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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

Department of the Treasury Internal Revenue Service

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

		endar year 2010, or tax	year begi	y	11/18/2010 ,	allu	enaii	<u>.</u>	12	73172010			
G	Chec	ck all that apply	X Initial		Initial return of a fe		r pub		•		nal re	eturn	
			_ <u> </u>	ded return	Address chang	€		∐ Naı		hange			
		foundation							AE	mployer identificat	ion n	umber	
		Philanthropic Foundation			<del></del> .						4000		
Nu	mber a	and street (or P O box number	of mail is not o	delivered to street ad	dress)		Roon	n/suite	В⊺	elephone number (s	ee pa	ge 10 of the instruction	ns)
		idation Source, 501 Silv	<u>erside Roa</u>	ad			1	123		(800)	839	-1754	
		wn, state, and ZIP code							C If	exemption application	n is p	ending, check here	<b>►</b> [X
	ming				DE		809-1	1377	D 1.	Foreign organizatio	ns, ch	eck here	▶□
ᄲ		ck type of organization	X Section	on 501(c)(3 <u>) e</u> xe	mpt private founda	ion			2.	Foreign organizatio		-	-
<u> </u>	Sec	tion 4947(a)(1) nonexer	npt cnarital	ble trust (	Other taxable privat	e tou	ındatı	ion	_ If	check here and atta private foundation st			▶ _
		market value of all asse		J Accounting i		sh [	A	ccrual		nder section 507(b)(			▶□
		ar (from Part II, col (c), 16) ▶\$		Other (sp	ecify) d) must be on cash b					the foundation is in a			
_					Inust be on cash be	1515 )			ur	nder section 507(b)(	1)(B), (	r	<u> </u>
Pa	rt I	Analysis of Revenue			(a) Revenue and	Ι,	(b) Ne	t investm	ent	(c) Adjusted n	et	(d) Disbursemer for charitable	nts
		amounts in columns (b), (c), a the amounts in column (a) (se			expenses per books			ncome		income		purposes	
_						_						(cash basis only	<u>y)</u>
	1	Contributions, gifts, grants, et		-	401,55	4	-						
	2 3	Check I if the foundation				1							
	4	Interest on savings and to Dividends and interest from				+			ı	<u> </u>			
	_	Gross rents	m secundes	•		+						-	
		Net rental income or (loss	2)			+		·		-		· · · · ·	
ıne		Net gain or (loss) from sa	·	not on line 10		+	• • • • • • • • • • • • • • • • • • • •					1	
/en		Gross sales price for all asse				+						-	
Revenue		Capital gain net income (		, line 2)		1			0				
ш.	8	Net short-term capital gai		,	- A A A A A A A A.								
	9	Income modifications											
	10 a	Gross sales less returns and	allowances							L			
	b	Less Cost of goods sold	1										
	С	Gross profit or (loss) (atta	ach schedule	e)									
	11	Other income (attach sch	•		· · · · · · ·	<u> </u>							
	12	Total. Add lines 1 throug	ıh 11		401,55	5		<del></del>	1				
es	13	Compensation of officers	, directors, ti	rustees, etc									
ns	14	Other employee salaries	•		···	_							
Expenses	15	Pension plans, employee				+		U 33 II			<u> </u>		
		Legal fees (attach schedu				-	<del>\</del> —	RE		10	<del>                                     </del>		
ıtive		Accounting fees (attach s	,	4-4-5	<del></del>	+-	1 5			8019			
ati		Other professional fees (a	attach sched	iule)		+	<del> \$ </del>	SEI		g 2011 10	-		
str	17 18 19 20 21	Interest Taxes (attach schedule) (see	nage 14 of the	instructions)		+-	+ 1	<u> </u>			: 1		
ini	19	Depreciation (attach sche			· · · · · · · · · · · · · · · · · · ·	+	+	00	no		╁	<del></del>	
дш	20	Occupancy	ouio, una u	орюшон		+	+	<del>-0</del> 0		380, 0			
Ą	21	Travel, conferences, and	meetings		- · · · · · ·							-	
and	22	Printing and publications	J			1							
a	23	Other expenses (attach s	chedule)			$\top$							
erating	24	Total operating and adm	ninistrative	expenses.				*					
rai		Add lines 13 through 23				0			0				(
ם	25	Contributions, gifts, grant	•										
0	26	Total expenses and disburse	ements Add I	ines 24 and 25		0			0				(
	27	Subtract line 26 from line	12										
	а	Excess of revenue over expe	enses and dis	bursements	401,55	5						L	
	b	Net investment income	(if negative,	enter -0-)					1				
1	C	Adjusted net income (if	negative, er	nter -0-)						1			

For Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2010)



Рa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
. u		should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments		1	1
	3	Assessment assessment as			
			·····		
	4				
	7				
	_	Less allowance for doubtful accounts	-		
	5 6	Grants receivable Receivables due from officers, directors, trustees, and other	+		<del></del>
	"	disqualified persons (attach schedule) (see page 15 of the			
	ŀ	instructions)			
	7	Other-state and large state (1911)			
	′	Other notes and loans receivable (attach schedule)			
Assets	١.,	Less allowance for doubtful accounts			<del></del>
SS	8	Inventories for sale or use			
4	9	Prepaid expenses and deferred charges			
	Ι.	Investments—U.S. and state government obligations (attach schedule)			
	*	Investments—corporate stock (attach schedule)		401,554	398,915
		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			
		instructions Also, see page 1, item I)	o	401,555	398,916
	17	Accounts payable and accrued expenses			
	18	Grants payable			
<u>ë</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
Ξ	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0	Ó	
		Foundations that follow SFAS 117, check here			
Ś		and complete lines 24 through 26 and lines 30 and 31.			
Balances	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			
Þ	-	Foundations that do not follow SFAS 117, check here		•	
Net Assets or Fund		and complete lines 27 through 31.			
Ē	27	Capital stock, trust principal, or current funds			
S	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
ė	29	Retained earnings, accumulated income, endowment, or other funds	0	401,555	
155	30	Total net assets or fund balances (see page 17 of the	, , , , , , , , , , , , , , , , , , ,	401,000	
ř.		instructions) .	o	401,555	·
ž	31	Total liabilities and net assets/fund balances (see page 17		401,000	
	}	of the instructions)	o	401,555	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	<u> </u>	701,000	<u>-</u>
		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with		
		of-year figure reported on pnor year's return)	, <u>g</u>	1	0
2		amount from Part I, line 27a		2	401,555
		: ingrange not included in line 2 (Hemire)		-	.0.,000
		nes 1, 2, and 3		4	401,555
		eases not included in line 2 (itemize)			,300
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, co		6	401,555
			<del></del>		

	lanthropic Foundation Inc Losses for Tax on Inve				27-4	4000348	Page 3
(a) List and describe the ki	ind(s) of property sold (e.g., real es or common stock, 200 shs MLC C	tate,	(b) How acquired P—Purchase D—Donation	(c) Date a (mo , da	•	(d) Date s (mo , day,	
1a	#***		B Bondion				
b							
С	· <del>-</del>						
d	<u>_</u>	-				_	
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1.0.	r other basis ense of sale		(h) Gain (e) plus (f)		
a	_		· ·				
b							
С							
d	<del></del>						
e	**						
Complete only for assets showing	g gain in column (h) and owne	d by the foundate	on on 12/31/69		Coupe (Cel	(h) gain minua	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ss of col (i)			(h) gain minus less than -0-) or	
а			0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
b							
c		-					
d							
е	(16 2222	 	-t 1 1 7 1	<del>                                     </del>	<del></del>		
2 Capital gain net income or (ne	If (loss),	also enter in Pa , enter -0- in Pa	rt I, line 7	2			
3 Net short-term capital gain or							
If gain, also enter in Part I, lin	e 8, column (c) (see pages	13 and 17 of t	he }				
instructions) If (loss), enter -0	0- in Part I, line 8		J	3			
Part V Qualification Unde	r Section 4940(e) for Re	educed Tax o	n Net Investm	ent Incom	<u></u>		
(For optional use by domestic pri							
(1 of optional use by domestic pit	vate roundations subject to	ine section 43-	to(a) tax on het ii	ivesuiieiit i	ncome )		
If section 4940(d)(2) applies, leav	e this part blank			N/	'A - 1ST YI	EAR	
Was the foundation liable for the				the base p	eriod? [	Yes 🗌	No
If "Yes," the foundation does not	· · · · · · · · · · · · · · · · · · ·	<u>'                                    </u>					
1 Enter the appropriate amount	nt in each column for each	year, see page	18 of the instruct	tions before	∍ makıng	any entries	
(a)	(b)		(c)			(d)	
Base period years  Calendar year (or tax year beginning in)	Adjusted qualifying distribution	ons Net value	of nonchantable-use a	ssets		ibution ratio ivided by col (c	11
2009		·			(00) (0) (1		000000
2008							000000
2007							000000
2006		<del></del>					
	-		<del></del>				000000
2005						0 (	000000
2 Total of line 1, column (d)				2		0 (	000000
3 Average distribution ratio for t				/	1		
the number of years the found	dation has been in existend	e if less than 5	years	3	<del> </del>	0 (	000000
4 Enter the net value of noncha	aritable-use assets for 2010	from Part X, lir	ne 5	4	ļ		0
5 Multiply line 4 by line 3				5			0
6 Enter 1% of net investment in	ncome (1% of Part I, line 27	'b)		6		·	0
7 Add lines 5 and 6 .				7			0
8 Enter qualifying distributions t	from Part XII line 4			8			0
If line 8 is equal to or greater the Part VI instructions on pa	than line 7, check the box i	n Part VI, line 1	b, and complete		sing a 1%	tax rate Se	

