>
FORM 990-PF OTF	HER LIABILITIES		STATEMENT	<u> </u>
DESCRIPTION		BOY AMOUNT	EOY AMOUNT	
CONTRIBUTIONS PAID	•	0.	3,250	<u> </u>
TOTAL TO FORM 990-PF, PART II, LIN	NE 22	0.	3,250	 ).

STATEMENT

FORM 990-PF

NJ 08618

	DURING THE YEAR		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ALZHEIMER'S DISEASE RESEARCH 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871			2,000.
AMERICAN DIABETES ASSOCATION 1701 N BEAUREGARD STREET ALEXANDRIA, VA 22311			3,000.
CRISIS MINISTRY OF PRINCETON AND TRENTON 61 NASSAU STREET PRINCETON, NJ 08542	- · · · · ·		5,100.
DOCTORS WITHOUT BORDERS USA HEADQUARTERS 333 7TH AVE, 2ND FL NEW YORK, NY 10001-5004			4,000.
CHILDREN'S HEALTH FUND 215 WEST 125 STREET NEW YORK , NY 10027	·	•	2,500.
PUSHING BOUNDARIES 4162 148TH AVENUE NE REDMOND, WA 98052			2,500.
RFB&D RECORDATION 69 MAPLETON ROAD PRINCETON, NJ 08540			3,500.
TRENTON AFTER SCHOOL PROGRAM 801 WEST STATE STREET TRENTON,			2,600.

GRANTS AND CONTRIBUTIONS

THE RSW FOUNDATION INC.	26-0432677
TRENTON AREA SOUP KITCHEN 721/2 ESCHER STREET TRENTON, NJ 08605	2,600.
US FUND FOR UNICEP P. O. BOX 27780 NEWARK, NJ 07101-7780	2,500.
WOMEN'S ENTERPRISES INTERNATIONAL P. O. BOX 95775 SEATTLE, WA 98145	5,100.
SAVE THE CHILDREN 54 WILTON RD WESTPORT , CT 06880	2,500.
HABITAT FOR HUMANITY 245 GRAHAM STREET ALLENTOWN , PA 18109	1,000.
FARESTART SEATTLE 7TH AND VIRGINIA SEATTLE, WA 98101	1,500.
TOTAL TO FORM 990-PF, PART XV, LINE 3A	40,400.