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Form **990-PF**

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

OMB No 1545-0052

		it of the Treasury venue Service	Note. The fo			ed as a Priva to use a copy of thi			rting requirements	2010
For	caler	ndar year 2010, or ta				2010		ending	DEC 31, 2010	<u> </u>
G	Check	all that apply	X Initial retu			Initial return of a	•	charity	Final return	1
Na	me of	foundation							A Employer identification	number
Niv		DAYENU						In ()	27-3008834	
Nu	nder a	PO BOX		delivered to street	address;	·		Room/suite	877-829-55	00
Cit	y or t	own, state, and ZIP o		4- 40-	1.0				C If exemption application is p	<u> </u>
L.		GRAND R					·		D 1. Foreign organizations	s, check here
<u>"</u>	_	type of organization ction 4947(a)(1) nor				rivate foundation exable private found	lation		Foreign organizations me check here and attach co	
I F		arket value of all asse						rual	E If private foundation sta under section 507(b)(1)	tus was terminated
		Part II, col. (c), line	-		ther (sp				F If the foundation is in a	•
	\$	17,	002,892	• (Part I, colu		must be on cash	basis.)		under section 507(b)(1)	
P	art I	Analysis of Reven (The total of amounts necessarily equal the	ue and Expense in columns (b), (c), a amounts in column	S and (d) may not (a))) Revenue and benses per books		nvestment come	(c) Adjusted net income	(1) Disbursements for chantable purposes (cash basis only)
	1	Contributions, gifts,			17	,000,000.			N/A	
	2		oundation is not required	to attach Sch B						
	3	Interest on savings and cash investments	I temporary			1 400				
	4	Dividends and inter	est from secuntion	es	<u> </u>	1,432.		1,432.		STATEMENT 1
		Gross rents	1							
	b 6a	Net rental income or (lo Net gain or (loss) from s		Nine 10	······		•	***************************************		
Revenue	b	Grace cales nace for all		Time 10				•••••		
eve	7	Capital gain net income	(from Part IV, line 2	2)	***************************************	*!'':::::::::::::::::::::::::::::::::::		0.	**************************************	[HILLIAN - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Œ	8	Net short-term capit	tal gain		************			····		
	9	Income modification Gross sales less returns					ļ	····		
	10a	and allowances							[<u> </u>
	1	Less Cost of goods so Gross profit or (loss					-			
	11	Other income	?)				ļ		,	***************************************
	12	Total Add lines 1 ti	hrough 11		17	,001,432.		1,432.		
	13	Compensation of office	rs, directors, trustee	es, etc		0.		0.		0.
	14	Other employee sala	*	-	0 10					
ģ	15	Pension plans, emp	loyee benefits	RE						
. Su		Legal fees Accounting fees		ဖြ		0 2011 Q		·		
X		Other professional f	299	A026	0∨ 0	9 2011 9				
Ve E	17	Interest		-						
rati	18	Taxes		↓ O	GDE	IN, UI				
inist	19	Depreciation and de	pletion	<u> </u>						
Ē	20	Occupancy			ļ					
ΑÞ	21	Travel, conferences	_							
gau	22	Printing and publica Other expenses	tions							
Operating and Administrative Expenses	1 -	Total operating and	l administrative							
pera	-	expenses. Add lines				0.		0.		0.
Ō	25	Contributions, gifts,	-			0.				0.
	26	Total expenses and						_		_
		Add lines 24 and 25				0.	 	0.		0.
	27	Subtract line 26 from			17	,001,432.				
		Excess of revenue over Net investment inco	•		<u></u>	,001,432.	 	1,432.		
	ı	Adjusted net incom						_,	N/A	