	The 214 Philanthropic Foundation Inc		27-4000			ige 4
Ρ	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see pa	ige 18	of the	instr	uctio	ons)
	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 instructions)					
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check	1				J
	here  and enter 1% of Part I, line 27b					
	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			0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0	
6	Credits/Payments					,
	a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 0					
	b Exempt foreign organizations—tax withheld at source	i l				
	c Tax paid with application for extension of time to file (Form 8868)					ľ
_	d Backup withholding erroneously withheld	<b> </b> -				
7	Total credits and payments Add lines 6a through 6d	7			0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			0	<u> </u>
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0	<u> </u>
11		10			0	
_					0	L
	art VII-A Statements Regarding Activities		$\longrightarrow$	1	<del>, </del> 1	
1	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?			1a		<u> </u>
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			ا ا		.,
	instructions for definition)?			1b		_ X
	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					
			1	4		اا
	c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		ŀ	1c		X
	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$		-	- 1		
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers \$			- 1		
2				2		×
_	If "Yes," attach a detailed description of the activities		ŀ			
3	·					
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		-	3		X
4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		Ī	4a		X
	b If "Yes," has it filed a tax return on Form 990-T for this year?		ſ	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		ľ	5		Х
	If "Yes," attach the statement required by General Instruction T		Ī			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>		J			
_	that conflict with the state law remain in the governing instrument?		ļ	6	X	<b> </b>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), a	nd Par	tXV	7	Χ_	
8	a Enter the states to which the foundation reports or with which it is registered (see page 19 of the					
	instructions) DE					
	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney		ļ			ļ
۵	General (or designate) of each state as required by General Instruction G? If "No," attach explanation		}	8b	Χ	<del> </del> -
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	N.O.	l			
	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	)′	j			,
10	•		ŀ	9		X
	their names and addresses		ļ	10	y	
					_ ^	