	àrt	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
	OI X	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		2.	2.
	2	Savings and temporary cash investments	0.	16,700,595.	16,700,595.
	3	Accounts receivable -			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
	1	Less allowance for doubtful accounts			
	5	Grants receivable			· · · · · · · · · · · · · · · · · · ·
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts			
Assets	8	Inventories for sale or use			· · · · · · · · · · · · · · · · · · ·
Ass	9	Prepaid expenses and deferred charges			
•	1	Investments - U.S. and state government obligations		200 025	202 205
	1	Investments - corporate stock STMT 2	0.	300,835.	302,295.
	l	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	10	Less accumulated depreciation			·
	_	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis		•	
	15	Other assets (describe			
	'"	Other assets (describe >)			
	16	Total assets (to be completed by all filers)	0.	17.001.432	17,002,892.
_	17	Accounts payable and accrued expenses		17700171320	1770027032.
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abil	21	Mortgages and other notes payable		·	
	22	Other liabilities (describe >			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			
la	25	Temporarily restricted			
<u>B</u>	26	Permanently restricted			
Ē		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ts	27	Capital stock, trust principal, or current funds	0.	17,001,432.	
Net Assets or Fund Balance	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
ξ	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
ž	30	Total net assets or fund balances	0.	17,001,432.	
	_			17 001 400	
	31	Total liabilities and net assets/fund balances	0.	17,001,432.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
_	Total	net assets or fund balances at beginning of year - Part II, column (a), line	20		
			30		0
		t agree with end-of-year figure reported on prior year's return) amount from Part I, line 27a		1 2	17,001,432.
		Increases not included in line 2 (itemize)		2 3	0.
		ines 1, 2, and 3		3 4	17,001,432.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	17,001,432.
<u></u>		The state of the s			Form 990-PF (2010)

(a) List and des	cribe the kind(s) of property sold (e g varehouse, or common stock, 200 sh	, real estate,	it income	(b) P D	How acquired - Purchase - Donation	(c) Dat	e acquired day, yr)	(d) Date sold (mo , day, yr)
1a								
b NO	ONE			ļ		ļ		
<u>.</u> <u>.</u> .		-		ļ				
<u>d</u>				 				
e (a) Gross sales price	(f) Depreciation allowed (or allowable)	1.07	st or other basis expense of sale	1	 .		Gain or (loss) us (f) minus (
<u>a</u>						(-) [-	(-)	
b								
C								
d								
<u>e</u>	<u> </u>							
Complete only for assets show	ing gain in column (h) and owned by	the foundation	n on 12/31/69				(Col (h) gain	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col (i) r col (j), if any			COI (K), DU Losse	t not less than s (from col (l	n -O-) or h))
a]				
b		-			_			
<u>c</u>								
d		 						
<u>e</u>	<u> </u>	<u>.</u>		$\overline{}$				
2 Capital gain net income or (net c	eapital loss) { If gain, also enter If (loss), enter -0	r in Part 1, line I- in Part I, line	7 : 7	<u>}</u>	2			
3 Net short-term capital gain or (Ic If gain, also enter in Part I, line 8	oss) as defined in sections 1222(5) ar s, column (c)	nd (6)		اړ				
If (loss), enter -0- in Part I, line 8 Part V Qualification I	3 Jnder Section 4940(e) for			للـ	3			
If "Yes," the foundation does not qua	ction 4942 tax on the distributable am alify under section 4940(e) Do not co	mplete this pa	art					Yes No
1 Enter the appropriate amount in (a)	each column for each year, see instr	uctions before	making any entri			$ \tau$		(d)
Base period years Calendar year (or tax year beginn	ing in) Adjusted qualifying dis	tributions	Net value of no	(c) inchai	ritable-use assets Distribution ratio (col (b) divided by col (c))			
2009 2008						-		
2007							 	·
2006								
2005								
•								
2 Total of line 1, column (d)						2	ļ	
	5-year base period - divide the total (on line 2 by 5,	or by the number	of ye	ars			
the foundation has been in exist	ence if less than 5 years					3	ļ	
4 Enter the net value of noncharita	ble-use assets for 2010 from Part X,	line 5				4		
5 Multiply line 4 by line 3						_ 5		
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)					6		
7 Add lines 5 and 6						7		
8 Enter qualifying distributions fro	m Part XII, line 4					8		
If line 8 is equal to or greater tha See the Part VI instructions	n line 7, check the box in Part VI, line	1b, and comp	olete that part usin	g a 19	% tax rate			

	m 990-PF (2010) DAYENU FOUNDA'I'ION			·3008			Page 4
Pá	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	40(e), or 4	1948	- see i	nstr	uctio	ns)
18	a 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 instruction	s)					
t	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► □ and enter 1%	}	1	ļ			29.
	of Part I, line 27b						
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b))					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2				0.
3	Add lines 1 and 2		3				29.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5				29.
6	Credits/Payments						
a	a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a						
t	b Exempt foreign organizations - tax withheld at source 6b			l			
C	Tax paid with application for extension of time to file (Form 8868)	60.					
d	d Backup withholding erroneously withheld 6d						
7	Total credits and payments Add lines 6a through 6d		7				60.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10	<u> </u>			31.
		tefunded 🕨	11	<u> </u>			0.
Pé	art VII-A Statements Regarding Activities						
1 a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participal	e or intervene	ın 💮			Yes	No
	any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for	definition)?			1b	<u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	als publishe	d or				
	distributed by the foundation in connection with the activities.						
C	Did the foundation file Form 1120-POL for this year?				10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation ► \$ (2) On foundation managers ► \$	0.	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fou	ındatıon					
	managers ▶ \$O.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2	ļ	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 instrument, articles of in	corporation, o)r				١
_	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3.7	/3	4a		Х
	o If "Yes," has it filed a tax return on Form 990-T for this year?		IN	/A	4b		-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T.				'		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or By state largeston that offsetively amende the governing instrument on that or mandaton; discations that confine			ľ			
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict 	with the state	aw			v	
7	remain in the governing instrument?				6	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year?				7	^	
Ω-	If "Yes," complete Part II, col. (c), and Part XV.						
od	i Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ MI		-				
h		anata\		<u> </u>			
U	of each state as required by Geograf Instruction G2 if "No." attach exploration	ynate)				v	
O	of each state as required by General Instruction G? If "No," attach explanation)/ı\/E\ f a- a-!-	ndo-		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942	(1)(5) for cale	nuar				v
10	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and ac	9	TMT	3	9 10		X
	- Signature personal populities apparential contributors during the vegri of "Yes," strach a schedule listing their names and an	mpeses U	***			41	

Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	lation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	ter "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 services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant state	tistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers pr $ \frac{N}{A} $	oduced, etc	
1 1/4		
2		
3		· · ·
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of	on lines 1 and 2	Amount
1 N/A		<u> </u>
2		.

All other program-related investments. See instructions

Total. Add lines 1 through 3

	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	1	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	1.	50 120
	Average monthly fair market value of securities	1a 1b	50,139. 2,783,433.
	Average of monthly cash balances	1	2,703,433.
_	Fair market value of all other assets	10	2,833,572.
	Total (add lines 1a, b, and c)	1d	2,033,372.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 0		
_		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0
2	Acquisition indebtedness applicable to line 1 assets	2	2,833,572.
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	42,504.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,791,068.
<u>6</u>	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	68,057.
P	postributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part)	and certain	
1	Minimum investment return from Part X, line 6	1	68,057.
2a	Tax on investment income for 2010 from Part VI, line 5	•	
b	Income tax for 2010 (This does not include the tax from Part VI)	7	
C	Add lines 2a and 2b	2c	29.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	68,028.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	68,028.
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	68,028.
_	art XII Qualifying Distributions (see instructions)	- F	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		^
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0.
b	Program-related investments - total from Part IX-B	<u>1b</u>	<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		
а	Suitability test (prior IRS approval required)	3a	
b	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	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	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	qualifies for	the section