Forn	n 990-F	F (201	0)	The	214	Philar	thropi	c Found	ation	Inc	_					27-	4000	348	F	age 6
Pa	irt VI	-B	Sta	ıtem	ents	Regai	rding	Activit	ies f	or Which f	orm 4	720 May Be	Requ	uired (c	ontinued	<u>()</u>				
5a	(1)	Carry	on p	propa	ganda	or oth	erwise	•	to infli	uence legisla	•	tion 4945(e))?	-		Yes	X	No			
	(2)							egistratio		on (see secti e?	on 4955	), or to carry			Yes	X.	No			
	(3)	Provi	de a	grant	to an	ındıvıd	ual for	travel, st	udy, o	r other simila	ır purpos	es?			Yes	X	No			
	(4)			-		-					•	ation described the instructions			Yes	X	No			
	(5)			•				•		itable, scient elty to childre	-	•			Yes	X	No			
þ	If any	ansv	ver is	s "Yes	" to 5a	(1)–(5)	, did <b>a</b>	ny of the	transa	actions fail to	qualify (	ınder the excep	otions o	described	1 in		_			
									_	-		nce (see page 2	22 of th	ne instruc	ctions)?		L	5b	N/A	<u> </u>
	-							_	-	ister assistan					•	<b>-</b>		- 1	ı	
С					-					ation claim e	xemptior	from the				<del></del> 1		1	ı	
						•		-	•	the grant? ection 53 49	45–5(d)				Yes	יו	No		ı	
6a						•		. •	ınds, (	directly or ind	lirectly, to	o pay			Г				ı	
	-			-			ontract								Yes	XI	1			
b					uring t m 887	-	r, pay į	oremiums	s, dire	ctly or indired	tly, on a	personal benef	fit cont	ract?		_	-	6b		X
7a	At ar	y tıme	duri	ing th	e tax y	ear, wa	as the f	foundatio	n a pa	arty to a proh	ibited tax	shelter transa	ction?		Yes	ΧI	No L			
												butable to the						7b	N/A	
Р	art V							fficers	, Dir	ectors, Tr	ustees	, Foundatio	n Ma	nagers	s, Highly	Paid	Emp	loy	ees,	
						<u>actor</u>														
_1_	List	all of	fice	ers, d	irecto	rs, tru	ustees	, found				eir compens					struc	ion	s).	
			(a)	) Name	and a	Idress			` '	Title, and aver hours per week evoted to positi	< ∖ i	c) Compensation If not paid, enter -0-)		employee	tributions to benefit plar d compensa	18			se acco	
SE	E AT	ACH	MEI	NT																
				•					ļ				<u> </u>							
					five I	nighes ———	st-paid	d emplo	yees	(other tha	n those	included on	line 1				instru	ctio	ns).	
(a	) Name	and a	ddres	ss of ea	ach emp	oloyee p	aid mor	e than \$50	,000	(b) Title, and hours per devoted to	week	(c) Compens	ation	em plan	Contributions ployee bene s and deferrompensation	fit ed			se acco	
NO	NE																			
																	-			
									•											
T-4	al nu	mhor	of o	ther	ample	V000	naid o	ver \$50.	000											

Form 990-PF (2010) The 214 Philanthropic Foundation Inc		27-4000348 Page 7
Part VIII Information About Officers, Directors, Trustees, Fou and Contractors (continued)	ındation Managers, Highly Paid	Employees,
3 Five highest-paid independent contractors for professional services (see page	ne 23 of the instructions) If none ento	r "NONE "
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of Service	(c) Compensation
		· · · · · · · · · · · · · · · · · · ·
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 chantable activities during the tax year. Include relevant statistic the number of organizations and other beneficianes served, conferences convened, research papers		Expenses
1		
2		
3		
4		
		·
Part IX-B Summary of Program-Related Investments (see page		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
]		
2		
2		
•		
All other program-related investments See page 24 of the instructions		
3	<u>.</u>	
		0
Total. Add lines 1 through 3	▶	0

Form **990-PF** (2010)

Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts set aside for specific charitable projects that satisfy the

income Enter 1% of Part I, line 27b (see page 26 of the instructions)

Suitability test (prior IRS approval required)

5

6

Cash distribution test (attach the required schedule)

0

0

0

3a

3b

4

5

Pa	t	XIII Undistributed Incor	<b>ne</b> (see page 26 of t	he instructions)			
1		Distributable amount for 2010 fr	om Part XI,	(a) Corpus	(b) Years pnor to 2009	(c) 2009	(d) 2010
2			-645				1,184
2	_	Undistributed income, if any, as	of the end of 2010				
	a	Enter amount for 2009 only	20 20	· · · · · · · · · · · · · · · · · · ·		0	
3	b	Total for prior years 20,			0		
	_	Excess distributions carryover,	If any, to 2010				
	a	From 2005	0				
	b	From 2006	0			1	E
		From 2007	0				
	d	From 2008 .	0				
	e	From 2009	0				
١	r	Total of lines 3a through e		0			
4		Qualifying distributions for 2010	_				
		XII, line 4 • \$	0				
		Applied to 2009, but not more the				0	
	D	Applied to undistributed income					
		(Election required—see page 20	,		0		
(	C	Treated as distributions out of c					
	_	required—see page 26 of the in	,				
(		Applied to 2010 distributable an					0
	е	Remaining amount distributed of	•	0			
5		Excess distributions carryover a		0			0
		(If an amount appears in column	• • •				
_		same amount must be shown in	, , ,				
6		Enter the net total of each col	lumn as				
		indicated below:					
		Corpus Add lines 3f, 4c, and 4e		0		· · · -	
	b	Prior years' undistributed incom	e Subtract				
		line 4b from line 2b			0		
•	C	Enter the amount of prior years'	undistributed				
		income for which a notice of def	ficiency has				
		been issued, or on which the se	ection 4942(a)				
		tax has been previously assess	ed				
•	d	Subtract line 6c from line 6b Ta	axable				
		amount—see page 27 of the ins	structions		0		
(	е	Undistributed income for 2009	Subtract line				
		4a from line 2a Taxable amoun	nt—see page 27 of the				
		instructions				0	
1	f	Undistributed income for 2010	Subtract				
		lines 4d and 5 from line 1 This	amount must				
		be distributed in 2011			w		1,184
7		Amounts treated as distributions					'
		corpus to satisfy requirements i	mposed by				
		section 170(b)(1)(F) or 4942(g)(	(3) (see page 27 of			•	
		the instructions)	•				
8		Excess distributions carryover f	rom 2005				
		not applied on line 5 or line 7 (s	ee page 27 of the				
		instructions)		0			
9		Excess distributions carryove	er to 2011.				
		Subtract lines 7 and 8 from line	6a	0			
10		Analysis of line 9	•		-		
	a	Excess from 2006	0				
	b	Excess from 2007	0				
,	С	Excess from 2008	0				
	d	Excess from 2009	0				
	e	Excess from 2010	0				

	h 990-PF (2010) The 214 Philanthropic Found				27-400	
Pa	rt XIV Private Operating Foundations (s	see page 27 of th	e instructions a	nd Part VII-A, qu	estion 9)	N/A
1 a	If the foundation has received a ruling or determin					
	foundation, and the ruling is effective for 2010, ent		J	▶		
	Check box to indicate whether the foundation is a	private operating four	ndation described ii	n section	4942(J)(3) or	4942(J)(5)
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		40) 70401
	investment return from Part X for each	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	year listed	O				0
b	85% of line 2a	0	0	0	0	0
C	Qualifying distributions from Part XII,					
	line 4 for each year listed	0				0
	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly		-			
	for active conduct of exempt activities Subtract line 2d from line 2c				_]	_
3	Complete 3a, b, or c for the	9	0	0	0	0
•	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3		· ·	,		
	of minimum investment return shown in Part X, line 6 for each year listed	اه				0
С	"Support" alternative test—enter			Y		
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	(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					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Co	mplete this part	only if the four	ndation had \$5	000 or more in	
	assets at any time during the ye				000 01 111010 111	
1	Information Regarding Foundation Manag					
а	List any managers of the foundation who have cor	ntributed more than 2			the foundation	
	before the close of any tax year (but only if they ha	ave contributed more	than \$5,000) (See	section 507(d)(2))		
	ol Gibbons Krauss					
b	List any managers of the foundation who own 10%				ortion of the	
	ownership of a partnership or other entity) of which	n the foundation has	a 10% or greater in	terest		
<u>NO</u> 2	N⊏ Information Regarding Contribution, Gran	A Ciff Loon Sob	alamahin ata Da		<del></del>	
_	Check here ► X if the foundation only makes		• • •	•		
	unsolicited requests for funds. If the foundation manual other conditions, complete items 2a, b, c, are	akes gifts, grants, etc	(see page 28 of th	ne instructions) to inc	dividuals or organizat	ions
а	The name, address, and telephone number of the	person to whom app	lications should be	addressed		<del></del>
-	The form in which confications should be suffered	d and information	d motorials the second	and make de		
10	The form in which applications should be submitte	u and information an	u materials they sho	ouid include		
C	Any submission deadlines		<del></del>	· · · · · · · · · · · · · · · · · · ·		<del></del>
-4	Any restrictions or limitations on awards, such as I	ov deodraphical area	s charitable fields	kinds of institutions	or other	
u	factors	o, goograpilioal alca	o, onantable licius,		o. other	

Part XV	Supplementary	Information	(continued)
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3	Grants and Contributions Paid During th		for Future F	Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
a	Paid during the year				
b	Total Approved for future payment	<u> </u>	<u> </u>	<b>▶</b> 3a	0
	Total			<b>▶</b> 3b	