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				68,028.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years				
2. Evene distributions correspond if any to 2010	11'177'11111111111111111111111111111111	0.		
3 Excess distributions carryover, if any, to 2010				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009	0.			
f Total of lines 3a through e	0.	······································		
4 Qualifying distributions for 2010 from Part XII, line 4 ▶ \$ 0 .				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				**************************************
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount		***************************************		0.
e Remaining amount distributed out of corpus	0.	······································		
5 Excess distributions carryover applied to 2010	0.	**************************************		0.
(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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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		 		68,028.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.	·····		······
9 Excess distributions carryover to 2011.	^			
Subtract lines 7 and 8 from line 6a	0.			
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				5 000 DE (0010)

Part XIV Private Operating Fo	undations (see II	nstructions and Part V	I-A, question 9)	N/A	-3008834 Page
1 a If the foundation has received a ruling or			- / / / / / / / / / / / / / / / / / / /		· · · · · · · · · · · · · · · · · · ·
foundation, and the ruling is effective for		•	•		
b Check box to indicate whether the founda		-	<u> </u>	4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u> </u>	=
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					i
b 85% of line 2a			 		
c Qualifying distributions from Part XII,			 		
line 4 for each year listed					
d Amounts included in line 2c not				<u> </u>	
used directly for active conduct of				1	
exempt activities					
e Qualifying distributions made directly	-				
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying					·
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross				ł	
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)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Infor	mation (Comple	ete this part only	if the foundation	n had \$5,000 oi	more in assets
at any time during th	e year-see the	instructions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who	have contributed more	e than 2% of the total con	tributions received by the	e foundation before th	e close of any tax
year (but only if they have contributed mo	re than \$5,000) (See	section 507(d)(2))			
SEE STATEMENT 5					
b List any managers of the foundation who	own 10% or more of t	the stock of a corporation	(or an equally large port	ion of the ownership (of a partnership or
other entity) of which the foundation has	a 10% or greater intere	est			
NONE					
2 Information Regarding Contributio	n, Grant, Gift, Loar	n, Scholarship, etc., P	rograms:		
Check here 🕨 🗶 if the foundation on					
the foundation makes gifts, grants, etc. (s	ee instructions) to ind	ividuals or organizations i	under other conditions, o	complete items 2a, b, c	c, and d
a The name, address, and telephone number	er of the person to who	om applications should be	addressed		
b The form in which applications should be	submitted and informa	ation and materials they s	hould include		
c Any submission deadlines			· · · · · · · · · · · · · · · · · · ·		
d Any restrictions or limitations on awards,	such as by geographic	cal areas, charitable fields	, kinds of institutions, or	other factors	
	·				
023601 12-07-10		7.5			Form 990-PF (201

3 Grants and Contributions Paid During the	Year or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor		Purpose of grant or contribution	Amount
Name and address (home or business)	any toundation manager or substantial contributor	Foundation status of recipient	contribution	Amount
a Paid during the year				
NONE				
Total			▶ 3a	0
b Approved for future payment				
NONE				
NONE				
		ļ		
Total			▶ 3b	0

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

Enter gross amounts unless otherwise indicated	Unrelate	d business income		ded by section 512, 513, or 514	(e)	
	_ (a)	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue	Business code	Amount	sion	Amount	function income	
-	Code		- COGO			
a			1			
b						
C						
d						
e						
1						
g Fees and contracts from government agencies			† ** †			
2 Membership dues and assessments			 			
			╁╌╌┼			
3 Interest on savings and temporary cash			1 1			
Investments	ļ		7.4	1 422		
4 Dividends and interest from securities		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	14	1,432.		
5 Net rental income or (loss) from real estate	,					
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal					·	
property						
7 Other investment income						
			 			
8 Gain or (loss) from sales of assets other						
than inventory			 			
9 Net income or (loss) from special events		 	\vdash			
10 Gross profit or (loss) from sales of inventory						
11 Other revenue	1					
a			1 1			
b						
- · · · · · · · · · · · · · · · · · · ·			1		······································	
			 			