Analysis of moonie-1 roddoing Acti	Titles				
Enter gross amounts unless otherwise indicated	Unrelated bus	(b)	(c)	n 512, 513, or 514	(e) Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
a					,
b					
c					
d					
e		_			
Total and contracts from covernment accounts					<u> </u>
<ul> <li>g Fees and contracts from government agencies</li> <li>2 Membership dues and assessments</li> </ul>					
3 Interest on savings and temporary cash investments			14	1	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property .					
<b>b</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					
Net income or (loss) from special events     Gross profit or (loss) from sales of inventory			<del></del>		
11 Other revenue a					
b					
С	`				
				-	
d					
е					
e		0		1	
e	ulations )	0		131	0
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions on page 29 to verify calc					
e	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
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e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
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e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
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e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	
e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 29 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which incomthe accomplishment of the foundation's exempt	complishment le is reported in col	of Exempt P	urposes VI-A contributed ii	13	

Forr	n 990-P	F (2010)	The 214 Phil	lanthropic Fou	undation Inc		27-4000	348	Pag	e 13
Pa	rt XVI	Info	ormation Rega	arding Trans	sfers To and Transactions	and Rel	ationships With Noncharit	able		
		Exc	empt Organiza	itions		_				
1					ngage in any of the following wi				Yes	No
			` '	(other than s	ection 501(c)(3) organizations)	or in sect	ion 527, relating to political		1	
	orgar	nization	s?							
а	Trans	sfers fro	m the reporting	foundation to	a noncharitable exempt organiz	ation of				
	(1) C	Cash						1a(1)	_	Х
		Other as						1a(2)		Х
b		r transa						41. (4)		
	• •				mpt organization			1b(1)		X
					able exempt organization			1b(2) 1b(3)	-	X
			if facilities, equipi rsement arrangei		assets			1b(4)		<del>-</del>
			r loan guarantee					1b(5)	_	X
			•		ip or fundraising solicitations			1b(6)	_	X
С					ts, other assets, or paid employ	ees		1c		Х
		•			complete the following schedul		n (b) should always show the fa	air mar	ket	
Ī	value	of the	goods, other ass	ets, or service	es given by the reporting found ement, show in column (d) the	ation If th	e foundation received less than	ı faır m	arket	<u> </u>
(a)	Line no	(b)	Amount involved	(c) Name	of noncharitable exempt organization	(d) Des	scription of transfers, transactions, and s	hanno ai	rrangen	nents
		1		(0)		(-,				
_										
_										
		<b>_</b>			· · ·					
			<del></del>			_				
_		+			<del>-</del>	<del>  -</del>				
_		+	<del> </del>		<del></del>	+	<del></del>			
_		+				+				
_		<del> </del>								
_		1			<del>-</del>	1				
_	<u> </u>					<del></del>				
	1									
		1								
2a					ated with, or related to, one or n		exempt organizations	. F	3	
_					ther than section 501(c)(3)) or i	n section	52/7	Yes 🛚	] No	
	IT YE		nplete the follow	_	(1) T (1)		T			
		(a)	Name of organization		(b) Type of organization		(c) Description of relati	onsnip		
_							_			
_										
- `										
-										
					xamined this return, including accompar in of preparer (other than taxpayer or fide			-	_	
		Signati	ure of officer or theste	e		Date /	Title //	, 16 1 <sub>1</sub>		-

Preparer's signature

Firm's name ► FOUNDATION SOURCE
Firm's address ► 55 WALLS DRIVE, FAIRFIELD, CT 06824

Jeffrey D. Haskell

Pnnt/Type preparer's name

Jeffrey D Haskell

Firm's name

Paid

Preparer Use Only

PTIN

Check III If

self-employed

Firm's EIN

Phone no

Date

6/15/2011

## 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

Name of the organization			Employer identification number	
The 214 Philanthropic Fou	undation Inc		27-4000348	
Organization type (check	(one)			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)(	) (enter number) organization		
	4947(a)(1)	nonexempt charitable trust not treated as	s a private foundation	
	527 politica	al organization		
Form 990-PF	X 501(c)(3) e	xempt private foundation		
	4947(a)(1)	nonexempt charitable trust treated as a p	private foundation	
	501(c)(3) ta	axable private foundation		
Note. Only a section 501( instructions	-	•	eneral Rule and a Special Rule See	
General Rule				
			e year, \$5,000 or more (in money or	
Special Rules				
sections 509(a)(1)	and 170(b)(1)(A)(vi)	), and received from any one contributor,	during the year, a contribution of the greater	
the year, aggrega	anization type (check one)  rs of:  Section:  m 990 or 990-EZ  501(c)( ) (enter number) organization  4947(a)(1) nonexempt charitable trust not treated as a private foundation  527 political organization  m 990-PF  X 501(c)(3) exempt private foundation  4947(a)(1) nonexempt charitable trust treated as a private foundation  4947(a)(1) nonexempt charitable trust treated as a private foundation  501(c)(3) taxable private foundation  ck if your organization is covered by the General Rule or a Special Rule.  e. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See ructions  meral 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  secial 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			
the year, contribut aggregate to more year for an exclus applies to this org	tions for use exclusive than \$1,000 If this sively religious, chari	rely for religious, charitable, etc., purpose box is checked, enter here the total contratable, etc., purpose Do not complete any	es, but these contributions did not ributions that were received during the y of the parts unless the <b>General Rule</b> able, etc , contributions of \$5,000 or more	
Caution. An organization 990-EZ, or 990-PF), but it	that is not covered b must answer "No" o	y the General Rule and/or the Special Ru on Part IV, line 2 of its Form 990, or check	ules does not file Schedule B (Form 990, k 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)

	Schedule B (Form 990	), 990-EZ, or 990-PF) (2010)	
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Page_	1_	of_	1_	of Part I
mplover id	lent	ificat	ion i	number

Name of organization

The 214 Pl	hilanthropic Foundation Inc		27-4000348
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Gibbons Krauss, Carol  147 Deacon Haynes Road  Concord MA 01742-4711  Foreign State or Province  Foreign Country	\$ 401,554	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	Foreign State or Province Foreign Country	\$0	Person 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
3	Foreign State or Province Foreign Country	\$0	Person 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	Foreign State or Province Foreign Country	\$0	Person 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	Foreign State or Province Foreign Country	\$0	Person 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
6	Foreign State or Province	\$0	Person Payroll Noncash (Complete Part II if there is

Name of organization
The 214 Philanthropic Foundation Inc

Employer identification number

27-4000348

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
1	EATON VANCE CORP COM EV, 13196 sh	\$ 401,554	12/30/2010
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u>o</u>	
(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
		\$ <u>o</u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	

	orm 990, 990-EZ, or 990-PF) (2010)	Page 1 of 1 of Part III							
_	=			Employer identification number					
	nilanthropic Foundation Inc			27-4000348					
Part III	Exclusively religious, charitable, etc., i								
	aggregating more than \$1,000 for the y								
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	er the total of e	exclusively religious, cha	iritable, etc.,					
(a) No.	contributions of \$1,000 or less for the year	ar. (Liner tills i	mormation once See in	structions) > \$ 0					
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 a	ZIP + 4	Relationship of transferor to transferee						
	For Prov Country								
(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	71D ± 4	Relationship of transferor to transferee						
	Transieree's fiame, address, and a	CIF T 4	Relationship of transferor to transferee						
			•••••						
	For Prov Country								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
(a) No.									
		•••••							
	(e) Transfer of gift								
	Transferee's name, address, and	ip of transferor to transferee							
	For Prov Country			•					
(a) No.									
(a) No. from Part I	(b) Purpose of gift	(c	) Use of gift	(d) Description of how gift is held					
		(o) T	ransfer of gift						
		(6) 1	Tansier of gift						
	Transferee's name, address, and	ZIP + 4	Relationsh	nip of transferor to transferee					
	Transfer of manney aware on a trick		1.014.01131	ap c. canololol to dallololo					
	For Prov Country								

# Form 990-PF, Part II, Line 10b - Investments: Corporate Stock

		TOTAL:	401,554	398,915
			(q)	(2)
	Description/Symbol/CUSIP Number	Shares	Book Value	Fair Market Value
-	EATON VANCE CORP COM (EV)	13,196	401,55	398,915
7				
က				
4				
2				
9				
7				
8				
6				
10				

The 214 Philanthropic Foundation Inc.

ŭί	Form 990-PF, Part VII-A, Line 10 - Substantial Contributors	Substantial Contributors					
	Name	Street	City	State	Zip Code	Foreign Country	
		147 Descon Havnes Road		9	04742,4744		
1		יין בכמכנון ומיווכן וכסמכ			11/24/11		
7	2						
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4	4						
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The 214 Philanthropic Foundation Inc

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	Expens Accour										
0	Benefits	0			-						
0	Comp	0									
	Avg Hrs								<u>-</u>		
	Title	President / Director / Secretary									
	Zip Code	19809									
	State	DE			-						
	City	Wilmington									
	Street	Source									
	Name	1 Carol Gibbons Krauss									
			7	က	4	2	ဖ	7	8	6	10