	<u> </u>		 -			
6		0.		1 422		
12 Subtotal Add columns (b), (d), and (e)	<u> </u>		l	1,432.	1,432.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,432.	
(See worksheet in line 13 instructions to verify calculations)						
Part XVI-B Relationship of Activities to	the Acco	omplishment of Ex	empt	Purposes		
Line No. Explain below how each activity for which incom			contribi	uted importantly to the accom	plishment of	
▼ the foundation's exempt purposes (other than b	y providing tu	nds for such purposes)				
				 		
						
		-				
			_		 	
	· 					
					·	
						
		-				
023621 12-07-10			-		Form 990-PF (2010)	

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of									Yes	No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
a Transfers from the reporting foundation to a noncharitable exempt organization of										
(1) Cash	1						1a(1)		X
(2) Othe	r assets					•	1a(2)		X
		nsactions								
(1) Sales	s of assets to a noncharita	ible exempt organization	n				1b(1)		_X_
(2) Purc	hases of assets from a no	ncharitable exempt org	janization				1b(2)		X
		al of facilities, equipment,						1b(3)		X
		ibursement arrangements	j					1b(4)		X
-	-	s or loan guarantees						1b(5)		Х
		ormance of services or me						16(6)		X
		of facilities, equipment, ma	-		· ·			10		X
							market value of the goods, ot		ets,	
					ed less than fair market valu	ue in any transacti	on or sharing arrangement, sh	ow in		
		d) the value of the goods,								
(a) Lini	e no	(b) Amount involved	(c) Name of no		exempt organization	(d) Descripti	on of transfers, transactions, and si	anng an	angeme	nts
	— -			N/A	· · · · · · · · · · · · · · · · · · ·					
-			 				·		_	
			 					-		
										
										
			<u> </u>						_	
			·							
	_		<u> </u>			_				
	+		···			 				
	+		-							
					<u> </u>					
0- 4			41 - 44 - 44		 -					
		•	•		or more tax-exempt organi	zations described		٦.,	(T)	١
		501(c) of the Code (other	,)) or in sect	ion 52/7			」 Yes	X	J No
D 17	Yes, c	omplete the following sche (a) Name of org			(b) Type of organization	 	(a) Description of relationship		_	
		N/A	allizativii		(b) Type of Organization		(c) Description of relationshi	h		
		N/A				<u></u> .			_	
	-									
	_									
							 			
	Linda	er penalties of penury. I declare	e that I have examined this	return include	ng accompanying schedules en	d statements and to	the best of my knowledge and belie	f it in to.	a ~~~~	
Sig	and				ased on all information of which i			י, ונוס נוע	e, conec	
Her					1/-1-	//	PREVOCT			
1101		Signature of officer or tru	ictor		Date	<u>//</u>	Title		_	
		Print/Type preparer's na		reparer's si		Date	Check If PTIN		-	
		Timo Type preparer 5 fla	···· }E	7-hares 2 21	/	/ ,	self- employed			
Paid	1	DEBORAH BA	CANS ()	6 /1	(10/27/11	- Jon Uniployed			
	ı barer	Firm's name PLA		N, PL	T.C	19/11/	Francis Fist		_	
-	Only	rum s name PLA	MIE & MOKA	и, РЬ.	шС		Firm's EIN			
U36	Cilly	Firm's address ► 63	A EDONIM ATT	י יווויי	NW CITTER A	0.0	 			
						00	1636	774	000	1
		GR	AND RAPIDS	, rii	43304		Phone no (616)			_
							Forn	1 990 -	·PF (2	(010)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number Name of the organization DAYENU FOUNDATION 27-3008834 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 X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. 🔟 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. 🔟 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, 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).

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

Employer identification number

DAYENU FOUNDATION

27-3008834

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	OUR ECHO, LLC PO BOX 8822 GRAND RAPIDS, MI 49518	\$ 9,049,165.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	PURE LIGHT INVESTMENTS, LLC PO BOX 8822 GRAND RAPIDS, MI 49518	\$ 2,550,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	LIVING WATER INVESTMENTS, LLC PO BOX 8822 GRAND RAPIDS, MI 49518	\$ 2,550,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	SAMUEL GROUP HOLDINGS, LLC PO BOX 8822 GRAND RAPIDS, MI 49518	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	OUR ECHO, LLC PO BOX 8822 GRAND RAPIDS, MI 49518	\$ 300,835.	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 Noncash (Complete Part II if there is a noncash contribution.)

DAYENU FOUNDATION

27-3008834

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
5	4,206 ISHARES TR S&P GLOBAL HEALTH (IXJ) \$196,574 1,757 VANGUARD EMERGING MARKETS (VWO) \$73,608	\$ 270,182.	12/23/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	0, 990-EZ, or 990-PF) (2010

	n 990, 990-EZ, or 990-PF) (2010)		Page of of Part				
ame of orga	nization		Employer Identification number				
Part III	Exclusively religious, charitable, etc., in	ndividual contributions to section	27-3008834 on 501(c)(7), (8), or (10) organizations aggregating				
	Part III, enter the total of exclusively religions 1,000 or less for the year. (Enter this inf	ous, charitable, etc., contributions	following line entry. For organizations completing of				
(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, and ZIP + 4		Relationship of transferor to transferee				
(a) No.							
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, and ZIP + 4		Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(a) Use of rife					
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	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	DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMENT 1		
SOURCE		GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT		
FIFTH THIRD BANK	•	1,432.	0.	1,432.		
TOTAL TO FM 990-P	F, PART I, LN 4	1,432.	0.	1,432.		
FORM 990-PF	CO	RPORATE STOCK		STATEMENT 2		
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE		
ISHARES TR S&P GLOBAL HEALTHCARE VANGUARD EMERGING MARKETS ETF			218,291. 82,544.	217,703. 84,592.		
TOTAL TO FORM 990	-PF, PART II, LIN	Е 10В	300,835.	302,295.		
FORM 990-PF		FANTIAL CONTRIE	BUTORS	STATEMENT 3		
NAME OF CONTRIBUT	OR	ADDRESS				
JONATHAN L BORISC	Н	PO BOX 8822 GRAND RAPIDS	, MI 49518			
MARY K BORISCH		PO BOX 8822 GRAND RAPIDS,	, MI 49518			
THOMAS L BORISCH		PO BOX 8822 GRAND RAPIDS,	, MI 49518			
MATTHEW A BORISCH		PO BOX 8822 GRAND RAPIDS,	, MI 49518			
DAVID E BORISCH		PO BOX 8822 GRAND RAPIDS,	MI 49518			
JESSICA BORISCH		PO BOX 8822 GRAND RAPIDS,	MI 49518			
KARA BORISCH		PO BOX 8822 GRAND RAPIDS,	MI 49518			

OUR ECHO, LLC

PO BOX 8822
GRAND RAPIDS, MI 49518

PURE LIGHT INVESTMENTS, LLC

PO BOX 8822
GRAND RAPIDS, MI 49518

LIVING WATER INVESTMENTS, LLC

PO BOX 8822
GRAND RAPIDS, MI 49518

INDIVIDUALS LIGHED ARE MEMBERS IN

SAMUEL GROUP HOLDINGS, LLC

INDIVIDUALS LISTED ARE MEMBERS IN ONE OR MORE OF THE LLCS

	VIII - LIST OF OFFICERS, USTEES AND FOUNDATION MA	STAT	STATEMENT 4	
NAME AND ADDRESS		COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JONATHAN L BORISCH PO BOX 8822 GRAND RAPIDS, MI 49518	PRESIDENT 1.00	0.	0.	0.
MARY K BORISCH PO BOX 8822 GRAND RAPIDS, MI 49518	VICE PRESIDE 1.00	NT 0.	0.	0.
THOMAS L BORISCH PO BOX 8822 GRAND RAPIDS, MI 49518	SECRETARY 1.00	0.	0.	0.
MATTHEW A BORISCH PO BOX 8822 GRAND RAPIDS, MI 49518	TREASURER 1.00	0.	0.	0.
DAVID E BORISCH PO BOX 8822 GRAND RAPIDS, MI 49518	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-	PF, PAGE 6, PART VIII	0.	0.	0.

PO BOX 8822

GRAND RAPIDS, MI 49518

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

5

NAME OF MANAGER

JONATHAN L BORISCH MARY K BORISCH THOMAS L BORISCH MATTHEW A BORISCH DAVID E BORISCH

Form 886	8 (Rev. 1·2011)					Page 2	
	are filing for an Additional (Not Automatic) 3-Month E	xtension,	complete only Part II and check this b	ox	>	X	
	ly complete Part II if you have already been granted an				8868.		
• If you a	are filing for an Automatic 3-Month Extension, compl	ete only Pa	art I (on page 1).				
Part II	Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the original (no c	opies i	needed).		
Type or	Name of exempt organization			Emp	loyer identification	number	
print	DAIENO FOUNDATION				27-3008834		
File by the extended due date for PO BOX 8822							
filing your return See instructions	City, town or post office, state, and ZIP code. For a GRAND RAPIDS, MI 49518	foreign add	dress, see instructions.				
Enter the	Return code for the return that this application is for (f	ile a separa	te application for each return) .	••		0 4	
Application	on	Return	Application			Return	
ls For		Code	ls For			Code	
Form 990		01					
Form 990	BL	02	Form 1041-A			08	
Form 990	·EZ	03	Form 4720			09	
Form 990	PF	04	Form 5227		- <u> </u>	10	
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
	T (trust other than above) not complete Part II if you were not already grante	06	Form 8870			12	
Teleph If the c	oks are in the care of one No. rganization does not have an office or place of busines for a Group Return, enter the organization's four digit if it is for part of the group, check this box	Group Exe	emption Number (GEN) If the				
4 I rec	quest an additional 3-month extension of time until	NOVEM	BER 15, 2011.				
5 For	calendar year, or other tax year beginning _	JUL 7	, 2010 , and ending	DEC	31, 2010	·	
6 If th	e tax year entered in line 5 is for less than 12 months, Change in accounting period	check reas	on: X Initial return	Final r	etum		
7 Stat	e in detail why you need the extension						
	ATTEMPT TO OBTAIN INFORMAT	'ION N	ECESSARY FOR FILING	A R	ETURN WAS		
	QUESTED IN A TIMELY FASHION FFICIENT TIME TO PERMIT THE					D IN	
	Is application is for Form 990-BL, 990-PF, 990-T, 4720,			UKIN	<u>•</u>		
	refundable credits. See instructions.	, 01 0009, 6	nter the tentative tax, less any	8a	\$	60.	
	is application is for Form 990-PF, 990-T, 4720, or 6069	enter any	refundable credits and estimated		· •		
	payments made. Include any prior year overpayment a						
	viously with Form 8868.			8b	\$	60.	
	ance due. Subtract line 8b from line 8a. Include your p	ayment wit	h this form, if required, by using				
EFT	PS (Electronic Federal Tax Payment System). See inst	ructions.		8c	\$	0.	
	Sign	ature an	d Verification				
Under pena	Ities of peruny, I declare that I have examined this form, inclu	ding accomp	panying schedules and statements, and to th	e best o	f my knowledge and be	lief,	
IT IS True, Co	prect and complete, and that I am authorized to prepare this		0.04		8/15/	, , ,	
Signature	Title ▶		' <i>fÆ</i>	Date		<u> </u>	
					Form 8868 (Re	v. 1·2011)	

023842 01-24-11